

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

OFFICE USE ONLY
 Log No. 124869
 Permit No. _____
 Basin 083

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. 73418

1. OWNER **Apple Inc** ADDRESS AT WELL LOCATION **21505 I-80 E**
 MAILING ADDRESS **1 Infinite Loop MS 47-2RE** **Sparks NV 89434**
Cupertino CA 95014 *Subdivision Name:* _____ *County:* **Washoe**

2. LOCATION **SW¼SW¼ Sec29T20 / R22E** Latitude **39.545984** UTM E NAD 27
 PERMIT/WAIVER NO. **084-110-29** Longitude **-119.547616** 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 No
 If yes, what is replacement well NOI? _____
 Is there an existing well log? Yes No
 If yes, what is NDWR well log #? **N/A**

4. EXISTING WELL CONSTRUCTION

Depth Drilled **305** Feet Depth Cased **305** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12"		.188	0	305

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

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

If casing was left in place, please show where additional perforations were made:
 Additional Perforations:
 Type of perforator used:
 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: **0** feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F Quality _____

8. WELL PLUGGING MATERIALS

Material Used

From	feet to	feet	Material	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From 0	feet to 305	feet	Cement	<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>

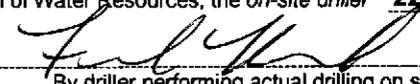
Neat Cement Fluid Weight **15.0** lbs/gal
 Bentonite Grout **>30** % bentonite

Date Started **6/24/15**
 Date Completed **6/26/15**

6. Additional Notes or Comments
Removed all equipment from Well. We then pumped in neat cement from 305' to surface via tremie pipe. Removed the casing to 2' below surface.

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 **8/24/15**

Well Permit # **WL150059**

NAD 27
39.565984°N
119.547616°W

STATE ENGINEERS OFFICE
 2016 MAR -4 AM 11:20

(Rev 05-06)

RECEIVED

USE ADDITIONAL SHEETS IF NECESSARY

Plugs Unknown well log