

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

OFFICE USE ONLY
Log No. 115.538
Permit No. _____
Basin 092B

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. 71182

1. OWNER **Jeff & Mary Ellis** ADDRESS AT WELL LOCATION **11785 Heartpine**
MAILING ADDRESS **11785 Heartpine** **Reno, NV 89506**
Subdivision Name: _____ County: **Washoe**

2. LOCATION **NE $\frac{1}{4}$ SW $\frac{1}{4}$ Sec15T21N / R19E** Latitude **39.686393** UTM E _____ NAD 27
PERMIT/WAIVER NO. _____ Longitude **119.839885** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. **080-353-08**

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? _____
Is there an existing well log? Yes No
If yes, what is NDWR well log #? **50040**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **205** Feet Depth Cased **205** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5"	10.72	.188	0	205

Existing Perforations:
Type of perforation **Factory**
Size of perforation **3/32 x 3" x 5** around
From **139** feet to **205** feet
From _____ feet to _____ feet

5. WATER LEVEL
Static water level: **196** 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 due to no water. The customer hooked up to county water. We poured 2.5 yards of 12 sack sand grout from top to bottom and cut the top 2' off of the casing.

WL#130092 *plugs well log 50040*

RECEIVED
2014 JAN -3 AM 11:08
STATE ENGINEERS OFFICE

*NAD 83
39.686393 N
119.839885 W*

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

8. WELL PLUGGING MATERIALS
Material Used
From **0** feet to **205** feet **Sand grt** Pumped Poured
From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite
Date Started **12-16-13**
Date Completed **12-16-13**

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.**

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 **1790**
Signed *R. Bruce MacKay*
By driller performing actual drilling on site or contractor
Date **12-13-13**

(Rev 05-08)

USE ADDITIONAL SHEETS IF NECESSARY