

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

OFFICE USE ONLY
Log No. 116211
Permit No. 63070E
Basin 084

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**
Canoga Park, CA 91309 Subdivision Name: _____ County: **Washoe**

2. LOCATION **NW 1/4 SE 1/4 Sec 18 T22N R22E** well name _____ Latitude **39.77136** UTM E NAD 27
PERMIT/WAIVER NO. **63070E M/O 1142** Longitude **119.55036** N NAD 83/WGS 84
CEX-05 Parcel No. **77-310-10**

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 #? **71579**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **74.3** Feet Depth Cased **73.8** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 PVC		SCH 80	0	73.8

Existing Perforations:
Type of perforation **SS Wire Wrapped Screen**
Size of perforation **.020**
From **13.8** feet to **73.8** 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: **22** 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 74.3 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
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	

6. Additional Notes or Comments
Facility ID #D-000544

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. Brumby**
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) 39.771451°N
119.549345°W NAD027

USE ADDITIONAL SHEETS IF NECESSARY