

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

OFFICE USE ONLY **110097**
Log No.
Permit No.
Basin **089**

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. **63672**

1. OWNER **Lewis & Jennette Jordan** ADDRESS AT WELL LOCATION **4145 Old Hwy 395**
MAILING ADDRESS **4145 Old Hwy 395** **Washoe Valley**
Washoe Valley **Washoe Valley** **County: Washoe**

2. LOCATION **SW¼NW¼ Sec3T16N/ R19E** Latitude **39.28167** UTM E NAD 27
PERMIT/WAIVER NO. **055-041-09** Longitude **119.84275** N NAD 83/WGS 84
Issued by Water Resources Parcel No.

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 #? **14746**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **110 Feet** Depth Cased **110 Feet**

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	110

Existing Perforations:
Type of perforation **Factory**
Size of perforation **1/8 x 3**
From **90** feet to **110** feet
From _____ feet to _____ 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: _____

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: **Mills Knife**
From **0** feet to **90** 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 _____
From _____ feet to _____ feet Number of perfs per linear foot _____

5. WATER LEVEL
Static water level: **22** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.

Water Temperature: **Cool** °F Quality _____

6. Additional Notes or Comments

Washoe Permit WL090031

39.282°N NAD27 D.O.
119.842°W

8. WELL PLUGGING MATERIALS

Material Used
Neat cement Pumped Poured
From **0** feet to **20** feet
Bentonite Pumped Poured
From **20** feet to **110** feet
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 **4/7/09**
Date Completed **4/7/09**

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 **1790**

Signed **R. Bruce MacKay**
By driller performing actual drilling on site or contractor
Date **4/7/09**

STATE ENGINEERS OFFICE
2009 APR 10 AM 11:19
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