

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

OFFICE USE ONLY  
Log No. 122534  
Permit No. \_\_\_\_\_  
Basin 065

**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. 71444

1 OWNER University of Nevada System  
MAILING ADDRESS 895 N Centers St. MS 239 Reno, NV 89557

ADDRESS AT WELL LOCATION Clean Water Way, Washoe Co NV

2 LOCATION SE 1/4 SE 1/4 Sec 15 T 19N N/S R 20 E  
PERMIT/WAIVER No. 021-030-10  
Issued by Water Resources Parcel No.

Subdivision Name: \_\_\_\_\_ County: \_\_\_\_\_  
Latitude 39.50806 UTM E  NAD 27  
Longitude -119.717769 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? NA  
If yes, what is replacement well NO? \_\_\_\_\_  
Is there an existing well log? Yes  
If yes, what is NDWR well log #? 2

4 EXISTING WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
EXISTING CASING SCHEDULE			
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet) To (Feet)
2"	.68	0.154	0 15

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: \_\_\_\_\_

Existing Perforations:

From	Type of perforation	Size of perforation	feet to	feet
From				

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:  
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 \_\_\_\_\_

5 WATER LEVEL  
Static water level 12 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

8 WELL PLUGGING MATERIALS

From	feet to	Material Used	Neat Cement	Pumped	Poured
From <u>0</u>	feet to <u>15</u>	feet	<input type="checkbox"/> Neat Cement	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Neat Cement	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Neat Cement	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Neat Cement	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Neat Cement	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Neat Cement	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

6 Additional Notes or Comments  
MW#2  
TYPE OF WELL = MONITORING  
Ind 27  
39.509148N  
119.716549W

Neat Cement Fluid Weight \_\_\_\_\_ lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 7/15/2015  
Date Completed 7/15/2015

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 Viking Drillers Inc Contractor  
Address 5950 Granite Lake Dr Contractor  
Granite Bay, CA 95746  
Nevada contractor's license number issued by the State Contractor's Board 0034680  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2361  
Signed Matthew J. [Signature]  
By driller performing actual drilling on site or contractor  
Date 7/28/15

(Rev. 05-08)

**USE ADDITIONAL SHEETS IF NECESSARY**