

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

OFFICE USE ONLY 108440
Log No.
Permit No.
Basin 101

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. 63769-3

1. OWNER **A & K Earth Movers, Inc.** ADDRESS AT WELL LOCATION **Maine Street**
MAILING ADDRESS **P.o. box 1059** **Fallon, NV 89406**
Fallon, NV 89407-1059 Subdivision Name: _____ County: **Churchill**

2. LOCATION **SW¼NW¼ Sec31T19N/ R29E** Latitude **39.46845** UTM E _____ NAD 27
PERMIT/WAIVER NO. **DEW-77** Longitude **-118.77725** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No is there an existing well log? Yes No
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? **unknown**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **30** Feet Depth Cased **30** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	8.76	.508	0	30

Existing Perforations:
Type of perforation Well Screen
Size of perforation **.032**

From 10 feet to 30 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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

6. Additional Notes or Comments

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

8. WELL PLUGGING MATERIALS

From	To	Material Used	Method
From 0 feet to 30 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 **15.6** lbs/gal
Bentonite Grout _____ % bentonite

Date Started **7/20/09**
Date Completed **7/20/09**

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 **Parsons Drilling, Inc.** (CONTRACTOR)

Address **P.O. Box 1265** (CONTRACTOR)

Fallon, NV 89407-1265

Nevada contractor's license number issued by the State Contractor's Board **29064**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1753**

Signed _____
By driller performing actual drilling on site or contractor

Date **8/17/09**

39.468532°N
118.776265°W
NAD 83 (12)

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