

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

OFFICE USE ONLY
Log No. 116213
Permit No. 73117E
Basin 084

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. 69110A

1. OWNER **The Boeing Company** ADDRESS AT WELL LOCATION **2700 Right Hand Canyon Rd.**
MAILING ADDRESS **6633 Canoga Ave** **Reno, NV 89510**
NE Canoga Park, CA 91309 Subdivision Name: _____ County: **Washoe**

2. LOCATION **DW/SE 1/4 Sec 18 T22N/ R22E** *well name* Latitude **39.77101** UTM E NAD 27
PERMIT/WAIVER NO. **R492 (CEX-07)** **77-310-04** Longitude **119.55008** N NAD 83/WGS 84
73117E Issued by Water Resources Parcel No. _____

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 #? **98100**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **49** Feet Depth Cased **49** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 PVC		SCH 80	0	49

Existing Perforations:
Type of perforation **FACTORY**
Size of perforation **.020**

From	feet to	feet	feet
From 19	feet to	49	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	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: _____

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 perfs per linear foot
From _____	feet to	_____	_____
From _____	feet to	_____	_____
From _____	feet to	_____	_____
From _____	feet to	_____	_____
From _____	feet to	_____	_____
From _____	feet to	_____	_____
From _____	feet to	_____	_____

5. WATER LEVEL
Static water level: **26** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **n/k** °F Quality **not known**

8. WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	Pumped	Poured
From 49	feet to	20	Ben/Chip	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From 20	feet to	0	Neat C	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight **15.5** lbs/gal
Bentonite Grout **80** % bentonite

Date Started **5-18-12**
Date Completed **5-23-12**

6. Additional Notes or Comments
Facility ID #D-000544

Plug well log to 98100

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 **5-25-12**

RECEIVED
2012 MAY 31 AM 10:52
STATE ENGINEERS OFFICE