DIVISION OF WATER RESOURCES

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 14255
Permit No.
Basin CARSON DES

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER U.S. AIR FORCE ADDRESS TRENTO. LANE
TOWER SITE.

2. LOCATION NE ¼ NW ¼ Sec. 14 T. 19 N/S R. 27 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	Thickness
Top Soil		0	2	2
Fine Sand		2	7	5
Clay		7	8	1
Fine Sand		8	20	12
Silt + Sand		20	28	8
Coarse Sand		28	40	12
Casing on Clay				

Date started July 15, 19 74
Date completed July 17, 19 74

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
1750	12	4 1/2	6

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 5/8 inches Total depth 40 feet
Casing record
Weight per foot ..... Thickness .156

Diameter	From	To
12 inches	0 feet	10 feet
8 5/8 inches	0 feet	40 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type Cement
Depth of seal 10 feet
Gravel packed: Yes ☐ No ☒
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation torch cut
Size perforation 1/8 X 6
From 30 feet to 40 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 26 Feet below land surface
Flow ..... G.P.M.
Water temperature Cold F. Quality —

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

Name W. SWEDE WELSHENBAUGH
Well Drilling
Address P. O. Box 24 Phone 945-2026
Hawthorne, Nevada 89415
Nevada contractor's license number 9105-A
Nevada driller's license number 494
Signed Swede Welshenbaugh
Date July 18 — 1974

USE ADDITIONAL SHEETS IF NECESSARY

5471