

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

**OFFICE USE ONLY**  
Log No. 116722  
Permit No. \_\_\_\_\_  
Basin 093

**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. 65671

1. OWNER WASTE MANAGEMENT INC. ADDRESS AT WELL LOCATION LOCKWOOD REGIONAL LANDFILL  
MAILING ADDRESS 2401 CANYON WAY OUTSIDE OF SPARKS, NV.  
SPARKS, NV. 89434

2. LOCATION SE 1/4 NW 1/4 Sec 22 T 19N N/S R 21 E Latitude 39.50095° UTM E  NAD 27  
PERMIT/WAIVER No. M/O-1624 & R-638 04-11-20 Longitude -119.61993° N  NAD 83/WGS 84  
*Issued by Water Resources* Parcel No. \_\_\_\_\_ Subdivision Name: \_\_\_\_\_ County STOREY

3. TYPE OF WELL  
 Domestic  Irrigation  Test  Stock  
 Municipal/Industrial  Monitor  
Is this well being plugged because a replacement well was drilled? NO  
If yes, what is replacement well NOI? \_\_\_\_\_  
Is there an existing well log? YES  
If yes, what is NDWR well log #? 110596

4. EXISTING WELL CONSTRUCTION

Depth Drilled 200 Feet      Depth Cased 200 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1</u>	<u>PVC</u>	<u>SCH 80</u>	<u>0</u>	<u>200</u>

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:		NONE	
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	Size of perforation	From	To
<u>FACTORY</u>	<u>0.01</u>	<u>180</u> feet to	<u>200</u> feet

5. WATER LEVEL

Static water level DRY feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

8. WELL PLUGGING MATERIALS

From	To	Material Used	Pumped	Poured
<u>0</u> feet to	<u>5</u> feet	<u>NEAT CEMENT</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>5</u> feet to	<u>200</u> feet	<u>GRANULAR BENTONITE</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight \_\_\_\_\_ lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite

Date Started \_\_\_\_\_ 5/19/2013  
Date Completed \_\_\_\_\_ 5/19/2013

6. Additional Notes or Comments

POURED GRANULAR BENTONITE FROM BOTTOM TO 5' BELOW GROUND SURFACE. FILLED UPPER 5' OF WELL CASING AND THE INSIDE OF VAULT SKIRTING WITH NEAT CEMENT

WELL NUMBER WAS B 6N

WELL CASING TOOK 55 POUNDS OF GRANULAR BENTONITE

Plugs well log # 110596

NAD 27  
39.501038° N  
119.619914° W

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 HAZ-TECH DRILLING, INC. Contractor  
Address PO BOX 940 Contractor  
MERIDIAN, ID. 83680  
Nevada contractor's license number issued by the State Contractor's Board 0038018  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller \_\_\_\_\_

Signed [Signature]  
By driller performing actual drilling on site or contractor

Date 5-30-13

RECEIVED  
2013 JUN 24 PM 1:30  
STATE ENGINEERS OFFICE  
M-2137