

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

OFFICE USE ONLY
Log No. 115863
Permit No. _____
Basin 087

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. 67197 ✓

1. OWNER **Melarkey Trust** ADDRESS AT WELL LOCATION **1350 Huffaker Lane.**
MAILING ADDRESS **4795 Caughlin Pkwy # 100** **Reno, NV 89511**
Subdivision Name: _____ County: **Washoe**

2. LOCATION **NW¼SE¼ Sec1T18N/ R19E** Latitude **39.454481** UTM E _____ NAD 27
PERMIT/WAIVER NO. _____ Longitude **119.795474** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No
 Domestic Irrigation Test Municipal/Industrial Monitor Stock
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 **125** Feet Depth Cased **125** Feet

| EXISTING CASING SCHEDULE | | | | |
|--------------------------|---------------------|-------------------------|-------------|-----------|
| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
| 6" | N/A | N/A | 0 | 125 |
| | | | | |
| | | | | |

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

5. WATER LEVEL
Static water level: **12** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **cool** °F Quality **not tested**

6. Additional Notes or Comments
Pressure grouted from 125' to 20' with 7 sacks of crumbles.
Pressure grouted from 20' to surface with 5 sacks cement.

Washoe County Permit # **WL110041.**

original well log unknown

RECEIVED

39.454570 NAD 27
119.794451

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 **105** feet to **50** feet Number of perms per linear foot **4**
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____

8. WELL PLUGGING MATERIALS
Material Used
Crumbl
From **125** feet to **20** feet **es** Pumped Poured
From **20** feet to **0** feet **cement** Pumped Poured
From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15** lbs/gal
Bentonite Grout **20** % bentonite

Date Started **12-5-11**
Date Completed **12-8-11**

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 **2159**

Signed *R. Bruce MacKay*
By driller performing actual drilling on site or contractor

Date **12-12-11**

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY