

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

OFFICE USE ONLY
Log No. 125734
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. 38518
WELL NAME (if applicable): Well#33

1 OWNER Clark County - Water Reclamation
MAILING ADDRESS 5857 Flamingo Rd
Las Vegas NV 84155

ADDRESS AT WELL LOCATION 5857 East Flamingo Rd.
Clark County, Las Vegas NV
Subdivision Name _____ County: Clark

2 LOCATION NE 1/4 NE 1/4 Sec 22 T 21S N3R 62 E
PERMIT/WAIVER No. DW-1407 161-22-101-001
Issued by Water Resources Parcel No.

Latitude 36.112613 °N UTM E NAD 27
Longitude 115.030514 °W N X NAD 83/WGS 84

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 NOI? _____
Is there an existing well log? Yes
If yes, what is NDWR well log #? 124583
NOI 74259

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 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: _____

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	SCH 40	0	40

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: 0 feet to 40 feet
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	Size of perforation	From	To
machine slot	0.032	20	40
From _____	_____	_____	_____
From _____	_____	_____	_____
From _____	_____	_____	_____
From _____	_____	_____	_____

Additional Perforations:

Type of perforator used:	From	To	Number of perfs per linear foot
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5 WATER LEVEL
Static water level 6 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments

TYPE OF WELL = Temporary Dewatering

8 WELL PLUGGING MATERIALS

Material Used	From	To	lbs/gal	% bentonite	Neat Cement Fluid Weight	Date Started	Date Completed
concrete grout	0	10	_____	_____	_____	4/7/2016	4/7/2016
bentonite seal	10	12	_____	_____	_____	_____	_____
impact sand gravel	12	40	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

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 Viking Drillers, Inc
Contractor
Address 5950 Granite Lake Dr. Granite Bay CA 95746
Contractor

Nevada contractor's license number issued by the State Contractor's Board 0034680

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2361

Signed _____
By driller performing actual drilling on site or contractor

Date 5/2/16

DCNR/DWR/SNBO
RECEIVED
MAY 04 2016

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- 115.0296843
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