

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

**OFFICE USE ONLY**  
Log No. 118186  
Permit No. \_\_\_\_\_  
Basin 103

**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. 68174  
68176 ✓

1 OWNER Tom Hoffert ADDRESS AT WELL LOCATION 371 Comstock Dayton  
MAILING ADDRESS 371 Comstock Dayton  
Subdivision Name: \_\_\_\_\_ County: Lyon

2 LOCATION NW 1/4 NW 1/4 Sec 4 T 16N N/S R 22 E Latitude 39°16.831' UTM E  NAD 27  
PERMIT/WAIVER No. 19-131-12 Longitude 119°31.011' N  NAD 83/WGS 84  
Issued by Water Resources Parcel No.

3 TYPE OF WELL  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
Is this well being plugged because a replacement well was drilled? \_\_\_\_\_  
If yes, what is replacement well NOI? 68176 Is there an existing well log? ?  
If yes, what is NDWR well log #? \_\_\_\_\_

4 EXISTING WELL CONSTRUCTION  
Depth Drilled 180 Feet Depth Cased 180 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	.12	.188	+1	180

Existing Perforations:

Type of perforation	Factory
From <u>140</u> feet to <u>180</u> 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: \_\_\_\_\_ Miles Knife

From	feet to	feet	Number of perfs per linear foot
From <u>140</u>	feet to	<u>100</u> feet	<u>4</u>
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____

5 WATER LEVEL  
Static water level 85 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	Material Used
From <u>180</u>	feet to	<u>0</u> 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

6 Additional Notes or Comments

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STATE ENGINEERS OFFICE

NAD 27 39.230517°N  
119.516850°W

Neat Cement Fluid Weight \_\_\_\_\_ lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 7/15/2012  
Date Completed 7/15/2012

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 Blain Drilling Contractor  
Address PO Box 1255 CC NV 89702 Contractor  
Nevada contractor's license number issued by the State Contractor's Board 46498  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2134  
Signed \_\_\_\_\_  
By driller performing actual drilling on site or contractor  
Date 8/10/2012

(Rev. 06-08)

**USE ADDITIONAL SHEETS IF NECESSARY**