

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

OFFICE USE ONLY
Log No. 122761
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. 07174

1 OWNER Atlantic Richfield
MAILING ADDRESS P.O. Box 6549
Morago, CA 94570

ADDRESS AT WELL LOCATION
6190 S. Virginia Street Reno, NV
Subdivision Name: _____ County: Washoe

2 LOCATION SW ¼ NW ¼ Sec 31 T 19N N/S R 20 E
PERMIT/WAIVER No. 025-290-16
Issued by Water Resources Parcel No.

Latitude 39.469988° UTM E NAD 27
Longitude -119.785349° 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? No
If yes, what is replacement well NO? _____
Is there an existing well log? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased 23 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)
<u>4</u>		<u>SCH 40</u>		

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

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

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 _____
From _____ feet to _____ feet Number of perfs per linear foot _____

5 WATER LEVEL
Static water level _____ 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 23 feet Pumped Poured
From _____ feet to _____ feet Pumped Poured

6 Additional Notes or Comments
MW-1
Drillout Top 5' and Mushroom Cap

RECEIVED
MAY 14 2013
STATE ENGINEERS OFFICE

Neat Cement Fluid Weight 20 lbs/gal
Bentonite Grout 5 % bentonite
Date Started 5/14/2013
Date Completed 5/14/2013

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 Cascade Drilling, L.P. Contractor
Address 3000 Duluth Street West Sacramento, CA 95691 Contractor
Nevada contractor's license number issued by the State Contractor's Board C23-073966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1977-M
Signed [Signature]
Date _____
By driller performing actual drilling on site or contractor

Plugging Unknown log