

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

OFFICE USE ONLY  
Log No. 15852  
Permit No. \_\_\_\_\_  
Basin 104

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. 71185

1. OWNER **Julius Balardini** ADDRESS AT WELL LOCATION **5049 Highway 50 E**  
MAILING ADDRESS **PO Box 1984** **Carson City, NV 89701**  
**Carson City, NV 89702** Subdivision Name: \_\_\_\_\_ County: **Carson**

2. LOCATION **NE 1/4 NW 1/4 Sec 11 T15N R20E** Latitude **39.184808** UTM E \_\_\_\_\_  NAD 27  
PERMIT/WAIVER NO. **R-767** Parcel No. **008-371-44** Longitude **-119.709118** N \_\_\_\_\_  NAD 83/WGS 84

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 #? **30628, 30477**

4. EXISTING WELL CONSTRUCTION  
Depth Drilled **700** Feet Depth Cased **700** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12	25.22	.201	0	50
8 5/8	20.16	.201	+2	305
6 5/8	12.95	.188	300	100

Existing Perforations:  
Type of perforation **Wire Wound Screen & Factory**  
Size of perforation **.100**

From <b>120</b> feet to <b>160</b> feet
From <b>180</b> feet to <b>210</b> feet
From <b>230</b> feet to <b>300</b> feet
From <b>300</b> feet to <b>700</b> feet

5. WATER LEVEL  
Static water level: **18** feet below land surface  
Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F Quality \_\_\_\_\_

6. Additional Notes or Comments  
**This well was abandoned by installing tremie pipe to bottom and pumping 12 Sack Sand Slurry from bottom to surface. The casing was cut below grade and the Sand Slurry allowed to mushroom over the top of the casing. We did not perforate the casing per waiver #R-767. Carson County Permit # 13-00001076**

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: **None - Waiver # R-767**

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 _____

8. WELL PLUGGING MATERIALS

Material Used			
From <b>0</b> feet to <b>700</b> feet	<b>Neat C</b>	<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

Neat Cement Fluid Weight **15.0** lbs/gal  
Bentonite Grout **>30** % bentonite  
Date Started **12-27-13**  
Date Completed **12-27-13**

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 **12-31-13**

RECEIVED  
2014 JAN -3 AM 11:00  
STATE ENGINEERS OFFICE

*Plugs well tag  
30477  
30628  
NADZ  
39.184808 N  
119.709118 W*