

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

OFFICE USE ONLY
 Log No. 122786
 Permit No. _____
 Basin 104

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. 07173

1 OWNER Atlantic Richfield
 MAILING ADDRESS P.O. Box 6549
 Morago, CA 94570
 ADDRESS AT WELL LOCATION
 1017 North Carson Street Carson City, NV
 Subdivision Name: _____ County: Carson City

2 LOCATION NW ¼ NW ¼ Sec 17 T 15N N/S R 20 E
 PERMIT/WAIVER No. 02-161-07
 Issued by Water Resources Parcel No. _____
 Latitude 39° 17' 00.14" N UTM E NAD 27
 Longitude -119° 76' 55.93" W 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 NOI? _____
 Is there an existing well log? _____
 If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	20	Feet
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EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2		SCH 40		

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: _____

Existing Perforations:

Type of perforation	Size of perforation	From	feet to	feet
		From	feet to	feet
		From	feet to	feet
		From	feet to	feet
		From	feet to	feet

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	feet to	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
	From 0	feet to 20	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
	From	feet to	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

6 Additional Notes or Comments

MW-12
 Drillout Top 5' and Mushroom Cap

2013 AUG 14 AM 10:15
 STATE ENGINEERS OFFICE

Neat Cement Fluid Weight 20 lbs/gal
 Bentonite Grout 5 % bentonite
 Date Started 5/6/2013
 Date Completed 5/6/2013

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]
 By driller performing actual drilling on site or contractor
 Date _____

Plugging Unknown log