

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

OFFICE USE ONLY
Log No. 11190
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

016-246-07 (NW SE)

NOTICE OF INTENT NO. 64724

1 OWNER LYON COUNTY UTILITIES
MAILING ADDRESS 231 CORRAL DRIVE 016-246-07
DAYTON, NV 89403

ADDRESS AT WELL LOCATION 65 NEWMAN LN
CARSON CITY, NV 89706

2 LOCATION W 1/4 SE 1/4 Sec 31 T 16N N/S R 21 E
PERMIT/WAIVER No. NDEP # 40032 -816-232-09
Issued by Water Resources Parcel No.

Subdivision Name: _____ County: Lyon
Latitude 39.20675°N UTM E NAD 27
Longitude 119.66754°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? YES
If yes, what is replacement well NOI? 64724
Is there an existing well log? yes
If yes, what is NDWR well log #? 92299

4 EXISTING WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
EXISTING CASING SCHEDULE			
Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet) To (Feet)
<u>2</u>			
<u>SDR21</u>	<u>1.78</u>	<u>.156</u>	<u>+2</u> <u>45</u>

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: _____

Existing Perforations:

Type of perforation	FACTORY SLOT
Size of perforation	<u>0.018</u>
From <u>25</u> feet to <u>45</u> feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

Type of perforator used: N/A

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 DRY feet below land surface
Artesian flow _____ G.P.M. P.S.I.
Water temperature N/A °F Quality N/A

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>45</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"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
WELL WAS DRY SO WE PUMPED FULL OF NEAT CEMENT FORM BOTTOM TO SURFACE
NAD 27 GPS
39.206843°N
119.666529°W
2010 JUL 8 PM 4:10
STATE ENGINEER J. P. G.
Plugging of Well Log # 92199
92299
-MMH

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout 94/4 % bentonite
Date Started 06/14/2010
Date Completed 06/14/2010

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 0055548
issued by the State Contractor's Board
Nevada driller's license number issued by the 1905
Division of Water Resources, the on-site driller
Signed [Signature]
Driller performing actual drilling on site or contractor
Date 07/08/2010