

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

OFFICE USE ONLY  
 Log No. 124581  
 Permit No. \_\_\_\_\_  
 Basin 037

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**  
 MAILING ADDRESS **3650 Fairview**  
**Reno NV 89511**

ADDRESS AT WELL LOCATION **Same**  
 Subdivision Name: \_\_\_\_\_ County: **Washoe**

2. LOCATION **NW 1/4 SW 1/4 Sec 12 T 18 /N R 19 E**  
 PERMIT/WAIVER NO. \_\_\_\_\_  
*Issued by Water Resources* **040-692-17**  
 Parcel No. \_\_\_\_\_

Latitude **39.439517** UTM E \_\_\_\_\_  NAD 27  
 Longitude **-119.804988** 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? 73400

Is 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

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)
6 5/8	12.92	.188	0	71

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:

Existing Perforations:  
 Type of perforation Unknown  
 Size of perforation \_\_\_\_\_

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

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

Material Used			
From <b>0</b>	feet to <b>71</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

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**

Neat Cement Fluid Weight **15.0** lbs/gal  
 Bentonite Grout **>30** % bentonite  
 Date Started **7/28/15**  
 Date Completed **7/28/15**

*NAD 27*  
*39.439606°N*  
*119.803965°W*

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**

STATE ENGINEERS OFFICE  
 2016 MAR -4 AM 11:20

*Plugs unknown log*