

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

OFFICE USE ONLY 106117

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

Log No. _____
Permit No. _____
Basin 058

NOTICE OF INTENT NO. **61965**

1. OWNER **Ron & Carolyn Vaughn** ADDRESS AT WELL LOCATION **5520 Goldenrod**
MAILING ADDRESS **5520 Goldenrod Dr.** **Reno**
Reno NV. 89511 **Subdivision Name:** _____ **County: Washoe**

2. LOCATION **SW¼NW¼ Sec2T17N/ R19E** Latitude **39.37052** UTM E _____ NAD 27
PERMIT/WAIVER NO. **045-535-09** Longitude **119.82442** 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 #? **20392**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **200** Feet Depth Cased **198** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	9	.125	+2	198

Existing Perforations:
Type of perforation **Factory**
Size of perforation **3/32 x 3**

From 170	feet to 190	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

5. WATER LEVEL
Static water level: **165** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.

Water Temperature: **Cool** °F Quality **Not tested**

6. Additional Notes or Comments
We pumped 2.5 cubic yards of neat cement using tremie pipe from the bottom to the top of the well.

Washoe permit WL 080037
N39.370627
w 119.823416 NAD27

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: **Mills Knife**

From 170	feet to 115	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	To	Material	Method
From 0	feet to 198	feet Neat 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** lbs/gal
Bentonite Grout _____ % bentonite

Date Started **5/23/08**

Date Completed **5/23/08**

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 **2159**

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

Date **5/23/08**