

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

OFFICE USE ONLY
Log No. 117837
Permit No. _____
Basin 088

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. 69139 ✓

1. OWNER **Peter Pecsvaradi**
MAILING ADDRESS **16215 Caswell Ln**
Reno, NV 89511

ADDRESS AT WELL LOCATION **Same**
Subdivision Name: _____ County: **Washoe**

2. LOCATION **NW 1/4 SE 1/4 Sec 34 T 18N / R 19 E**
PERMIT/WAIVER NO. _____
Issued by Water Resources **049-070-20**
Parcel No.

Latitude **39.380914** UTM E _____ NAD 27
Longitude **-119.834269** 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? _____

Is there an existing well log? Yes No
If yes, what is NDWR well log #? **81138 & 95486**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **475 Feet** Depth Cased **475 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: _____

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	350
5	9.66	.188	335	475

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: _____

Existing Perforations:
Type of perforation **Factory**
Size of perforation **3/32 X 3"**

From 150	feet to	330	feet
From 435	feet to	475	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet

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: **223** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **?** °F Quality **Not tested**

8. WELL PLUGGING MATERIALS

6. Additional Notes or Comments
Washoe County Permit # WL120053

Material Used

From 475	feet to	173	feet	Crumble	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From 173	feet to	20	feet	Clean Fill	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 20	feet to	0	feet	Neat C	<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

Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite

Date Started **12-3-12**
Date Completed **12-5-12**

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 **12-7-2012**

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2012 DEC 20 AM 11:01
STATE ENGINEERS OFFICE

NAD27 39.381004°N,
119.833247°W

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY