

# WELL LOG AND REPORT TO THE STATE ENGINEER OF NEVADA

PLEASE COMPLETE THIS FORM IN ITS ENTIRETY

II

Log No. 5229  
 Rec. July 22 1960  
 Well No. \_\_\_\_\_  
 Permit No. 18434  
*Do not fill in*

Owner Jamestown Enterprises Driller Manuel Farmer  
1350 Long Beach Blvd.  
 Address Long Beach, Calif. Address General Delivery Smith, Nevada Lic. No. \_\_\_\_\_

Location of well: SE 1/4 SW 1/4 Sec 24, T12 N 8, R25 E, in MDB&M Lyon County  
 or Application No. 18434

Water will be used for \_\_\_\_\_ Total depth of well test hole only

Size of drilled hole \_\_\_\_\_ Weight of casing per linear foot \_\_\_\_\_

Thickness of casing \_\_\_\_\_ Temp. of water \_\_\_\_\_

Diameter and length of casing \_\_\_\_\_  
(Casing 12" in diameter and under give inside diameter; casing 12" in diameter give outside diameter.)

If flowing well give flow in c.f.s. or g.p.m. and pressure \_\_\_\_\_

If nonflowing well give depth of standing water from surface \_\_\_\_\_

If flowing well describe control works \_\_\_\_\_  
(Type and size of valve, etc.)

Date of commencement of well 4/19/60 Date of completion of well 4/23/60

Type of well rig Rotary

### LOG OF FORMATIONS

From feet	To feet	Thickness feet	Type of material	Water-bearing Formation, Casing Perforations, Etc.
0	20		boulders and surface soil	
20	40		boulders and sand	
40	60		boulders and sand	
60	65		" "	
65	69		sand and clay streaks	Chief aquifer (water-bearing formation) from _____ to _____ ft.
69	84		decomposed granite	Other aquifers _____
84	90		loose gravel	_____
90	106		decomposed granite getting hard	_____
				First water at _____ feet.
				Casing perforated from _____ to _____ ft.
				Size of perforations _____



**LOG OF FORMATIONS—Continued**

From feet	To feet	Thickness	Type of material

**CASING RECORD**

Diam. casing	From feet	To feet	Length	"Remarks"—Seals, Grouting, Etc.

**GENERAL INFORMATION—Pumping Test, Quality of Water, Etc.**

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**WELL DRILLER'S STATEMENT**

This well was drilled under my jurisdiction and the above information is true to my best information and belief.

Signed.....  
Well Driller

By.....

License No.....

Dated....., 19.....

(Not to be filled in by Driller)

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STATE ENGINEER  
OFFICE