

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

OFFICE USE ONLY
Log No. 124984
Permit No. _____
Basin 087

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.176 and NAC 534.340

NOTICE OF INTENT NO 72105

1 OWNER THIESSEN Family Trust
MAILING ADDRESS 5405 Vista Terrace Las Vegas, NV 89131
ADDRESS AT WELL LOCATION 495 E Nugget Ave Sparks, NV 89431
Subdivision Name _____ County Washoe
2 LOCATION NE 1/4 Sec 9 T 19 S R 20 E Latitude 39° 31' 51" N UTM E NAD 83
PERMIT/WAIVER No 1034-102-13 Longitude 119° 44' 13" W N NAD 83 508 11

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

4 EXISTING WELL CONSTRUCTION

Depth Drilled 59 Feet Depth Cased 59 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6"</u>		<u>Sch 40 PVC</u>	<u>0</u>	<u>49</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: _____

Existing Perforations

Type of perforation	Size of perforation	From	feet to	feet
<u>Factory Slotted</u>	<u>1.040</u>	<u>49</u>		

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

5 WATER LEVEL

Static water level 17 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	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<u>Neat cement</u>	<u>59</u>		<u>0</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
				<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

6 Additional Notes or Comments

Neat Cement pumped from bottom up to surface

Neat Cement Fluid Weight 15 lbs/gal
Bentonite Grout _____ % bentonite
Date Started _____
Date Completed _____

COINTEGRATED MILLING
NAD 27
39.530922° N
119.735923° W

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 Environmental West Exploration Contractor
Address PO Box 11095 Spokane Valley, WA 99211 Contractor
Nevada contractor's license number _____
issued by the State Controller's Office 0028363
Nevada driller's license number issued by the Division of Water Resources, the _____ 2507 LTD
By [Signature] performing actual drilling on site or contractor
Date 4-25-16

USE ADDITIONAL SHEETS IF NECESSARY

Plugs Unknown Well log