

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

OFFICE USE ONLY
Log No. 121716
Permit No. 80331E
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. 63480 72746
WELL NAME (if applicable): 18-E/18-1

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 1/4 MW 15 T 34N N/S R 55 E
PERMIT/WAIVER No. NE 801331E 001-352-005 Latitude 40.833680N UTM E _____ NAD 27
Longitude 115.757799W 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 #? 115202

4 EXISTING WELL CONSTRUCTION
Depth Drilled 20 Feet Depth Cased 20 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1/4</u>		<u>PVC</u>	<u>0</u>	<u>12</u>

Existing Perforations:
Type of perforation _____
Size of perforation 0.01

From <u>12</u> feet to _____ feet
From _____ feet to <u>20</u> feet
From _____ feet to _____ feet
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: 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 _____
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
Material Used
From 20 feet to 0 feet Neat Cement Pumped Poured
From _____ feet to _____ feet Pumped 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 Lamolille NV. 89828 Contractor
Nevada contractor's license number _____
issued by the State Contractor's Board 073955
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 2421
Signed _____
By driller performing actual drilling on site or contractor
Date 11/16/2015

2015 FEB - 3 AM 10:57
STATE CONTRACTOR'S BOARD
OFFICE

(Rev. 12-13)

USE ADDITIONAL SHEETS IF NECESSARY

pg. _____ of pg. _____

Plugging Well log 115202