

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S PLUGGING REPORT

OFFICE USE ONLY
Log No. 125714
Permit No. _____
Basin _____

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 38768
WELL NAME (if applicable): Sw-2

1 OWNER National Parks Service
MAILING ADDRESS 801 Nevada Way
Boulder City, NV 89005
ADDRESS AT WELL LOCATION 600 Echo Bay Road
Subdivision Name _____ County CLARK

2 LOCATION NW ¼ SW ¼ Sec 5 T 19S N/S R 68 E
PERMIT/WAIVER No. 116-00-001-004
Latitude 36°18'27.38"N UTM E NAD 27
Longitude 114°25'18.97"W N NAD 83/WGS 8

3 TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
Is this well being plugged because a replacement well was drilled? NO
If yes, what is replacement well NO? _____
Is there an existing well log? N/A
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 29.5 Feet Depth Cased 29.5 Feet
7 WELL PLUGGING PROCEDURE
Was well cleaned out to total depth? yes no
If well was not cleaned out to total depth, please explain why: WELL WAS DRY

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>		<u>5640</u>	<u>0</u>	<u>19</u>

Existing Perforations:
Type of perforation FACTORY CUT
Size of perforation 0.20
From 29.5 feet to 19 feet
From _____ feet to _____ feet

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: _____ feet to _____ feet
Was the casing over drilled? yes no
If casing was left in place, please show where additional perforations were made:
Additional Perforations:
Type of perforator used: NONE
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____

5 WATER LEVEL
Static water level NO WATER feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS
Material Used
From 28 feet to 0 feet NEARCEMENT Pumped Poured
From _____ feet to _____ feet Pumped Poured
Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 6-14-16
Date Completed 6-14-16

DG NR/DWR/SNB
RECEIVED
JUN 30 2016

9 DRILLER'S CERTIFICATION
This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.
Name Robert Salois (Cascade Drilling)
Address 4590 Copper Sage St. Las Vegas, NV
Phone 775-217-1389

Nevada contractor's license number issued by the State Contractor's Board 0073966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2270-m
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 6-14-16