CLIENT'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 14645
Permit No. 28181
Basin Ormia River Val

1. OWNER Pioneer Development Corp. ADDRESS [illegible] Nevada

2. LOCATION NW ¼ ~~NE~~ SE ¼ Sec. 21 T. 47 N/S R. 37 E. Humboldt 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 ☐ Rec.

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Unconsolidated Clay and Gravel		0	395	395
Black Clay	395-410	395	[illegible]	[illegible]
Consolidated Clay		410	700	290
Blue Stiff Clay		700	745	45

Date started [illegible], 19 74
Date completed [illegible], 19 74

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	700	150	10 hrs.
	1200	285	10 hrs.

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 16 inches Total depth 745 feet
Casing record
Weight per foot 44 lb. Thickness ¼"

Diameter	From	To
16 inches	0 feet	745 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 50 feet to 745 feet

Perforations:
Type perforation Louvered
Size perforation ¾" x 2"
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 45'
Flow ..... G.P.M. 700
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 Armstrong Bros.
Address 4710 Hwy 40 West Ely, Nev.
Nevada contractor's license number 5348
Nevada driller's license number 617-619-620
Signed Joe R. Armstrong
Date 10-1-74

USE ADDITIONAL SHEETS IF NECESSARY

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