



STATE OF NEVADA  
 DIVISION OF MINERALS  
 DISSOLVED MINERAL RESOURCE EXPLORATION  
 BOREHOLE OR WELL DRILLER'S PLUGGING REPORT  
*Please complete this form in its entirety in accordance with NAC 534B*

Report#: \_\_\_\_\_  
 For Division Use Only

Borehole:   
 Well:

PRINT OR TYPE IN BLACK INK ONLY  
 DO NOT WRITE ON BACK

1. OPERATOR \_\_\_\_\_ BOREHOLE OR WELL NAME: \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_ PROJECT NAME: \_\_\_\_\_  
 COUNTY \_\_\_\_\_ FEDERAL - BLM NVN# \_\_\_\_\_

2. LOCATION 1/4 of the \_\_\_\_\_ 1/4, Sec \_\_\_\_\_ T \_\_\_\_\_  N  S, R \_\_\_\_\_ E  
 Latitude \_\_\_\_\_ or UTM E \_\_\_\_\_  NAD83  
 Longitude \_\_\_\_\_ UTM N \_\_\_\_\_  WGS84

3. NDOM Permit/NOI Number \_\_\_\_\_

4. EXISTING BOREHOLE OR WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet (well only)

5. WATER LEVEL  
 Static water level \_\_\_\_\_ feet below land surface  
 Artesian Flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water Temperature \_\_\_\_\_ °F

6. BOREHOLE/WELL PLUGGING MATERIALS

Material Used _____	From _____	feet to _____	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Material Used _____	From _____	feet to _____	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Material Used _____	From _____	feet to _____	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Material Used _____	From _____	feet to _____	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Material Used _____	From _____	feet to _____	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Material Used _____	From _____	feet to _____	feet	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight lbs/gal \_\_\_\_\_  
 Bentonite Grout \_\_\_\_\_ % bentonite

NEXT SECTION TO BE COMPLETED IN CASE OF WELL PLUGGING ONLY - FOR BOREHOLES SKIP TO SECTION 8

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 casing pulled?  yes  no If pulled, from: \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Was the casing over drilled?  yes  no

EXISTING CASING SCHEDULE

Material Used	Size O.D.	Wt/Ft	Wall Thickness	From	To
_____	_____ (Inches)	_____ (Pounds)	_____ (Inches)	_____ (Feet)	_____ (Feet)
_____	_____ (Inches)	_____ (Pounds)	_____ (Inches)	_____ (Feet)	_____ (Feet)
_____	_____ (Inches)	_____ (Pounds)	_____ (Inches)	_____ (Feet)	_____ (Feet)

Existing Perforations:  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet From \_\_\_\_\_ feet to \_\_\_\_\_ feet

8. Additional Notes or Comments  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

9. Date Started \_\_\_\_\_ Date Completed \_\_\_\_\_

10. DRILLER'S CERTIFICATION  
 This borehole or well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.

Name \_\_\_\_\_ Contractor  
 Address \_\_\_\_\_ Contractor  
 Phone \_\_\_\_\_

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

Signed \_\_\_\_\_ by driller performing actual plugging on site  
 Date \_\_\_\_\_