

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

OFFICE USE ONLY  
 Log No. 12-3703  
 Permit No. \_\_\_\_\_  
 Basin 088

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. **72538**

1. OWNER **Patrick Swanstrom** ADDRESS AT WELL LOCATION **Same**  
 MAILING ADDRESS **2200 Rhodes Rd**  
**Reno NV 89511** Subdivision Name: \_\_\_\_\_ County: **Washoe**

2. LOCATION **SW 1/4 NW 1/4 Sec 3T 17N / R20E** Latitude **39.368004** UTM E \_\_\_\_\_  NAD 27  
 PERMIT/WAIVER NO. **R-854** Parcel No. **017-390-03** Longitude **-119.731429** N  NAD 83/WGS 84  
*Issued by Water Resources*

3. TYPE OF WELL  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 Is this well being plugged because a replacement well was drilled?  Yes  No  
 If yes, what is replacement well NOI? 73402  
 Is there an existing well log?  Yes  No  
 If yes, what is NDWR well log #?

4. EXISTING WELL CONSTRUCTION

Depth Drilled **70** Feet Depth Cased **70** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	70

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

Existing Perforations:  
 Type of perforation **Factory**  
 Size of perforation

From _____	feet to _____	feet
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: **None - Dry Well**

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

8. WELL PLUGGING MATERIALS

Material Used

From <b>0</b> feet to <b>70</b> feet	<b>Cement</b>	<input type="checkbox"/> Pumped	<input checked="" 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 **15.0** lbs/gal  
 Bentonite Grout **>30** % bentonite

Date Started **9/11/15**  
 Date Completed **9/11/15**

6. Additional Notes or Comments

**Abandoned this dry well by removing the equipment and pouring a 7 sack sand slurry from bottom to surface.**  
**Washoe County Permit # WL150026**

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 **Bruce MacKay Pump & Well Service, Inc.**  
 (CONTRACTOR)  
 Address **1600 Mt. Rose Hwy**  
 (CONTRACTOR)  
**Reno, NV 89511**

Nevada contractor's license number issued by the State Contractor's Board **23096**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1290**

Signed *Franklin*  
 By driller performing actual drilling on site or contractor  
 Date **9/14/15**

NAD 27  
 39.368093  
 119.730411

RECEIVED  
 2015 SEP 30  
 STATE ENGINEER'S OFFICE

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

*Plugging unknown well log*