

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
 Log No. 10215
 Permit No.
 Basin Desert Carson D

1. OWNER Arlene Hart ADDRESS R1 Box 376-1 Fallon, Nev

2. LOCATION SE 1/4 SE 1/4 Sec. 6 T. 18 N/S.R. 29 E Churchill 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	Thick-ness
1' fine sand		0	1	1
8' clay		1	9	8
7' silt & sand		9	16	7
4' fine sand	✓	16	20	4
Casing on clay				
8' of 12" casing				
20' of 8"				

8. WELL CONSTRUCTION
 Diameter hole 8-12 inches Total depth..... feet
 Casing record.....
 Weight per foot..... Thickness.....
 Diameter From To
12 inches 0 feet 8 feet
8 inches 0 feet 20 feet
 inches feet feet
 inches feet feet
 inches feet feet
 Surface seal: Yes No Type Cement
 Depth of seal..... feet
 Gravel packed: Yes No
 Gravel packed from 0 feet to 8 feet
 Perforations:
 Type perforation Spork Cut
 Size perforation 1/8 x 6
 From 12 feet to 20 feet
 From..... feet to..... feet
 From..... feet to..... feet
 From..... feet to..... feet
 From..... feet to..... feet

9. WATER LEVEL
 Static water level 9 Feet below land surface
 Flow 8 G.P.M.
 Water temperature Cold F. Quality fair

Date started Aug 30 Sep 3 1968
 Date completed Sep 5 1968

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
1750	8	4	3

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name W. W. Welshenbaugh
 Address PO Box 625, Fallon, Nev
 Nevada contractor's license number 9105
 Nevada driller's license number 494
 Signed W. W. Welshenbaugh
 Date 9-10-68

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