

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

OFFICE USE ONLY
Log No. 119424
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. 68839

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

ADDRESS AT WELL LOCATION 350' NW of the end of B St.

2 LOCATION NW 1/4 SW 1/4 Sec 23 T 18N N/S R 23 E
PERMIT/WAIVER No. 1006-1011-9
Issued by Water Resources Parcel No.

Subdivision Name: P2-SG-02 County: Churchill
Latitude 39 24. 28.97 N UTM E NAD 27
Longitude 118 42 23.95 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 1 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)
6		Sch. 40	0	1

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 NA 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 unknown well log
Nad 27
39.409128N
118.705671W

From	feet to	feet	Material Used	Neat	<input checked="" type="checkbox"/> Pumpe	<input type="checkbox"/> Poured
From 0	feet to 1	feet			<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 2 gal lbs/gal
Bentonite Grout _____ % bentonite
Date Started 1/21/2014
Date Completed 1/21/2014

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

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY