

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

OFFICE USE ONLY
Log No. 119449
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 _____
MAILING ADDRESS 4755 Pasture Rd., Fallon, NV 350' NW of the end of B St.
Subdivision Name: P2-SG-08 County: Churchill

2 LOCATION NW ¼ SW ½ Sec 23 T 18N N/S R 3 E Latitude 39 24. 28.82 N UTM E _____ NAD 27
PERMIT/WAIVER No. 050-011-01 Longitude 118 42 23.89 W N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No.

3 TYPE OF WELL Is this well being plugged because a replacement well was drilled? No Is there an existing well log? NA
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NO? _____ 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)
<u>6</u>		<u>Sch. 40</u>	<u>0</u>	<u>1</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

Existing Perforations:

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

Additional Perforations:

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

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	Neat	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>0</u>	feet to <u>1</u>	feet				
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
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
plug unknown well log
NAD 27
39.11090810N
118.805055W

Neat Cement Fluid Weight 2 gal lbs/gal
Bentonite Grout _____ % bentonite
Date Started 1/21/2014
Date Completed 1/21/2014

RECEIVED
 2014 FEB - 3 PM 1:50
 STATE ENGINEERS OFFICE

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 0075355 issued by the State Contractor's Board
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