

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

OFFICE USE ONLY *110061*
Log No. _____
Permit No. _____
Basin 103

**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. 64168

1 OWNER JOEY SBRAGIA
MAILING ADDRESS 650 PIKE ST
DAYTON NV 89403

ADDRESS AT WELL LOCATION 200 RAILROAD
DAYTON NV 89403
Subdivision Name: _____ County: Lyon

2 LOCATION NW ¼ NW ¼ Sec 23 T 16N N/S R 21 E
PERMIT/WAIVER No. SE 006-071-09
Issued by Water Resources Parcel No.

Latitude 39.23410°N UTM E NAD 27
Longitude 119.58983°W 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? _____
If yes, what is replacement well NOI? _____
Is there an existing well log? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled N/A Feet Depth Cased N/A Feet

7 WELL PLUGGING PROCEDURE
Was well cleaned out to total depth? yes no

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	.13.03	.156	0	9

If well was not cleaned out to total depth, please explain why: Tried washing out well jetting out well, sucking out debris with vacuum truck, only got well to 9' called Tim Hunt and he said cement as is

Existing Perforations:
Type of perforation _____ N/A
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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: _____

5 WATER LEVEL
Static water level 9 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Type of perforator used: WAIVED PER-RYAN CLARK
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 _____

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>0</u>	feet to <u>9</u>	feet	<u>NEAT CEMENT</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>

*2009 MAY 19 AM 10:53
STATE ENGINEERS OFFICE*

39.234°N NAD 27 D.D.
119.589°W

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout 94/4 % bentonite
Date Started 04/16/2009
Date Completed 04/30/2009

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 CAPITAL CITY WELL DRILLING AND PUMP SERVICE INC.
Contractor
Address # 20 KIT KAT DRIVE
Contractor
CARSON CITY NV 89706

Nevada contractor's license number _____
issued by the State Contractor's Board 0055548
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 1905

Signed _____
By driller performing actual drilling on site or contractor
Date 05/13/2009