

**IN THE OFFICE OF THE STATE ENGINEER OF THE STATE OF NEVADA
REQUEST FOR WAIVER OF THE PROVISIONS OF THE WELL DRILLING
REGULATIONS AS ADOPTED UNDER
CHAPTER 534 OF THE NEVADA ADMINISTRATIVE CODE**

The applicant and/or person or company responsible:

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

Telephone number of responsible party: _____

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

_____ 1/4 _____ 1/4 Section _____ T _____ R _____ E, M.D.B. & M.

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

County Assessor Parcel Number (APN): _____

Street Address (if any): _____

Purpose and reason for requesting this waiver: *(Attach additional sheets as necessary)*

Section(s) of the regulations to be waived: _____

Is this an existing well? _____ If yes, what is the NDWR well log number? _____

Signatory Contact Information:

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

**IF DEVIATING FROM WELL CONSTRUCTION OR PLUGGING REGULATIONS, ATTACH A
DETAILED EXPLANATION OF PROPOSED PROCEDURES.**