

Log No. 14395  
Permit No. ....  
Basin Carson Des.

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Al Inglis ADDRESS 15333 Cadet Rd.

2. LOCATION  $\frac{1}{4}$   $\frac{1}{4}$  Sec. 7 T. 2 N/S R. 2 E. County

3. TYPE OF WORK	New Well <input checked="" type="checkbox"/>	Recondition <input type="checkbox"/>	4. PROPOSED USE	Domestic <input checked="" type="checkbox"/>	Irrigation <input type="checkbox"/>	Test <input type="checkbox"/>	5. TYPE WELL	Cable <input checked="" type="checkbox"/>	Rotary <input type="checkbox"/>
	Deepen <input type="checkbox"/>	Other <input type="checkbox"/>		Municipal <input type="checkbox"/>	Industrial <input type="checkbox"/>	Stock <input type="checkbox"/>		Other <input type="checkbox"/>	

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>course sand - water</u>	<u>10'</u>	<u>0</u>	<u>10'</u>	
<u>clay</u>		<u>10</u>	<u>12</u>	
<u>fine sand</u>		<u>12</u>	<u>19</u>	
<u>course sand</u>		<u>19</u>	<u>29</u>	
<u>clay</u>		<u>29</u>	<u>32 1/2</u>	

8. WELL CONSTRUCTION

Diameter hole 8" inches Total depth 32 1/2 feet  
 Casing record steel  
 Weight per foot..... Thickness.....

Diameter	From	To
<u>8"</u> inches	<u>1' above gr.</u> feet	<u>30</u> feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet

Surface seal: Yes  No  Type.....  
 Depth of seal 12' feet  
 Gravel packed: Yes  No   
 Gravel packed from..... feet to..... feet

Perforations:  
 Type perforation trch  
 Size perforation 1/16  
 From 30 feet to 32 1/2 feet  
 From..... feet to..... feet  
 From..... feet to..... feet  
 From..... feet to..... feet  
 From..... feet to..... feet

9. WATER LEVEL

Static water level 10' Feet below land surface  
 Flow..... G.P.M.  
 Water temperature cool ° F. Quality good

Date started Oct 22, 1974  
 Date completed Oct 25, 1974

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

10. DRILLERS CERTIFICATION

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

Name Bert Hans Komer  
 Address 845 McLean St  
 Nevada contractor's license number 6927A  
 Nevada driller's license number 609  
 Signed Bert Hans Komer  
 Date Oct 25, 1974