

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

OFFICE USE ONLY
 Log No. 121009
 Permit No. _____
 Basin 088

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. **72504**

1. OWNER **Erin Dixon** ADDRESS AT WELL LOCATION **Same**
 MAILING ADDRESS **6010 Goldenrod Reno, NV 89511**
 Subdivision Name: _____ County: **Washoe**
 2. LOCATION **NW 1/4 NW 1/4 Sec 2 T 17 N/ R 19 E** Latitude **39.374860** UTM E _____ NAD 27
 PERMIT/WAIVER NO. _____ Parcel No. **045-543-01** Longitude **-119.824305** N _____ NAD 83/WGS 84
Issued by Water Resources

3. TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 Is this well being plugged because a replacement well was drilled? Yes No
 If yes, what is replacement well NO? _____
 Is there an existing well log? Yes No
 If yes, what is NDWR well log #? **27722**

4. EXISTING WELL CONSTRUCTION
 Depth Drilled **315** Feet Depth Cased **298** 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	298

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: _____

Existing Perforations:
 Type of perforation **Factory**
 Size of perforation **3/32 x 3**

From 278 feet to 298 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Type of perforator 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 _____

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

8. WELL PLUGGING MATERIALS
 Material Used
 From **0** feet to **298** feet **12 Sack** Pumped Poured
 From _____ feet to _____ feet Pumped Poured
 Neat Cement Fluid Weight **15.0** lbs/gal
 Bentonite Grout **>30** % bentonite
 Date Started **10/15/14**
 Date Completed **10/15/14**

6. Additional Notes or Comments
Abandoned this dry well by removing the equipment and pouring a 12 sack sand slurry from bottom to surface. Removed the casing to 2' below surface.
Washoe County Permit # WL140049

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 _____
 By driller performing actual drilling on site or contractor
 Date **10/20/14**

NAD 27
39.374950°N
119.823283°W

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

Plugs log 27722