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

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

OFFICE USE ONLY
Log No. 109664
Permit No.
Basin 088

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

NOTICE OF INTENT NO. **64830**

1. OWNER **Mary Cook**
MAILING ADDRESS **5320 Cedarwood Dr.**
Reno, NV 89511

ADDRESS AT WELL LOCATION **5320 Cedarwood Dr.**
Reno, NV 89511
Subdivision Name: **Mountain Meadows #1** *County:* **Washoe**

2. LOCATION ~~SW~~ SE¼NE¼ Sec2T17N/ R19E
PERMIT/WAIVER NO. **045-573-18**
Issued by Water Resources Parcel. No.

Latitude **39.37032** UTM E ☐ NAD 27
Longitude **119.81236** 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 #? **14881**

4. *EXISTING WELL CONSTRUCTION*
Depth Drilled **106** Feet Depth Cased **106** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	.188	0	106

Existing Perforations:
Type of perforation Factory
Size of perforation 1/8 x 3

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: **92** feet below land surface
Artesian flow: ____ G.P.M. ____ P.S.I
Water Temperature: **cool** °F Quality

6. Additional Notes or Comments
Washoe County Permit #
WL090124

39.370410°N
119.811339°W
NAD 27 (TM)

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: **Mills Knife**

From **53** feet to **86** 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		
From	106	feet to 20	feet	Bentonite	☒ Pumped	☐ Poured
From	20	feet to 0	feet	Neat Cement	☒ Pumped	☐ Poured
From		feet to	feet		☐ Pumped	☐ Poured
From		feet to	feet		☐ Pumped	☐ Poured
From		feet to	feet		☐ Pumped	☐ Poured
From		feet to	feet		☐ Pumped	☐ Poured

Neat Cement Fluid Weight **15** lbs/gal
Bentonite Grout **20** % bentonite

Date Started **12/4/09**
Date Completed **12/4/09**

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 **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* **923**
Signed R. Bruce MacKay
By driller performing actual drilling on site or contractor
Date **12/4/09**

STATE ENGINEER'S OFFICE
2009 DEC 28 PM 1:19

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