

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

OFFICE USE ONLY
Log No. 121519
Permit No. _____
Basin 087

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. 67647

1 OWNER Reno Tahoe Airport Authority ADDRESS AT WELL LOCATION 1675 National Guard
MAILING ADDRESS P.O. Box 12490 Reno NV 89510 Way Reno NV 89510
Subdivision Name: _____ County: Washoe

2 LOCATION SW 1/4 NE 1/4 Sec 19 T 19 N SR 20 E Latitude 39°29'57.37" N UTM E NAD 27
PERMIT/WAIVER No. 4-000519 1015-210-34 Longitude 119°46'48.01" W N NAD 83/WGS 84
NDWP # _____ Issued by Water Resources Parcel No. _____

3 TYPE OF WELL MW 3 Is this well being plugged because a replacement well was drilled? NO Is there an existing well log? yes
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is NDWR well log #? 37042
If yes, what is replacement well NOI? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 26 Feet Depth Cased 26 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>		<u>sch 40</u>	<u>0</u>	<u>26</u>

Existing Perforations:
Type of perforation slotted screened
Size of perforation 0.020
From 6 feet to 26 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: _____
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 _____ feet below land surface
Artesian flow NO G.P.M. _____ P.S.I. _____
Water temperature _____ °F Quality _____

6 Additional Notes or Comments
Due to 1/2 3' of very fine sand the bottom cap of monitoring well was not broken. After pulling casing the hole collapsed to approx. 10' below surface.
NAD 27
39.499358°N
119.778980°W

8 WELL PLUGGING MATERIALS

From	Material Used	Pumped	Poured
<u>10</u> feet to <u>1</u> feet	<u>port cement</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<u>1</u> feet to <u>0</u> feet	<u>concrete</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
_____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight 24 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 11/20/14
Date Completed 11/20/14

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 Dale Lehman Contractor
Address 520 Edison Way Contractor
Reno NV 89502
Nevada contractor's license number 0077413
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1976
Signed Dale Lehman By driller performing actual drilling on site or contractor
Date 12/5/14