

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

OFFICE USE ONLY **105780**  
Log No. ....  
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. **61942**

1. OWNER **Sparks Legends Development Co.** ADDRESS AT WELL LOCATION **Sparks Blvd. & East Lincoln Way**  
MAILING ADDRESS **4717 Central St.** **Sparks**  
**Kansas City Mo. 64112** Subdivision Name: \_\_\_\_\_ County: **Washoe**

2. LOCATION **NE 1/4 NE 1/4 Sec 10 T19N R20E** Latitude **39.53438** UTM E \_\_\_\_\_  NAD 27  
PERMIT/WAIVER NO. **M/D-769** Parcel No. **037-030-52** Longitude **119.71587** N \_\_\_\_\_  NAD 83/WGS 84  
*Issued by Water Resources*

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled?  Yes  No Is there an existing well log?  Yes  No  
 Domestic  Irrigation  Test  Municipal/Industrial  Monitor  Stock If yes, what is replacement well NOI? \_\_\_\_\_ If yes, what is NDWR well log #? **46061**

4. EXISTING WELL CONSTRUCTION

Depth Drilled **58** Feet Depth Cased **36** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2		sch40	0	36

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: \_\_\_\_\_

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
From	feet to	feet	Number of perms per linear foot

Existing Perforations:  
Type of perforation saw \_\_\_\_\_  
Size of perforation .020

From	feet to	feet
From <b>26</b>	feet to	<b>36</b> feet
From _____	feet to	feet
From _____	feet to	feet
From _____	feet to	feet
From _____	feet to	feet

5. WATER LEVEL

Static water level: **4** feet below land surface  
Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.

Water Temperature: \_\_\_\_\_ °F Quality \_\_\_\_\_

8. WELL PLUGGING MATERIALS

Material Used

From	feet to	feet	Material	Method
From <b>0</b>	feet to	<b>34</b> feet	<b>neat cement</b>	<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** lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite

Date Started **1/9/08**  
Date Completed **1/9/08**

6. Additional Notes or Comments

**On this date we abandoned a 2" x 36' monitor well by pumping neat cement mixed 5.2 gallons of water per sack. We pumped using tremie pipe from the bottom to the top of the well.**

Washoe County permit WL 080003

**N 39.534489**  
**W 119.714867** **M/D 27**

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 **2299**

Signed **R. Bruce Mackay**  
By driller performing actual drilling on site or contractor

Date **1/11/07**