DIVISION OF WATER RESOURCES

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 10229
Permit No.
Basin Mason V
CARD

1. OWNER Glenn Palmer ADDRESS Rt 1 Box 93 Miami Arizona

2. LOCATION ¼ ¼ Sec. 16 T. 14 N/S R. 25 E. Lyon County
PERMIT NO.

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☐

4. PROPOSED USE
Domestic ☒ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☒ Rotary ☐
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brn. Sandy top soil		0	5	5
Hard Pan		5	7	2
Brown Sandy clay	✓	7	15	8
Brown Sand	✓	15	24	9
Brn. Sandy clay		24	28	4
Brown Sand	✓	28	58	30
Brn. Sandy clay		58	69	11
Blue Gravel + Sand	✓	69	72	3
Brown clay		72	75	3

Date started Aug 27, 1968
Date completed Aug 28, 1968

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. 50 Draw down ____ feet ____ hours
G.P.M. ____ Draw down ____ feet ____ hours
G.P.M. ____ Draw down ____ feet ____ hours

8. WELL CONSTRUCTION
Diameter hole 10" to 50' inches Total depth 75 feet
Casing record 6" x 76'
Weight per foot 9.7 lbs Thickness 10 ga

Diameter	From	To
6" inches	0 feet	75 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type Cement
Depth of seal 50' feet
Gravel packed: Yes ☐ No ☒
Gravel packed from ____ feet to ____ feet

Perforations:
Type perforation Factory sawed
Size perforation 3" X 3/32
From 52 feet to 72 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

9. WATER LEVEL
Static water level ____ Feet below land surface 12
Flow ____ G.P.M.
Water temperature Cold ° F. Quality Good

10. DRILLERS CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name W. E. Blair
Address P.O. Box 255 Carson City
Nevada contractor's license number 5259
Nevada driller's license number 301
Signed W E Blair
Date 9-9-68

USE ADDITIONAL SHEETS IF NECESSARY

5471