

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

OFFICE USE ONLY
Log No. 117775
Permit No. _____
Basin 1

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. **70972**

1. OWNER **City of Fallon** ADDRESS AT WELL LOCATION **1325 New River Pkwy**
MAILING ADDRESS **55 West Williams** **Fallon, NV 89406**
Subdivision Name: _____ County: **Churchill**

2. LOCATION **SW¼SE¼ Sec32T19N / R29E** Latitude **39.463473** UTM E _____ NAD 27
PERMIT/WAIVER NO. **DW-100, R765** **001-781-22** Longitude **118.753142** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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 #? **Pending**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **60** Feet Depth Cased **60** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12 3/4		Sch 40	0	60

Existing Perforations:
Type of perforation **Saw cut**
Size of perforation **5" @ 10 around**
From **0** feet to **60** feet
From _____ feet to _____ feet

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

6. Additional Notes or Comments
This dewatering well was abandoned after its intended use was finished. We poured 3/8 gravel with Cetco medium chip bentonite from 20' to bottom at a 50/50 mixture. We then topped the 20'-0' with 12 sack sand grout.

DW#1

RECEIVED
2013 DEC -9 PM 12:59
STATE ENGINEERS OFFICE

plug well log
117775
NAD27
39.463555°N
118.752140°W

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 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 _____

8. WELL PLUGGING MATERIALS
Material Used
From **0** feet to **20** feet **Sand grt** Pumped Poured
From **20** feet to **60** feet **Grvl/bent** Pumped Poured
From _____ feet to _____ feet Pumped Poured
Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite
Date Started **11-25-13**
Date Completed **11-26-13**

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.**
(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 **11-26-13**