

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

OFFICE USE ONLY  
Log No. 11754  
Permit No. \_\_\_\_\_  
Basin Orle

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. 70242

1 OWNER Martha Tappia ADDRESS AT WELL LOCATION 725 Sage Street  
MAILING ADDRESS 725 Sage Street Fernley, NV 89408  
Subdivision Name: \_\_\_\_\_ County: Lyon

2 LOCATION NW 1/4 NW 1/4 Sec 23 T 20N N/S R 24 E Latitude 39.59008 UTM E  NAD 27  
PERMIT/WAIVER No. 020-273-04 Longitude 119.26400 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? No  
If yes, what is replacement well NO? \_\_\_\_\_

Is there an existing well log? No  
If yes, what is NDWR well log #? \_\_\_\_\_

4 EXISTING WELL CONSTRUCTION  
Depth Drilled 100 Feet Depth Cased 100 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	100

Existing Perforations:

Type of perforation	Unknown
From _____ feet to _____ feet	From _____ feet to _____ feet
From _____ feet to _____ feet	From _____ feet to _____ feet
From _____ feet to _____ feet	From _____ feet to _____ feet
From _____ feet to _____ 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: Mill Knife

From	feet to	feet	Number of perfs per linear foot
From <u>0</u>	feet to <u>100</u>	feet	<u>4</u>
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____

5 WATER LEVEL  
Static water level 55 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature cool °F Quality unknown

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used
From <u>0</u>	feet to <u>100</u>	feet	Neat 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
From _____	feet to _____	feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

6 Additional Notes or Comments

*Vertical stamp: STATE ENGINEERS OFFICE*

NAD 27  
39.5901620N  
119.262995W  
plugs unknown well log

Neat Cement Fluid Weight 15.6 lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 8/9/2013  
Date Completed 8/9/2013

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 Parsons Drilling Inc. Contractor  
Address P.O. Box 1265 Contractor  
Fallon, NV 89407-1265

Nevada contractor's license number issued by the State Contractor's Board 29064  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1753

Signed [Signature] By driller performing actual drilling on site or contractor  
Date 8/13/2013