

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

OFFICE USE ONLY
 Log No. 121729
 Permit No. _____
 Basin 088

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. **72514**

1. OWNER **Reno Project Management LLC** ADDRESS AT WELL LOCATION **15360 Cherrywood Dr**
 MAILING ADDRESS **6770 S McCarran Blvd Ste 202** **Reno NV 89511**
Reno NV 89509 Subdivision Name: _____ County: **Washoe**

2. LOCATION **NE 1/4 NE 1/4 Sec 2 T 17N / R 19 E** Latitude **39.371979** UTM E _____ NAD 27
 PERMIT/WAIVER NO. _____ Longitude **-119.812203** 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 Is there an existing well log? Yes No
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? **N/A**

4. EXISTING WELL CONSTRUCTION
 Depth Drilled **132** Feet Depth Cased **132** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	132

Existing Perforations:
 Type of perforation **N/A**
 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: _____

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 perforater used: **None - Dry Well**
 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: **Dry** _____ feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F Quality _____

8. WELL PLUGGING MATERIALS

Material Used
 From **0** feet to **132** feet **Cement** Pumped Poured
 From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15.0** lbs/gal
 Bentonite Grout **>30** % bentonite

Date Started **12/31/14**
 Date Completed **12/31/14**

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 **Bruce MacKay Pump & Well Service, Inc.**
 (CONTRACTOR)

Address **1600 Mt. Rose Hwy**
 (CONTRACTOR)

Reno, NV 89511
 (CONTRACTOR)

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 **2299**

Signed *[Signature]*
 By driller performing actual drilling on site or contractor

Date **1/14/15**

Washoe County Permit #WL140067

NAD 27
39.372069°N
119.811182°W

Plugging Unknown Well log