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. 16642
Permit No.
Basin

1. OWNER Virgil Brooks ADDRESS 4555 Resivoir Rd

2. LOCATION S ½ NE ¼ Sec. 26 T. 19 N/S R. 29 E. Churchill 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 ☐

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| Top Soil | | 0 | 1 | 1 |
| Fine Sand | | 1 | 17 | 16 |
| Fine (Flour) Sand | ✓ | 17 | 35 | 18 |
| Clay | | 35 | — | |

Date started April 22, 1977
Date completed April 27, 1977

7. WELL TEST DATA

| Pump RPM | G.P.M. | Draw Down | After Hours Pump |
|---|---|---|---|
| 3000 | 25 | 31 | 18 |

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 10 inches Total depth 35 feet
Casing record
Weight per foot Thickness

| Diameter | From | To |
|---|---|---|
| 6 inches | 0 feet | 35 feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |

Surface seal: Yes ☐ No ☒ Type
Depth of seal feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 0 feet to 35 feet

Perforations:
Type perforation Saw Cut
Size perforation 3/16
From 21 feet to 33 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 21 Feet below land surface 14
Flow 1/4 G.P.M. 30
Water temperature Cold F. Quality Fair

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

Name Paul N. Pflimlin
Address 7007 Curry Rd.
Nevada contractor's license number 10655
Nevada driller's license number 768
Signed P.N. Pflimlin
Date April 29, 1977

USE ADDITIONAL SHEETS IF NECESSARY

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