

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

OFFICE USE ONLY
Log No. 123522
Permit No. _____
Basin 105

**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. 74257
WELL NAME (if applicable): Well3

1 OWNER BIA - Washoe Tribe of NV and CA
MAILING ADDRESS 311 E. Washington St., Carson City NV
89701

ADDRESS AT WELL LOCATION 919 N Hwy 395
Subdivision Name: _____ County: Douglas

2 LOCATION SE $\frac{1}{4}$ SW $\frac{1}{4}$ Sec 11 T 12N N/S/R 20 E
PERMIT/WAIVER No. DW-117 12201002009
Issued by Water Resources Parcel No.

Latitude 38.911956°N UTM E NAD 27
Longitude 119.708935°W N NAD 83/WGS 8

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? Yes
If yes, what is NDWR well log #? NOI 74269

4 EXISTING WELL CONSTRUCTION
Depth Drilled 30 Feet Depth Cased 30 Feet

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 CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	12	5/8	0	30

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: 0 feet to 30 feet
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	Size of perforation	From	To
machine slot	0.032	0	30

Additional Perforations:

Type of perforator used:	From	To	Number of perfs per linear foot

5 WATER LEVEL
Static water level 8ft feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments

From	To	Material Used		
0	8	concrete grout	<input checked="" type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
8	10	bentonite seal	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
10	30	impact sand gravel	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

TYPE OF WELL = Temporary Dewatering

8 WELL PLUGGING MATERIALS

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started September 14 2015
Date Completed September 14 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. Granite Bay CA 95746 Contractor
Nevada contractor's license number 0034680
Nevada driller's license number issued by the 3361
Signed Matthew J. [Signature]
Date 9/17/15

NAD 27
38.912049°N
119.70793°W

RECEIVED
2015 SEP 25 PM 1:25
STATE ENGINEERS OFFICE

Plugging Well log 123115