

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

OFFICE USE ONLY
Log No. 119043
Permit No. _____
Basin 049

**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. 37136

1 OWNER City of Elko ADDRESS AT WELL LOCATION 1600 Sewer Treatment Plant Rd.
MAILING ADDRESS 1751 College Ave Elko, NV 89801
Elko, NV 89801 Subdivision Name: _____ County: Elko

2 LOCATION SE 1/4 NW 1/4 Sec 21 T 34N N/S R 55 E Latitude 40.82102 UTM E NAD 27
PERMIT/WAIVER No. DEW-096 001-670-003 Longitude -115.78883 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? no
If yes, what is replacement well NOI? _____
Is there an existing well log? _____
If yes, what is NDWR well log #? 117306

4 EXISTING WELL CONSTRUCTION

Depth Drilled 31 Feet Depth Cased 31 Feet

EXISTING CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| <u>8</u> | <u>6</u> | <u>3/8</u> | <u>0</u> | <u>31</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

Existing Perforations:

| Type of perforation | Size of perforation | From | To |
|------------------------|---------------------|-------------------|----------------|
| <u>machine slotted</u> | <u>0.032</u> | <u>11</u> feet to | <u>31</u> feet |
| | | | |
| | | | |
| | | | |
| | | | |

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 |
|--------------------------|------|---------|------|---------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

5 WATER LEVEL

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

8 WELL PLUGGING MATERIALS

| Material Used | From | feet to | feet | | |
|-----------------------|-----------|-----------|-------------|---------------------------------|--|
| <u>concrete grout</u> | <u>2</u> | <u>12</u> | <u>feet</u> | <input type="checkbox"/> Pumped | <input checked="" type="checkbox"/> Poured |
| <u>5.1 per</u> | <u>12</u> | <u>31</u> | <u>feet</u> | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | | | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | | | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | | | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | | | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |

6 Additional Notes or Comments

Well #1
* change made by DWK start

*2014 JAN 27 AM 2:00
SALE ENGINEERS OFFICE*

*NAD 27
40.821044 N
115.787398 W
plug well log
117306*

Neat Cement Fluid Weight 94/7 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 12/10/2013
Date Completed 12/10/2013

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 Viking Drillers Inc Contractor
Address 801 Northport Dr. Contractor
Sacramento, CA 95691

Nevada contractor's license number issued by the State Contractor's Board 0034680
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M2090

Signed [Signature]
By driller performing actual drilling on site or contractor
Date 1/14/2014