

OFFICE USE ONLY
 Log No. 15754
 Permit No. _____
 Basin _____

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER MURPHY AND SONS ADDRESS SILVIA * NEW WASHOE CITY

2. LOCATION 1/4 1/4 Sec. 31 T. 17 N/S R. 20 E WASHOE County
 PERMIT NO. _____

3.	TYPE OF WORK			4.	PROPOSED USE			5.	TYPE WELL	
	New Well <input checked="" type="checkbox"/>	Recondition <input type="checkbox"/>	Other <input type="checkbox"/>		Domestic <input checked="" type="checkbox"/>	Irrigation <input type="checkbox"/>	Test <input type="checkbox"/>		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
clay - rock		1	50	50
decomposed		50	90	40
1st water		90	95	5
decomposed		95	170	75
clay		170	175	5
rock		175	195	20
2d water		195	200	5
rock		200	205	5
1 HP sub pump Barnes set at 200 ft				

8. WELL CONSTRUCTION

Diameter hole 8 inches Total depth 205 feet

Casing record _____

Weight per foot _____ Thickness .188

Diameter	From	To
<u>8</u> inches	<u>1</u> feet	<u>205</u> 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 _____ feet

Gravel packed: Yes No

Gravel packed from _____ feet to _____ feet
1 1/2 yds gravel in hole

Perforations:

Type perforation torch

Size perforation _____

From 200 feet to 140 feet

From _____ feet to _____ feet

9. WATER LEVEL

Static water level 130 Feet below land surface 130

Flow _____ G.P.M. 20

Water temperature _____ ° F. Quality _____

Date started 4-13-76, 19____

Date completed 4-20-76, 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 MARCIN DRILLING CO

Address 4340 Hwy 50 e

Nevada contractor's license number 360

Nevada driller's license number 7966

Signed G. W. Marcin

Date 4-20-76

BAILER TEST

G.P.M. _____ Draw down _____ feet _____ hours

G.P.M. _____ Draw down _____ feet _____ hours

G.P.M. _____ Draw down _____ feet _____ hours