

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

OFFICE USE ONLY  
Log No. 1107910  
Permit No. \_\_\_\_\_  
Basin 102

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. 0 64687

1. OWNER US Fish and Wildlife Service ADDRESS AT WELL LOCATION Chiglia Ranch - Weeks, NV  
MAILING ADDRESS P.O. Box 1059 Fallon, NV 89406  
Fallon, NV 89407

2. LOCATION NW ¼ SW ¼ Sec 36 T 17N N/S R 24 E Latitude 39.29464 UTM E  NAD 27  
PERMIT/WAIVER No. \_\_\_\_\_ Longitude -119.24795 N  NAD 83/WGS 84  
*Issued by Water Resources* Parcel No. \_\_\_\_\_ Subdivision Name: \_\_\_\_\_ County: Churchill

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

4. EXISTING WELL CONSTRUCTION  
Depth Drilled 30 Feet Depth Cased 30 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	12.92	.188	0	30

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

Existing Perforations:

Type of perforation	Unknown
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

Additional Perforations:

Type of perforator used:	Mills Knife
From <u>0</u> feet to <u>30</u> feet	Number of perfs per linear foot <u>4</u>
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 3 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature Cool °F Quality unknown

8. WELL PLUGGING MATERIALS

From	To	Material Used	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>0</u> feet to <u>30</u> feet		<u>Cement</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet			<input type="checkbox"/>	<input type="checkbox"/>

6. Additional Notes or Comments  
39.295°N NAD 27 D.O.  
119.247°W  
6:11 PM 9-10-09  
STATE ENGINEER

Neat Cement Fluid Weight 15.6 lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 10/16/2009  
Date Completed 10/16/2009

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 Parson's Drilling, Inc. Contractor  
Address P.O. Box 1265 Contractor  
Fallon, NV 89406  
Nevada contractor's license number issued by the State Contractor's Board 29064  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2285  
Signed [Signature] By driller performing actual drilling on site or contractor  
Date October 23, 2009