

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

OFFICE USE ONLY
Log No. 119435
Permit No. _____
Basin 101

**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. 68839

1 OWNER Department of the Navy
MAILING ADDRESS 4755 Pasture Rd., Fallon, NV

ADDRESS AT WELL LOCATION
350' NW of the end of B St.

2 LOCATION NW ¼ SW ¼ Sec 23 T 18N N/S R 23 E
PERMIT/WAIVER No. 10de-1011-9
issued by Water Resources Parcel No.

Subdivision Name: P2-SG-07-A County: Churchill
Latitude 39 24. 28.94 N UTM E NAD 27
Longitude 118 42 23.99 W 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? No
If yes, what is replacement well NOI?

Is there an existing well log? NA
If yes, what is NDWR well log #?

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased 1 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6		Sch. 40	0	1

Existing Perforations:
Type of perforation _____
Size of perforation _____
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:
Bottom of the well was tagged

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

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

8 WELL PLUGGING MATERIALS

		Material Used			
From	To	Neat	Neat	Pumped	Poured
0	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
completion was pulled and filled with native soil
plug unknown well log
had 23
39.408120 N
118.4050820 W

Neat Cement Fluid Weight 2 gal lbs/gal
Bentonite Grout _____ % bentonite
Date Started 1/21/2014
Date Completed 1/21/2014

Vertical stamp: RECEIVED DIVISION OF WATER RESOURCES

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 National EWP Contractor
Address 500 Main St. Woodland, CA 95695 Contractor
Nevada contractor's license number issued by the State Contractor's Board 0075355
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2111
Signed [Signature]
Date 1-27-14
By driller performing actual drilling on site or contractor

(Rev. 05-09)

USE ADDITIONAL SHEETS IF NECESSARY