

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

OFFICE USE ONLY  
 Log No. 119265  
 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  
 MAILING ADDRESS 4755 Pasture Rd., Fallon, NV

ADDRESS AT WELL LOCATION  
500' north of the siren tower 300' south of the Delta runway  
 Subdivision Name: BS1-12-2 County: Churchill

2 LOCATION NE ¼ SE ¼ Sec 22 T 18N N/S R 28 E  
 PERMIT/WAIVER No. ad6-011-01  
Issued by Water Resources Parcel No.

Latitude 39.243031 N UTM E  NAD 27  
 Longitude -118.422804 W N  NAD 83/WGS 84

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? NA  
 If yes, what is NDWR well log #?

4 EXISTING WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased 14 Feet

7 WELL PLUGGING PROCEDURE  
 Was well cleaned out to total depth?  yes  no

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2		Sch. 40	0	14

If well was not cleaned out to total depth, please explain why:  
Bottom of the well was tagged

Existing Perforations:  
 Type of perforation \_\_\_\_\_  
 Size of perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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  
 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 \_\_\_\_\_

5 WATER LEVEL  
 Static water level 7.9 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ ° F Quality \_\_\_\_\_

8 WELL PLUGGING MATERIALS

6 Additional Notes or Comments  
completion was pulled and filled with native soil  
plug well log unknown  
ad 27  
39.243031 N  
118.422804 W

Material Used			
From <u>0</u> feet to <u>14</u> feet	Neat	<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 8 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

USE ADDITIONAL SHEETS IF NECESSARY