

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

OFFICE USE ONLY
Log No. 119433
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 73 E
PERMIT/WAIVER No. ccle-611-01
Issued by Water Resources Parcel No.

Subdivision Name: P2-SG-06-A County: Churchill
Latitude 39 24. 28.92 N UTM E _____
Longitude 118 42 23.95 W N _____
 NAD 27
 NAD 83/WGS 84

3 TYPE OF WELL
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Test
 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
EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6		Sch. 40	0	1

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:

Existing Perforations:

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

Type of perforator used: none

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

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
From <u>0</u>	feet to <u>1</u>	feet	Neat <input checked="" type="checkbox"/> Pumpe <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

6 Additional Notes or Comments
completion was pulled and filled with native soil
plugs unknown well log
Nad 27
39 46 11 42 N
118 20 56 11 W

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 James Pulley
Date 1-27-14
By driller performing actual drilling on site or contractor

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY