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. 15231
Permit No. 29118
Basin 089

1. OWNER EDWARD W. SCRIPPS II ADDRESS 340 N. MINNESOTA ST CARSON CITY, NEV. 89701

2. LOCATION NW ¼ SE ¼ Sec. 16 T. 16 N N/S R. 20 E. WASHOE County
PERMIT NO. 29118

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☐

4. PROPOSED USE
Domestic ☒ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒ Air
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Riolite Tuff		0	95	95
Fractured Black Rock		95	125	30
Brown Clay		125	137+	12

Date started December 15, 19 75
Date completed December 18, 19 75

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 6 inches Total depth 137 feet
Casing record 137 Ft. 6-5/8"
Weight per foot ..... Thickness .188

Diameter	From	To
6-5/8" inches	0 feet	137 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type Cement Grout
Depth of seal 50 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50 feet to 135 feet

Perforations:
Type perforation Factory Sawed Slots
Size perforation 3/32 x 2½ - 6 Slots around
From 97 feet to 137 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 67 Feet below land surface
Flow 20 G.P.M. with air
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 WAYNE DRILLING COMPANY
Address Box 347, Newcastle, CA 95658
Nevada contractor's license number 8937
Nevada driller's license number 471
Signed Wayne Hedman
Date December 23, 1975

USE ADDITIONAL SHEETS IF NECESSARY

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