

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

OFFICE USE ONLY **109238**

Log No. _____
 Permit No. _____
 Basin: **141**

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. 64503-11

1. OWNER **A & K Earthmovers, Inc.** ADDRESS AT WELL LOCATION **Birch Street**
 MAILING ADDRESS **P.O. Box 1059** **Fallon, NV 89406**

2. LOCATION **SE 1/4 NW 1/4 Sec 35 T 19N N/S R 28 E** Latitude **39.46765** UTM E NAD 27
 PERMIT/WAIVER No. **DEW-78** Longitude **-118.81192** N NAD 83/WGS 84
 Issued by Water Resources Parcel No. _____ Subdivision Name: _____ County: **Churchill**

3. TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 Is this well being plugged because a replacement well was drilled? No
 If yes, what is replacement well NOI? _____
 Is there an existing well log? Yes **108845**
 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

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

Existing Perforations:

Type of perforation	Well Screen
Size of perforation	0.032
From 10 feet to 30 feet	
From _____ feet to _____ feet	
From _____ feet to _____ 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	
	From	feet to	feet	
	From	feet to	feet	
	From	feet to	feet	
	From	feet to	feet	
	From	feet to	feet	

5. WATER LEVEL

Static water level **4** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cool** °F Quality **unknown**

8. WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	
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

6. Additional Notes or Comments

39.467733° N
118.810939° W
N49 27 (10)

Neat Cement Fluid Weight **15.6** lbs/gal
 Bentonite Grout _____ % bentonite
 Date Started **9/29/2009**
 Date Completed **9/29/2009**

STATE ENGINEERS OFFICE
 2009 OCT 22 AM 11:10

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 **Parson's Drilling, Inc.** Contractor
 Address **P.O. Box 1265** Contractor
Fallon, NV 89406
 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 **Wayne Parson** By driller performing actual plugging on site or contractor
 Date **October 16, 2009**