

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

OFFICE USE ONLY
Log No. 122016
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. 72537

1. OWNER **Cheryl Lukacs** ADDRESS AT WELL LOCATION **Same**
MAILING ADDRESS **12525 Spruce Ln**
Reno NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SW 1/4 SE 1/4 Sec 17 T18N / R 20E** Latitude **39.419630** UTM E NAD 27
PERMIT/WAIVER NO. **044-320-23** Longitude **-119.760883** 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? Yes No
If yes, what is replacement well NOI? _____
Is there an existing well log? Yes No
If yes, what is NDWR well log #? **N/A**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **51** Feet Depth Cased **51** 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	51

Existing Perforations:
Type of perforation **N/A**
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

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

6. Additional Notes or Comments
Abandoned this dry well by pouring neat cement from bottom to surface. Removed the casing to 2' below surface.

Washoe County Permit # **WL150007**

NAD 27
39.419719°N
119.759863°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: **None - Dry Well**
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____

8. WELL PLUGGING MATERIALS
Material Used
From **0** feet to **51** feet **Cement** Pumped Poured
From _____ feet to _____ feet Pumped Poured

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

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 **3/3/15**

Plugs unknown well log