

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

OFFICE USE ONLY
Log No. 117867
Permit No. 088
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. 68958 ✓

1. OWNER **Cruz J. Garcia**
MAILING ADDRESS **5305 Cedarwood Dr. Reno, NV 89511**
ADDRESS AT WELL LOCATION **5305 Cedarwood Dr. Reno, NV 89511**
Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE 1/4 NE 1/4 Sec 2 T17N / R19E**
Latitude **39.370961** UTM E NAD 27
Longitude **-119.812323** N NAD 83/WGS 84
PERMIT/WAIVER NO. **045-572-01** Parcel No. _____
Issued by Water Resources

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 #? _____

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

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 perforater used: **None**

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
From _____	feet to _____	feet

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

5. WATER LEVEL
Static water level: **None** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **N/A** °F Quality _____

8. WELL PLUGGING MATERIALS
Material Used
Cement grout Pumped Poured
From **0** feet to **100** feet
From _____ feet to _____ feet Pumped Poured
Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite

6. Additional Notes or Comments
We abandoned this well by removing the pump, then pouring 1.5 yards of 12 sack cement grout from bottom to top.
We cut the top of the casing off after grouting.

Washoe Co. Permit # WL130007

Date Started **03-14-13**
Date Completed **03-15-13**

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 **2299**
Signed R. Bruce MacKay
By driller performing actual drilling on site or contractor
Date **03-15-13**

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

NAD27 39.371051°N
119.811302°W