

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

OFFICE USE ONLY
Log No. 121706
Permit No. 803316
Basin 049

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. 67400 72746
WELL NAME (if applicable): 7-E1

1 OWNER NV Energy
MAILING ADDRESS PO Box 10100
Reno NV 89520

ADDRESS AT WELL LOCATION 700 E. Silver St
Elko NV. 89801
Subdivision Name _____ County Elko

2 LOCATION SE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec 15 T 34N N/S R 55 E. Latitude 40.833612N UTM E NAD 27
PERMIT/WAIVER No. NE 801331E 001-352-005 Longitude 115.757999W N NAD 83/WGS 84

issued by Water Resources Parcel No. _____

3 TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

Is this well being plugged because a replacement well was drilled? _____
If yes, what is replacement well NOI? _____

Is there an existing well log? YES
If yes, what is NDWR well log #? 116450

4 EXISTING WELL CONSTRUCTION
Depth Drilled 15 Feet Depth Cased 15 Feet

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>3/4"</u>		<u>PVC</u>	<u>0</u>	<u>12.5</u>

EXISTING CASING SCHEDULE

Existing Perforations:
Type of perforation _____
Size of perforation 0.01

From	feet to	feet
	<u>12.5</u>	<u>15</u>
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: Monitor Well, No Water

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: _____ feet to _____ feet
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 _____
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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 _____ °F Quality _____

6 Additional Notes or Comments
No Water

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	
From <u>15/15</u>	feet to	<u>0</u>	Neat Cement	<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
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 _____ lbs/gal
Bentonite Grout _____ % bentonite

Date Started 11/21/2014
Date Completed 11/21/2014

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 Alternative Drilling Co. Contractor
Address P.O. Box 281166 Lamoille NV, 89828 Contractor

Nevada contractor's license number _____
issued by the State Contractor's Board 073955

Nevada driller's license number issued by the 2421
Division of Water Resources, the on-site driller

Signed _____
By driller performing actual drilling on site or contractor

Date 11/16/2015

RECORDED - 3/11/16
STATE ENGINEERS OFFICE

Plugging Well log 116450