

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

**OFFICE USE ONLY**  
Log No. 119524  
Permit No. \_\_\_\_\_  
Basin 110C

**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*

**IRPMW197**

NOTICE OF INTENT NO. 67162

1 OWNER <u>Charles King/Hawthorne Army Depot</u>		ADDRESS AT WELL LOCATION <u>1 S Maine Ave. Bldg 5</u>	
MAILING ADDRESS <u>1 S. Maine Ave Bldg 5</u>		<u>Hawthorne, NV</u>	
<u>Hawthorne, NV 89415</u>		Subdivision Name: _____ County: <u>Washoe Mineral</u>	
2 LOCATION NW ¼ NW ¼ Sec <u>30</u> T <u>08N</u> N/S R <u>30</u> E	Latitude <u>38.589629</u>	UTM E _____	<input type="checkbox"/> NAD 27
PERMIT/WAIVER No. _____	<u>006-300-32</u>	Longitude <u>-118.667083</u>	<input checked="" type="checkbox"/> NAD 83/WGS 84
<small>Issued by Water Resources Parcel No.</small>			

3 TYPE OF WELL		Is this well being plugged because a replacement well was drilled? <u>No</u>	Is there an existing well log? _____
<input type="checkbox"/> Domestic	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Test	
<input type="checkbox"/> Municipal/Industrial	<input checked="" type="checkbox"/> Monitor	<input type="checkbox"/> Stock	
		If yes, what is replacement well NOI? _____	If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION				
Depth Drilled	<u>35</u>	Feet	Depth Casad	<u>35</u>
EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>		<u>Sch 40</u>	<u>0</u>	<u>35</u>

7 WELL PLUGGING PROCEDURE			
Was well cleaned out to total depth? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no			
If well was not cleaned out to total depth, please explain why: _____			
Was the well contaminated? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no			
Was the casing pulled? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no			
Was the casing over drilled? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no			
If casing was left in place, please show where additional perforations were made: _____			
Additional Perforations:			
From	feet to	feet	Number of perfs per linear foot

Existing Perforations:

Type of perforation	Slot
Size of perforation	<u>0.01</u>
From <u>15</u> feet to <u>35</u> feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

5 WATER LEVEL	
Static water level	<u>28</u> 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
<u>0</u>	<u>35</u>	<u>35</u>	<u>Cement Grout</u> <input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

6 Additional Notes or Comments

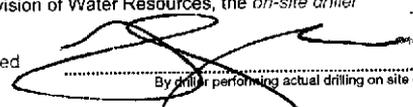
*plug unknown well log*

Neat Cement Fluid Weight 91/5 lbs/gal

Bentonite Grout \_\_\_\_\_ % bentonite

Date Started 1-006

Date Completed 1-006

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	<u>Cascade Drilling, L.P.</u>
Address	<u>3000 Duluth Street</u>
	<u>West Sacramento, CA 95691</u>
Nevada contractor's license number issued by the State Contractor's Board	<u>73966</u>
Nevada driller's license number issued by the Division of Water Resources, the on-site driller	<u>2467</u>
Signed	
Date	_____

RECEIVED  
 2006 FEB 15 AM 11:51  
 STATE ENGINEERS OFFICE  
 NAD 27  
 38.589629  
 -118.667083

(Rev. 05-06)

**USE ADDITIONAL SHEETS IF NECESSARY**