

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

OFFICE USE ONLY  
Log No. 112171  
Permit No. 090  
Basin 090

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. 66222

1. OWNER **Blue Rock Development** ADDRESS AT WELL LOCATION **1145 Lakeshore Blvd**  
MAILING ADDRESS **930 Tahoe Blvd #208-243** **Incline Village, NV**  
**Incline Village, NV, 89451** Subdivision Name: **Rev. PM #5030** County: **Washoe**

2. LOCATION **SE 1/4 SW 1/4 Sec 23 T16 N / R18 E** Latitude **N39.23199** UTM E  NAD 27  
PERMIT/WAIVER NO. **130-312-29** Longitude **W119.93344** 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 #? \_\_\_\_\_

4. EXISTING WELL CONSTRUCTION  
Depth Drilled 62 Feet Depth Cased 62 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
10	18.7	.165	0	62

Existing Perforations:  
Type of perforation \_\_\_\_\_  
Size of perforation \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

5. WATER LEVEL  
Static water level: 25 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 # WL100061**

39.232082°N NAD27  
119.932419°W

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 40 feet to 20 feet Number of perfs per linear foot 5  
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	To	Material	Notes
From <u>62</u>	feet to <u>0</u>	feet <u>neat cement</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Neat Cement Fluid Weight 15 lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 10-13-10  
Date Completed 10-13-10

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 10-14-10

MMH-P