

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

OFFICE USE ONLY
Log No. 122012
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. 72539

1. OWNER **Digrazia Family Trust** ADDRESS AT WELL LOCATION **Same**
MAILING ADDRESS **3505 LaMay Ln**
Reno NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **NE 1/4 SW 1/4 Sec 12 T18 N R19 E** Latitude **39.438065** UTM E _____ NAD 27
PERMIT/WAIVER NO. _____ **040-692-04** Longitude **-119.802081** 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? 73026 If yes, what is NDWR well log #? **13348**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **180** Feet Depth Cased **180** 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	180

Existing Perforations:
Type of perforation Torch Cut
Size of perforation
From **180** feet to **120** feet
From _____ feet to _____ feet

5. WATER LEVEL
Static water level: **101'** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments
Abandoned this well by installing tremie pipe down to bottom and pumping a 12 sack sand slurry from bottom to surface. Perforated from 120' to 60' where the sanitary seal starts. Removed the casing to below grade.

Washoe County Permit # **WL150010**

NAD 27
39.438154°N
119.801058°W

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: **Mills Knife**
From **120** feet to **60** feet Number of perfs per linear foot **4**
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 _____

8. WELL PLUGGING MATERIALS
Material Used
From **0** feet to **180** feet **12 Sack** Pumped Poured
From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite
Date Started **3/5/15**
Date Completed **3/5/15**

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
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 **1790**
Signed _____
By driller performing actual drilling on site or contractor
Date **3/5/15**

(Rev 05-08)

USE ADDITIONAL SHEETS IF NECESSARY

Plugs well log 13348