

OFFICE USE ONLY
Log No. 15469
Permit No. 29623
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Dr Raymond LaFau ADDRESS Box 6144 Reno, NV 89502

2. LOCATION NW 1/4 NE 1/4 Sec 32 T. 17 N/S R. 22 E Lyon County #4
PERMIT NO. 26660

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	Thick-ness
Blue Clay		0	16	16
Blue Sand		16	20	4
Clay		20	28	8
SAND		28	30	2
Clay		30	40	10
SAND & SAND		40	64	24
SAND & GRAVEL		64	105	41
CLEAN GRAVEL		105	113	8

PLUGGED BY
NGI # 64875
99381195
119543032
1040 3/10

See plugging Log # 109433

9.2" 50' WELL CONSTRUCTION
Diameter hole 6.3 = 8" inches Total depth 113 feet
Casing record 16 9/8
Weight per foot 16 9/8 Thickness 1.88
Diameter From To
8 inches 0 feet 113 feet
inches feet feet
Surface seal: Yes No Type Concrete
Depth of seal 50 feet
Gravel packed: Yes No
Gravel packed from _____ feet to _____ feet
Perforations:
Type perforation Foafony
Size perforation 3 1/2 / 3 1/4
From _____ feet to _____ feet
From _____ feet to _____ feet

9. WATER LEVEL
Static water level 63 Feet below land surface
Flow _____ G.P.M.
Water temperature _____ ° F. Quality _____

Date started 3-17-76, 19____
Date completed 3-20-76, 19____

7. WELL TEST DATA

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

10. DRILLERS CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name W. M. Blaw
Address Box 353 Dayton NV 89403
Nevada contractor's license number _____
Nevada driller's license number 717
Signed Warren Labrum
Date _____

BAILER TEST
G.P.M. 40 or more Draw down _____ feet _____ hours
G.P.M. _____ Draw down _____ feet _____ hours
G.P.M. _____ Draw down _____ feet _____ hours