

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

OFFICE USE ONLY  
Log No. 119210  
Permit No. \_\_\_\_\_  
Basin 101

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. 68833

1 OWNER Department of the Navy ADDRESS AT WELL LOCATION  
MAILING ADDRESS 4755 Pasture Rd., Fallon, NV 500' north of the siren tower 300' south of the Delta runway  
Subdivision Name: BS1-15-27 County: Churchill  
2 LOCATION NE 1/4 SE 1/4 Sec 22 T 18N N/S/R 28 E Latitude 39 24 30.27 N UTM E  NAD 27  
PERMIT/WAIVER No. 1006-011-01 Longitude 118 42 26.40 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  
Is there an existing well log? NA  
If yes, what is replacement well NOI? \_\_\_\_\_  
If yes, what is NDWR well log #? \_\_\_\_\_

4 EXISTING WELL CONSTRUCTION  
Depth Drilled \_\_\_\_\_ Feet Depth Cased 10 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>Sch. 40</u>	<u>0</u>	<u>10</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:  
Bottom of the well was tagged  
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

Existing Perforations:

From	Type of perforation	Size of perforation	feet to	feet
From _____	_____	_____	_____	_____
From _____	_____	_____	_____	_____
From _____	_____	_____	_____	_____
From _____	_____	_____	_____	_____
From _____	_____	_____	_____	_____

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

5 WATER LEVEL  
Static water level NA 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	Neat	<input checked="" type="checkbox"/> Pumpe	<input type="checkbox"/> Poured
From <u>0</u>	feet to <u>10</u>	feet			<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet			<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet			<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments  
completion was pulled and filled with native soil  
plug unknown well log  
val 27  
39.4064890N  
118.7063520W

Neat Cement Fluid Weight 5 gal lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 1/16/2014  
Date Completed 1/16/2014

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 National EWP Contractor  
Address 500 Main St. Woodland, CA 95695 Contractor  
Nevada contractor's license number issued by the State Contractor's Board 0075355  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2111  
Signed [Signature] By driller performing actual drilling on site or contractor  
Date 1-27-14