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. 14061
Permit No.
Basin Carson Val.

1. OWNER Mike Lombardo ADDRESS 27806 Rosemond Dr Saugus Calif 91351

2. LOCATION ¼ ¼ Sec. 12 T. 12 N/S R 20 E. Douglas County
PERMIT NO. Pine nut subdivision

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
Sand & Clay		0	115	115
Sh	115	115	120	5
Clay & Sh		120	140	20
Clay		140	170	30
Clay & Sh		170	191	21
Sh	191	191	203	12
Clay		203	205	2

Date started ....., 19.....
Date completed ....., 19.....

7. WELL TEST DATA

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

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

8. WELL CONSTRUCTION
Diameter hole 8" inches Total depth 205 feet
Casing record
Weight per foot ..... Thickness .....

Diameter		From		To	
8"	inches	0	feet	173	feet
6"	inches	170	feet	205	feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet

Surface seal: Yes ☐ No ☐ Type Cement
Depth of seal 70 feet
Gravel packed: Yes ☐ No ☐
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation Factory
Size perforation 3/32 X 1/3
From ..... feet to ..... 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 .....
Flow ..... G.P.M. .....
Water temperature ..... ° F. Quality .....

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

Name Steve Kawchack
Address P.O. Box 536 Hardinsville Nev
Nevada contractor's license number 9511
Nevada driller's license number 545
Signed Steve Kawchack
Date 4-4-74

USE ADDITIONAL SHEETS IF NECESSARY

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