

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

**OFFICE USE ONLY**

Log No. 119439

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 ADDRESS AT WELL LOCATION SE corner of 4th St. and A St.  
 MAILING ADDRESS 4755 Pasture Rd., Fallon, NV **Subdivision Name:** P3-MW-09 **County:** Churchill

**2 LOCATION** NW ¼ SW ¼ Sec 23 T 18N N/S/R 23 E Latitude 39 24. 28.97 N UTM E \_\_\_\_\_  NAD 27  
 PERMIT/WAIVER No. 006-611-e1 Longitude 118-42:23.89 W N \_\_\_\_\_  NAD 83/WGS 84  
Issued by Water Resources Parcel No. 118 42 23.89 W

**3 TYPE OF WELL**  Domestic  Irrigation  Test  Municipal/Industrial  Monitor  Stock

Is this well being plugged because a replacement well was drilled? No Is there an existing well log? NA  
 If yes, what is replacement well NO? \_\_\_\_\_ If yes, what is NDWR well log #? \_\_\_\_\_

**4 EXISTING WELL CONSTRUCTION**

Depth Drilled 18 Feet Depth Cased \_\_\_\_\_ Feet

**EXISTING CASING SCHEDULE**

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1</u>		<u>Sch. 40</u>	<u>0</u>	<u>18</u>

**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 _____
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 _____

*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	

**5 WATER LEVEL**

Static water level 8.5 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ ° F Quality \_\_\_\_\_

**6 Additional Notes or Comments**

completion was pulled and filled with native soil  
plug within well log  
NAD 27  
39.409128 N  
118.705055 W

RECEIVED  
 2014 FEB - 9 AM 11:00  
 STATE ENGINEERS OFFICE

**8 WELL PLUGGING MATERIALS**

**Material Used**

From <u>0</u> feet to <u>18</u> feet	Neat <input type="checkbox"/> Pumpe <input checked="" 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 [Signature]  
By driller performing actual drilling on site or contractor

Date 1-27-14