

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

OFFICE USE ONLY
Log No. 122380
Permit No. _____
Basin 101

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. 72888

WELL NAME (if applicable): _____

1 OWNER Robert Trantum
MAILING ADDRESS 6399 Jacobs Rd
Fallon, NV 89406

ADDRESS AT WELL LOCATION 6399 Jacobs Rd
Fallon, NV 89406

Subdivision Name: _____ County: Churchill

2 LOCATION NW ¼ NE ¼ Sec 6 T 19N N/S R 28 E
PERMIT/WAIVER No. 008-071-47
Issued by Water Resources Parcel No. _____

Latitude 39.54571 UTM E NAD 27
Longitude 118.88418 N NAD 83/WGS 84

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

Is this well being plugged because a replacement well was drilled? yes
If yes, what is replacement well NOI? 72887

Is there an existing well log? no
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 19 Feet Depth Cased 19 Feet

7 WELL PLUGGING PROCEDURE
Was well cleaned out to total depth? yes no

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.8	.188	0	19

If well was not cleaned out to total depth, please explain why: _____

Existing Perforations:
Type of perforation unknown
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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:		Mills Knife	
From <u>0</u> feet to <u>19</u> feet	Number of perfs per linear foot	<u>4</u>	
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		
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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 dry feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments
Pumped cement from bottom to top.

Plug unknown log
replaced by log 122380
Need 22
35.15 4157950
113.88 31900

8 WELL PLUGGING MATERIALS

Material Used			
From <u>0</u> feet to <u>19</u> feet	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 15.6 lbs/gal
Bentonite Grout _____ % bentonite

Date Started 4/23/2015
Date Completed 4/23/2015

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 Parsons Drilling, Inc. Contractor
Address P.O. Box 1265 Fallon, NV 89406 Contractor

Nevada contractor's license number _____
issued by the State Contractor's Board 2906

Nevada driller's license number issued by the _____
Division of Water Resources the on-site driller 2307

Signed W. J. Smith
By driller performing actual work on site or contractor

Date 4/29/2015

RECEIVED
2015 MAY 20 AM 11:31
STATE ENGINEERS OFFICE