

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

OFFICE USE ONLY **107587**
Log No.
Permit No.
Basin 084

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. **62794**

1. OWNER **Brent Douglas** ADDRESS AT WELL LOCATION **1200 Whiskey Springs Rd.**
MAILING ADDRESS **1200 Whiskey Springs Rd.** **Reno**
Subdivision Name: _____ County: **Washoe**

2. LOCATION **NE 1/4 SE 1/4 Sec 4 T22N R21E** Latitude **39.80359** UTM E NAD 27
PERMIT/WAIVER NO. _____ Parcel No. **077-490-06** Longitude **119.62214** 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 #? **23784**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **231** Feet Depth Cased **231** 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	231

Existing Perforations:
Type of perforation **Factory**
Size of perforation **3/32 x 3**
From **187** feet to **231** feet
From _____ feet to _____ feet

5. WATER LEVEL
Static water level: **210** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments
Washoe Permit WL 080086

N 39.803691
W 119.621122 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 **160** feet to **187** 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 Pumped Poured

From 0 feet to 231 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 **10/9/08**
Date Completed **10/9/08**

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.**

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 **2299**

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

Date **10/21/08**

STATE ENGINEERS OFFICE
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