

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

OFFICE USE ONLY
Log No. 116208
Permit No. 63071E
Basin 884

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. 69110A

1. OWNER **The Boeing Company** ADDRESS AT WELL LOCATION **2700 Right Hand Canyon Rd.**
MAILING ADDRESS **6633 Canoga Ave** **Reno, NV 89510**
NW **Canoga Park, CA 91309** *Well name* **Subdivision Name:** **County: Washoe**

2. LOCATION **NE 1/4 Sec 18 T22N/ R22E** Latitude **39.77092** UTM E NAD 27
63071E MO1142 Longitude **119.55039** N NAD 83/WGS 84
PERMIT/WAIVER NO. **CEX-2** Parcel No. **77-310-10**
Issued by Water Resources

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 #? **71582**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **54.9** Feet Depth Cased **54.4** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 PVC		SCH 80	0	54.4

Existing Perforations:
Type of perforation **SS Wire Wrapped Screen**
Size of perforation **.020**
From **14.4** feet to **54.4** 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:
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 _____
From _____ feet to _____ feet Number of perms per linear foot _____

5. WATER LEVEL
Static water level: **27** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **n/k** °F Quality **not known**

8. WELL PLUGGING MATERIALS

Material Used			
From 54.4 feet to 20 feet	Ben/Chip	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 20 feet to 0 feet	Neat C	<input type="checkbox"/> Pumped	<input checked="" 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 **15.5** lbs/gal
Bentonite Grout **80** % bentonite

Date Started **5-18-12**
Date Completed **5-23-12**

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 **5-25-12**

RECEIVED
2012 MAY 31 AM 10:52
STATE ENGINEERS OFFICE

(Rev 05-06) USE ADDITIONAL SHEETS IF NECESSARY
39.771011°N NAD 83
119.549375°W