

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

OFFICE USE ONLY
Log No. 12100Z
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. 72414-2

1 OWNER Steele, Jason ADDRESS AT WELL LOCATION 3175 Austin Hwy Fallon, NV 89406
MAILING ADDRESS 3175 Austin Hwy Fallon, NV 89406

Subdivision Name: _____ County: Churchill
2 LOCATION SW ¼ SW ¼ Sec 27 T 19N N/S R 29 E Latitude 39.47863 UTM E NAD 27
PERMIT/WAIVER No. 007-611-58 Longitude -118.72195 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? yes Is there an existing well log? no
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NOI? 72415 If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

| | | | |
|---------------|----------------|-------------|----------------|
| Depth Drilled | <u>25</u> Feet | Depth Cased | <u>25</u> Feet |
|---------------|----------------|-------------|----------------|

EXISTING CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|--------------------|-------------------------|-------------|-----------|
| <u>8</u> | <u>16.9</u> | <u>.188</u> | <u>0</u> | <u>25</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: _____
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: mill knife

Existing Perforations:
Type of perforation unknown
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

| From | feet to | feet | Number of perfs per linear foot |
|----------|-----------|-------------|---------------------------------|
| <u>0</u> | <u>25</u> | <u>feet</u> | <u>4</u> |
| | | | |
| | | | |
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| | | | |

5 WATER LEVEL
Static water level 8 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 | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
|----------|-----------|-------------|--------------------|-------------------------------------|---------------------------------|
| <u>0</u> | <u>25</u> | <u>feet</u> | <u>neat cement</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

6 Additional Notes or Comments
Pumped cement from bottom to top.

NEVADA CONTRACTOR'S LICENSE NO. 29064
39.478482°N
118.721317°W
NAD 27

Neat Cement Fluid Weight 15.6 lbs/gal
Bentonite GROUT _____ % bentonite
Date Started 9/12/2014
Date Completed 9/12/2014

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 Parsons Drilling, Inc. Contractor
Address P.O. Box 1265 Contractor
Fallon, NV 89407
Nevada contractor's license number 29064
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2509
Signed Wagner
By Driller performing special drilling on site or contractor
Date 10-6-14