

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

OFFICE USE ONLY
 Log No. 123928
 Permit No. _____
 Basin 087

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. 73401

1. OWNER **Gary Johnson** ADDRESS AT WELL LOCATION **Same**
 MAILING ADDRESS **3650 Fairview**
Reno NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **NW 1/4 SW 1/4 Sec 12 T 18 N R 19 E** Latitude **39.439517** UTM E _____ NAD 27
 PERMIT/WAIVER NO. _____ Longitude **-119.804988** 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? 73400 If there an existing well log? Yes No
 If yes, what is NDWR well log #? _____

4. EXISTING WELL CONSTRUCTION
 Depth Drilled **71'** Feet Depth Cased **71'** 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	71

Existing Perforations:
 Type of perforation Unknown
 Size of perforation
 From _____ feet to _____ feet
 From _____ feet to _____ feet

5. WATER LEVEL
 Static water level: **Dry** _____ feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments
Poured a 7 sack sand slurry from bottom to surface.
Removed casing to grade (flush with garage floor).
Washoe County Permit # WL150041

NAD 27
39.439606
119.803965

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 perforater 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 _____

8. WELL PLUGGING MATERIALS

Material Used			
From 0 feet to 71 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

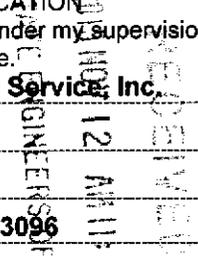
Neat Cement Fluid Weight **15.0** lbs/gal
 Bentonite Grout **>30** % bentonite

Date Started **7/28/15**
 Date Completed **7/28/15**

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 or contractor
 Date **8/10/15**



(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

Plugging unknown well log