

**IN THE OFFICE OF THE STATE ENGINEER OF THE STATE OF NEVADA
REQUEST FOR A WAIVER FOR OBSERVATION OR MONITOR WELL(S)**

The applicant and/or person or company responsible for drilling and plugging the temporary well(s):

_____	_____	_____
Name	Title	Company
_____	_____	_____
Street Address or PO Box	City or Town	State and ZIP Code

Telephone number of responsible party: _____

Estimated project dates: _____ Start Date _____ Completion Date

Location of the well: **PLSS, GPS Coordinates and Map Datum are required.**

(If more than one well is to be installed for the same project, use the accompanying form to list each well.)

_____ ¼ _____ ¼ Section _____ T _____ R _____ E, M.D.B. & M.

{ Latitude (N): _____ }	or	{ UTM (m) E: _____ }	Datum
{ Longitude (W): _____ }		{ UTM (m) N: _____ }	_____

County Assessor Parcel Number (APN): _____

Street Address (if any): _____

NDEP Order # (if any): _____

Purpose and duration of well(s):

If this waiver is an amendment or change to an original waiver, or if the property has other monitor wells installed, please give the original waiver number. M/O - _____

The following items must be submitted with the waiver request:

- **A schematic drawing of the typical monitor well construction**
- **Affidavit of Intent to Plug a Well (Listing all wells by well ID/Name) (Separate Affidavit for each ¼, ¼)**
- **Location Map (i.e., Large Scale, inch = miles)**
- **Site Detail Map (i.e., Small Scale, inch = feet)**

Signatory Contact Information:

_____	_____
Telephone Number	Printed Name
_____	_____
Email Address	Signature
_____	_____
Mailing Address	_____
_____	_____
City, State, ZIP Code	Date

IN THE OFFICE OF THE STATE ENGINEER OF NEVADA

AFFIDAVIT OF INTENT
TO PLUG A WELL

I, _____ Name & Title
_____ Company
_____ Address
_____ Telephone Number

of the real property located at:

Street address (if any) _____

County Assessor Parcel Number (APN) _____

Situated within the _____¹/₄ _____¹/₄ Section _____ T _____ R _____ E, M.D.B. & M.

{ Latitude (N): _____ } or { UTM (m) E: _____ } Datum
{ Longitude (W): _____ } { UTM (m) N: _____ }

and whereupon an existing well or wells are located or to be located, fully understand that I shall be responsible for, and shall cause the existing well to be plugged in accordance with the provisions contained in Nevada Administrative Code (NAC) 534, imposed in the terms set forth in the waiver approval and all other applicable rules and regulations for drilling/plugging wells in the State of Nevada.

I shall further make any purchaser of this parcel aware of these conditions.

Responsible Party

(Printed Name): _____ (Signature): _____

State of Nevada

County of _____

Subscribed and sworn to before me on _____

by _____

Signature of Notary Public Required

Notary Seal