

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

OFFICE USE ONLY 109833
Log No. _____
Permit No. _____
Basin 145

**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. 45317

1 OWNER Minden Gardnerville Sanitation District
MAILING ADDRESS 1790 Hwy 395
Minden, NV 89423

ADDRESS AT WELL LOCATION 1790 Hwy 395
Minden, NV 89423
Subdivision Name: WWTP County: Douglas

2 LOCATION NE ¼ NW ¼ Sec 30 T 13N R 20 E
PERMIT/AWAIVER No. DEW-75 1320-30-101-001
Issued by Water Resources Parcel No.

Latitude N 38 57.919 Longitude W 119 46.816
UTM E NAD 27 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? no
If yes, what is replacement well NOI? _____

Is there an existing well log? yes
If yes, what is NDWR well log #? 109832

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	3/8	0	40

Existing Perforations:

Type of perforation	Size of perforation	From	To
machine slot	0.032	10	40

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:

From	feet to	feet	Number of perfs per linear foot

5 WATER LEVEL
Static water level 7 feet below land surface
Artesian flow G.P.M. _____ P.S.I. _____
Water temperature _____ *F Quality _____

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used		
0	10	10	concrete grout	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
				<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

6 Additional Notes or Comments

Well #4
N 39.965417
W 119.779276 NAD27

Neat Cement Fluid Weight 94/7 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 12/1/2008
Date Completed 12/1/2008

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 Viking Drillers Inc. Contractor
Address 801 Northport Dr. Contractor
West Sacramento, CA 95691
Nevada contractor's license number issued by the State Contractor's Board 0034680
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2090
Signed _____
Date 12/5/08
By driller performing actual drilling on site or contractor