

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

OFFICE USE ONLY
Log No. 123711
Permit No. _____
Basin 0.88

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. 73411

1. OWNER **Tad Cieszko** ADDRESS AT WELL LOCATION **Same**
MAILING ADDRESS **5555 Goldenrod**
Reno NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **NW 1/4NW 1/4 Sec2 T17N / R19E** Latitude **39.371956** UTM E NAD 27
PERMIT/WAIVER NO. _____ Longitude **-119.823575** N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No
 Domestic Irrigation Test Municipal/Industrial Monitor Stock
If yes, what is replacement well NOI? _____ Is there an existing well log? Yes No
If yes, what is NDWR well log #? **28784**

4. EXISTING WELL CONSTRUCTION

Depth Drilled **250** Feet Depth Cased **250** 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	250

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 **3/32x3**

From 207 feet to 247 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 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: **Dry** _____ feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F Quality _____

8. WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 0	feet to 250	feet	Cement	<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

6. Additional Notes or Comments
Abandoned this well by removing the equipment and pouring a 7 sack sand slurry from bottom to top. Removed the casing to 2' below grade. Washoe County Permit # WL150048

Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite
Date Started **7/17/15**
Date Completed **7/17/15**

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 **2326**
Signed _____
By driller performing actual drilling on site of Contractor
Date **8/10/15**

*NAD 27
39.372046
119.822553*

RECEIVED
2015 SEP 30 AM 11:55
STATE ENGINEERS
FIC

*Plugging well log
28784*