

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

OFFICE USE ONLY
Log No. 107102
Permit No. _____
Basin 268

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. **59866**

1. OWNER **Gary Dawson**
MAILING ADDRESS **5540 Goldenrod Reno NV. 89511**

ADDRESS AT WELL LOCATION **5540 Goldenrod Reno**

2. LOCATION **nw¼/nw¼ Sec2T17N/ R19E**

Subdivision Name: _____ County: **Washoe**

PERMIT/WAIVER NO. _____ Issued by Water Resources
Parcel No. **045-535-07**

Latitude **39.37162** UTM E NAD 27
Longitude **119.82426** N 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? Yes No
If yes, what is replacement well NOI? _____
Is there an existing well log? Yes No
If yes, what is NDWR well log #? **20379**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **220 Feet** Depth Cased **220 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)
6 5/8	12.92	.188	0	220

Was the well contaminated? Yes No
Was the casing pulled? Yes No
Was the casing over drilled? Yes No

Existing Perforations:
Type of perforation **Factory**
Size of perforation **3/32**
From **190** feet to **210** feet
From _____ feet to _____ feet

If casing was left in place, please show where additional perforations were made:
Additional Perforations:
Type of perforater used: **Mills Knife**
From **130** feet to **190** feet Number of perfs per linear foot **4**
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____

5. WATER LEVEL
Static water level: **182** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **Cool** °F Quality _____

8. WELL PLUGGING MATERIALS

6. Additional Notes or Comments
On this date we abandoned a 6" x220' well by perforating with Mills Knife from 130' to 190'. We then pumped 2.5 cubic yards of neat cement mixed 5.2 gallons of water per sack. We pumped using tremie pipe from the bottom to the top of the well.

Material Used			
From 0 feet to 220 feet	Cement	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight **15** lbs/gal
Bentonite Grout _____ % bentonite

Washoe County Permit # **WL 070078**

Date Started **7/31/07**
Date Completed **7/31/07**

N 39.371727
W 119.823256 NAD27

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 **Bruce MacKay Pump & Well Service, Inc.**

Address **1600 Mt. Rose Hwy**

Reno, NV 89511

Nevada contractor's license number issued by the State Contractor's Board **23096**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2205**

Signed R. Bruce MacKay
By driller performing actual drilling on site or contractor

Date **8/1/07**

STATE ENGINEERS OFFICE
2007 AUG - 9 AM 10:52