

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

OFFICE USE ONLY
Log No. 107102
Permit No. _____
Basin 091

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. **63590**

1. OWNER **Boomtoun Hotel- Casino** ADDRESS AT WELL LOCATION **Boomtoun Hotel - Casino**
MAILING ADDRESS **P.O.Box 399** **Garson Rd. Verdi NV.**
Verdi NV. 89439 Subdivision Name: _____ County: **Washoe**

2. LOCATION **NW 1/4 Sec 16 T19N/ R18E** Latitude **39.51332** UTM E _____ NAD 27
SW NE M/O-504 Longitude **119.96277** N _____ NAD 83/WGS 84
PERMIT/WAIVER NO. **MW#2** Parcel No. **38-430-02**
Issued by Water Resources

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 #? **40271**

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)
4	SCH40		0	80

Existing Perforations:
Type of perforation **Factory**
Size of perforation **.020**

From 55 feet to 80 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

5. WATER LEVEL
Static water level: **72** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.

Water Temperature: **Cool** °F Quality **Not tested**

6. Additional Notes or Comments
We pumped 10 cu. ft of neat cement down the well from bottom to top.

N 39,513410
W 119,961738 NAD27

60:11117 6-100 0007

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 perforater used: _____

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 _____
From _____ feet to _____ feet	Number of perfs per linear foot _____

8. WELL PLUGGING MATERIALS

Material Used
Neat cement

From 0 feet to 80 feet	<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

Date Started **10/6/08**
Date Completed **10/6/08**

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 **1790**

Signed R. Bruce MacKay
By driller performing actual drilling on site or contractor
Date **10/6/08**