## IN THE OFFICE OF THE STATE ENGINEER OF THE STATE OF NEVADA REQUEST FOR A WAIVER FOR TEMPORARY DEWATERING

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			
Felephone number of responsible party:					
Estimated project dates:	Start Date	Completion Date			
Location of the well: PLSS, GPS Coording of the well is to be installed for the same property of the same property	-	-			
<u>'</u> / <sub>4</sub> <u>'</u> / <sub>4</sub> Section	T R	E, M.D.B. & M.			
<pre>{ Latitude (N): Longitude (W):</pre>	or $\begin{cases} UTM (m) E: \\ UTM (m) N: \end{cases}$	Datum			
County Assessor Parcel Number (APN):					
Street Address (if any):					
Purpose of well(s):					
Number of daysx Gallons per da					
Estimated amount of water to be used: Number of daysx Gallons per da If this waiver is an amendment or change t has other wells installed, please give the or	to an original waiver, or if the				
Number of daysx Gallons per da If this waiver is an amendment or change t has other wells installed, please give the or	to an original waiver, or if the riginal waiver number. s must be submitted with the ypical dewatering well constr Well ale, inch = miles)	property DEW waiver request:			
Number of daysx Gallons per da f this waiver is an amendment or change to has other wells installed, please give the or The following items • A schematic drawing of the ty • Affidavit of Intent to Plug a V • Location Map (i.e., Large Sca • Site Detail Map (i.e., Small Sc Signatory Contact Information:	to an original waiver, or if the riginal waiver number. s must be submitted with the ypical dewatering well constr Well ale, inch = miles)	property DEW waiver request: ruction			
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## Additional Well Locations

Coordinate system \_\_\_\_\_

Datum \_\_\_\_\_

Well ID/Name	Coord	inates	1/4	1/4	Sec.	Twn	Rng	APN