

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

OFFICE USE ONLY
 Log No. 117328
 Permit No. _____
 Basin 153

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. 67204

1. OWNER **Saddler Brown Ranch-Doud Frazer**
 MAILING ADDRESS **2401 Saddler Brown Rd. Eureka, NV 89316**
 ADDRESS AT WELL LOCATION **2401 Saddler Brown Rd. Eureka, NV 89316**
 Subdivision Name: _____ County: **Eureka**

2. LOCATION **NE 1/4 NE 1/4 Sec 23 T24N R59E S26**
 PERMIT/WAIVER NO. **R-691** Parcel No. **006-32-004**
 Issued by Water Resources Latitude **N39°57.020** UTM E NAD 27
 Longitude **W116°43.06** 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 No
 If yes, what is replacement well NOI? 67201
 Is there an existing well log? Yes No
 If yes, what is NDWR well log #? _____

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)
6"			+2 33

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:
In the basement of house no access (see waiver)

Existing Perforations:
 Type of perforation _____
 Size of perforation _____

From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

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: **None**

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 _____
From _____	feet to _____	feet	Number of perfs per linear foot _____

5. WATER LEVEL
 Static water level: **17'** feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: **cool** °F Quality _____

8. WELL PLUGGING MATERIALS

		Material Used			
From 33	feet to 20	feet	crumbles	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From 20	feet to 0	feet	cement	<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

6. Additional Notes or Comments
We pressure grouted the well from the bottom to the top.
We used 2 bgs of crumbles & 5 bgs of cement.
The Waiver # R-691

Neat Cement Fluid Weight **15** lbs/gal
 Bentonite Grout **20** % bentonite
 Date Started **2-13-12**
 Date Completed **2-13-12**

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.**
 Address **1600 Mt Rose Hwy. 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. Brundage*
 By driller performing actual drilling on site or contractor
 Date **2-14-12**

* Also see NOI's # 67203 & 67201

RECEIVED
 2012 FEB 29 AM 11:27
 STATE ENGINEERS OFFICE

39.950408°N NAD27
 116.070869°W
 Plugs unknown well log
 Replaced by log # 117328