

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

OFFICE USE ONLY
Log No. 115260
Permit No. _____
Basin 089

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. **70592**

1. OWNER **George Gillemot** ADDRESS AT WELL LOCATION **4814 Old US 395**
MAILING ADDRESS **4814 Old US 395** **Washoe Valley, NV 89704**
Washoe Valley, NV 89704 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE 1/4 SW 1/4 Sec 3 T16N / R19E** Latitude **39.2754505** UTM E NAD 27
18308/R-747 Longitude **119.8392901** N NAD 83/WGS 84
PERMIT/WAIVER NO. **R-751** Parcel No. **055-042-34**
Issued by Water Resources

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? **70980**
Is there an existing well log? Yes No
If yes, what is NDWR well log #? **4820**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **475** Feet Depth Cased **450** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	35	.250	0	450

Existing Perforations:
Type of perforation **Factory**
Size of perforation **3/16 x 2**
From **50** feet to **450** 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:
The 10" turbine column pipe was stuck in the well. We could not remove the pump due to a collapsed casing at about 100'. The well was not contaminated.

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 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 _____

5. WATER LEVEL
Static water level: **15** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F Quality _____

8. WELL PLUGGING MATERIALS

Material Used
From **0** feet to **100** feet **N/cement** Pumped Poured
From **50** feet to **100** feet **N/cement** Pumped Poured
From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite

Date Started **9-25-13**
Date Completed **9-253**

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.**

Address **1600 Mt. Rose Hwy**

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 **2159**

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

Date **9-26-13**

6. Additional Notes or Comments
This well was abandoned due to collapsed casing and stuck turbine pump. We pumped neat cement from 100' to surface within the 10" column pipe and from about 50' to surface between the column pipe and casing. We used 4 yards neat cement and followed by 4 more yards 12 sack sand gout.

This was a non metered well.

RECEIVED
2013 OCT 21 PM 1:00
STATE ENGINEERS OFFICE

*plug well log 4820
Replaced by 115260*

*NAD 27
39.275541° N
119.838271° W*

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY