

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

OFFICE USE ONLY
Log No. 120922
Permit No. _____
Basin 076

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. 72505

1. OWNER **Kathy Jackson**
MAILING ADDRESS **PO Box 105**
Fernley NV 89408
ADDRESS AT WELL LOCATION **391 Gazzigli**
Fernley NV 89408
Subdivision Name: _____ County: **Lyon**

2. LOCATION **NE 1/4 SW 1/4 Sec 12 T 20N / R 24 E**
Latitude **39.612680** UTM E _____ NAD 27
Longitude **-119.239538** N _____ NAD 83/WGS 84
PERMIT/WAIVER NO. _____ Parcel No. _____
Issued by Water Resources **021-082-61**

3. TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
Is this well being plugged because a replacement well was drilled? Yes No
Is there an existing well log? Yes No
If yes, what is replacement well NOI? _____
If yes, what is NDWR well log #? **N/A**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **20 Feet** Depth Cased **20 Feet**
EXISTING CASING SCHEDULE
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)
6 5/8 12.92 .188 0 20

Existing Perforations:
Type of perforation **N/A**
Size of perforation **N/A**
From **15 Est** feet to **20 Est** feet
From _____ feet to _____ feet

5. WATER LEVEL
Static water level: **Dry** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments
Abandoned this dry well by pouring Neat Cement from bottom to surface. Removed the casing to 2' below surface.

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: _____

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 perforater used: **None - Dry Well**
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 _____

8. WELL PLUGGING MATERIALS
Material Used
From **0** feet to **20** feet **Neat C** Pumped Poured
From _____ feet to _____ feet Pumped Poured
Neat Cement Fluid Weight **15.0** lbs/gal
Bentonite Grout **>30** % bentonite

Date Started **9/12/14**
Date Completed **9/12/14**

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 **Bruce MacKay Pump & Well Service, Inc.**
(CONTRACTOR)
Address **1600 Mt. Rose Hwy**
(CONTRACTOR)
Reno, NV 89511
Nevada contractor's license number issued by the State Contractor's Board **23096**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2299**
Signed **R. Bruce MacKay**
By driller performing actual drilling on site or contractor
Date **9/16/14**

NAD 27
39.612767°N
119.238537°W

STATE ENGINEERS OFFICE
2014 OCT - 3 PM 12:30

RECEIVED

USE ADDITIONAL SHEETS IF NECESSARY

Plugging Unknown well log