

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

OFFICE USE ONLY 106127

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

Log No. \_\_\_\_\_  
 Permit No. \_\_\_\_\_  
 Basin 085

NOTICE OF INTENT NO. **61960**

1. OWNER **David Wiegenstine** ADDRESS AT WELL LOCATION **2450 Chipmunk Washoe Valley**  
 MAILING ADDRESS **2450 Chipmunk Dr. NE Washoe Valley NV. 89704** Subdivision Name: \_\_\_\_\_ County: **Washoe**

2. LOCATION **SE 1/4 ne 1/4 Sec 31 T17N R20E** Latitude **39.29946** UTM E  NAD 27  
 PERMIT/WAIVER NO. **050-364-02** Longitude **119.77087** N  NAD 83/WGS 84  
Issued by Water Resources Parcel No.

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? intent 61961  
 Is there an existing well log?  Yes  No  
 If yes, what is NDWR well log #?

4. EXISTING WELL CONSTRUCTION  
 Depth Drilled **80** Feet Depth Cased **80** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	80

Existing Perforations:  
 Type of perforation \_\_\_\_\_  
 Size of perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

5. WATER LEVEL  
 Static water level: **61** feet below land surface  
 Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water Temperature: **Cool** °F Quality **Not tested**

6. Additional Notes or Comments  
**On this date we abandoned a 6" x 80' well by pumping 1.5 Cubic yards of neat cement using tremie pipe from the bottom to the top of the well.**

Washoe permit # **WL 080038**  
**N 39.299565**  
**W 119.769569 NAD27**

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:

Was the well contaminated?  Yes  No  
 Was the casing pulled?  Yes  No  
 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: **Mills Knife**  
 From **0** feet to **75** 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 \_\_\_\_\_

8. WELL PLUGGING MATERIALS

Material Used  
**Neat cement**  
 From **0** feet to **80** feet  Pumped  Poured  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  Pumped  Poured

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

Date Started **6/6/08**  
 Date Completed **6/6/08**

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.**  
(CONTRACTOR)

Address **1600 Mt. Rose Hwy**  
(CONTRACTOR)

**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 **2299**

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

Date **6/9/08**

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY