

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



OFFICE USE ONLY **1084157**

Log No. _____
 Permit No. _____
 Basin **122**

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **64497**

PRINT OR TYPE ONLY
 NOT WRITE ON BACK

OWNER **Nye County**
 MAILING ADDRESS **P.O. Box 1592**
Tonopah, NV 89049
 LOCATION **SW 1/4 NE 1/4 Sec 8 T12N/ R36E**
 PERMIT/WAIVER NO. **77606/W632A**
Issued by Water Resources Parcel No.

ADDRESS AT WELL LOCATION **Gabbs Valley (airport)**
Gabbs, NV
 Subdivision Name: _____ County: **Nye**
 Latitude **38.91958N** UTM E NAD 27
 Longitude **-117.95339W** 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? **64498**

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

4. EXISTING WELL CONSTRUCTION
 Depth Drilled **600** Feet Depth Cased **600** 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	17	.250	0	20
6 SDR 17	4.95	.390	20	600

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

Existing Perforations:
 Type of perforation **Well Screen**
 Size of perforation **.032**
 From **160** feet to **320** feet
 From **340** feet to **380** feet
 From **420** feet to **580** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

If casing was left in place, please show where additional perforations were made:
 Additional Perforations:
 Type of perforator 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 _____

WATER LEVEL
 Static water level: **135** feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: **cool** °F Quality **unknown**

8. WELL PLUGGING MATERIALS

6. Additional Notes or Comments
Pumped 67 bags of 20% Grout from 600ft to 32ft
From 32 ft to surface pumped Neat Cement to surface

Material Used
 From **600** feet to **32** feet **Grout 20** Pumped Poured
Neat
 From **32** feet to **0** feet **cement** Pumped Poured
 From _____ feet to _____ feet Pumped Poured

38.919655° N
(117.952439° W
NAD 27 (TA)

Neat Cement Fluid Weight **15.6** lbs/gal
 Bentonite Grout **20** % bentonite

Date Started **7/13/09**
 Date Completed **7/13/09**

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 **2307**

Signed _____
 By driller performing actual drilling on site or contractor

Date **8/3/09**

STATE ENGINEERS OFFICE
 2009 SEP -8 PM 1:34
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