

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

OFFICE USE ONLY
 Log No. 123909
 Permit No. _____
 Basin 0924

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. **73046**

1. OWNER **Alston Construction**
 MAILING ADDRESS **730 Sandhill Rd**
SW **Reno NV 89521**
 ADDRESS AT WELL LOCATION **9050 Red Rock**
Reno NV 89508
 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE 1/4 SW 1/4 Sec 36 T21 N / R18 E**
 PERMIT/WAIVER NO. se **090-030-33**
 Issued by Water Resources Parcel No. _____
 Latitude **39.636198** UTM E NAD 27
 Longitude **-119.911332** 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? Yes No
 If yes, what is replacement well NOI? _____
 Is there an existing well log? Yes No
 If yes, what is NDWR well log #? _____

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

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8"	12.95	.188	0	4

Existing Perforations:
 Type of perforation Unknown
 Size of perforation Unknown

From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	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: _____

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: **None - See Waiver**

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

8. WELL PLUGGING MATERIALS

Material Used			
From <u>0</u> feet to <u>4</u> feet	Cement	<input checked="" 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

Neat Cement Fluid Weight **15.0** lbs/gal
 Bentonite Grout _____ % bentonite

Date Started **4/29/15**
 Date Completed **4/29/15**

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 Services, Inc.**
 Address **1600 Mt. Rose Hwy**
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 **2299**

Signed _____
 By driller performing actual drilling on site or contractor
 Date **5/1/15**

*Nad 27
 39.636289
 -119.910320W*

Washoe County Permit #WL150001

RECEIVED
 MAY 15 PM 1:15
 ENGINEERS

(Rev 05-08)

USE ADDITIONAL SHEETS IF NECESSARY