

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

OFFICE USE ONLY
 Log No. 119334
 Permit No. _____
 Basin 16

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. 68838

1 OWNER Department of the Navy
 MAILING ADDRESS 4755 Pasture Rd., Fallon, NV

ADDRESS AT WELL LOCATION
150' S of A St 50' E of 5th St

2 LOCATION SE 1/4 SW 1/4 Sec 23 T 18N N/S R 23 E
 PERMIT/WAIVER No. 006-091-01
Issued by Water Resources Parcel No.

Subdivision Name: BAT-16-C County: Churchill
 Latitude 39. 24 25.32 N UTM E NAD 27
 Longitude -118. 42 03.79 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	13	Feet
EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
.75		Sch. 40	0	13

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

Existing Perforations:
 Type of perforation _____
 Size of perforation _____

From	feet to	feet
From	feet to	feet

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 6.6 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 type="checkbox"/> Pumpe	<input checked="" type="checkbox"/> Poured
From <u>0</u>	feet to <u>13</u>	feet	neat	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	<input checked="" type="checkbox"/> Poured
From	feet to	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	<input type="checkbox"/> Poured
From	feet to	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	<input type="checkbox"/> Poured
From	feet to	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	<input type="checkbox"/> Poured
From	feet to	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	<input type="checkbox"/> Poured
From	feet to	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	<input type="checkbox"/> Poured

6 Additional Notes or Comments
completion was pulled and filled with native soil
plugs unknown well log
Nad 27
39.242532 N
118.420379 W

Neat Cement Fluid Weight 1 Gal lbs/gal
 Bentonite Grout % bentonite
 Date Started 1/7/2014
 Date Completed 1/8/2014

Vertical scale markings on the left side of the page, likely for depth measurement.

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 1-27-14 [Signature]
 Date _____
By driller performing actual drilling on site or contractor

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 05-06)