

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

OFFICE USE ONLY **107019**
 Log No.
 Permit No.
 Basin **057**

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. **62803**

1. OWNER **Reginal Transportation Commission**
 MAILING ADDRESS **1105 Terminal Way Suite 108**
Reno NV. 89520

ADDRESS AT WELL LOCATION **SE corner of 4 th st. & Lake**
Reno
 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE 1/4 NE 1/4 Sec 11 T19 N R19E** **07-311-05**
 PERMIT/WAIVER NO. **M/O-1281** Parcel No. **73105**
Issued by Water Resources

Latitude **39.52970** UTM E NAD 27
 Longitude **119.81023** 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 #? **90346**

4. EXISTING WELL CONSTRUCTION
 Depth Drilled **41** Feet Depth Cased **41** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	PVC	SCH 40	0	41

Existing Perforations:
 Type of perforation **Factory**
 Size of perforation
 From **26** feet to **41** feet
 From _____ feet to _____ feet

5. WATER LEVEL
 Static water level: **22** feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments

N 39.529789
W 119.809205 NAD83

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:
 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
Neat cement
 From **0** feet to **41** feet Pumped Poured
 From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15** lbs/gal
 Bentonite Grout _____ % bentonite
 Date Started **9/11/08**
 Date Completed **9/11/08**

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 **1790**

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

Date **9/16/08**

STATE ENGINEERS OFFICE
 2008 SEP 23 AM 10:50