

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

OFFICE USE ONLY
Log No. 119342
Permit No. _____
Basin 1C1

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
100' S of the recycle center and 100' west

2 LOCATION SE 1/4 SW 1/4 Sec 23 T 18N N/S R 28 E
PERMIT/WAIVER No. code-all-d
Issued by Water Resources Parcel No.

Subdivision Name: BAT-16-H County: Churchill
Latitude 39.24 13.68 N UTM E NAD 27
Longitude -118.41 58.36 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

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased 15 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
.75		Sch. 40	0	15

Existing Perforations:
Type of perforation _____
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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

From	feet to	feet	Number of perfs per linear foot

5 WATER LEVEL
Static water level 7.77 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	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
0	15	feet	neat	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		feet		<input type="checkbox"/>	<input type="checkbox"/>
		feet		<input type="checkbox"/>	<input type="checkbox"/>
		feet		<input type="checkbox"/>	<input type="checkbox"/>
		feet		<input type="checkbox"/>	<input type="checkbox"/>
		feet		<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments

completion was pulled and filled with native soil
plugs in previous well log
39.24 13.68 N
-118.41 58.36 W

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

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

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY