

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

OFFICE USE ONLY
Log No. 124749
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. 74622

1 OWNER Hillside Dairy ADDRESS AT WELL LOCATION 4205 Bass Rd.
MAILING ADDRESS P.O. Box 5186 Fallon, NV 89406
Fallon, NV 89407 Subdivision Name: _____ County: Churchill

2 LOCATION NE ¼ NE ¼ Sec 14 T 16N N/S R 28 E Latitude 39.42761 UTM E _____ NAD 27
PERMIT/WAIVER No. _____ 006-331-15 Longitude 118.80406 N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3 TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

Is this well being plugged because a replacement well was drilled? Yes
If yes, what is replacement well NOI? 74621

Is there an existing well log? No
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

Depth Drilled 17 Feet Depth Cased 17 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/5</u>	<u>12.92</u>	<u>.188</u>	<u>0</u>	<u>17</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: _____

Existing Perforations:

Type of perforation	Unknown
From _____ feet to _____ feet	From _____ feet to _____ feet
From _____ feet to _____ feet	From _____ feet to _____ feet
From _____ feet to _____ feet	From _____ feet to _____ feet
From _____ feet to _____ feet	From _____ feet to _____ feet

Mill Knife

From	feet to	feet	Number of perfs per linear foot
<u>0</u>	<u>17</u>	<u>feet</u>	<u>4</u>
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

From	feet to	feet	Material Used
<u>0</u>	<u>17</u>	<u>feet</u>	Neat Cement <input checked="" 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

Pumped Neat Cement From Bottom To Top

39.42761
118.803075
NAD 27
006-331-15

Neat Cement Fluid Weight 15.6 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 3/1/2016
Date Completed 3/1/2016

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 issued by the State Contractor's Board 29064
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2509

Signed [Signature] By driller performing actual drilling on site or contractor
Date 3/14/2016

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

Plugging unknown well log