WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 16351
Permit No.
Basin

1. OWNER Diablo's Construction Co. ADDRESS 205 A Cal Lane, Sparks, Nev.
Well # 4 Chuck Bourne Parcel

2. LOCATION ¼ ¼ Sec. 13 T. 21N N/S R. 18 E. Washoe County
PERMIT NO.

3. TYPE OF WORK
New Well [X] Recondition [ ]
Deepen [ ] Other [ ]

4. PROPOSED USE
Domestic [X] Irrigation [ ] Test [ ]
Municipal [ ] Industrial [ ] Stock [ ]

5. TYPE WELL
Cable [ ] Rotary [X]
Other [ ]

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Top soil		0	1'	
Clay		1'	410'	
(Test hole)				
State Engineers from the Water Resources Dept. were present on the job at the time of drilling, and clarified that we were sitting on a fault. No indication of any water encountered.				

Date started 5-24-77, 19
Date completed 5-27-77, 19

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 10 inches Total depth 410 feet
Casing record
Weight per foot Thickness

Diameter	From	To
inches	feet	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 feet to feet

Perforations:
Type perforation
Size perforation
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
Flow G.P.M.
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 Burroughs of Nevada
H. Wayne Burroughs
Address 10310 Old Virginia City Rd.
Reno, Nevada 89511
Nevada contractor's license number 5092
Nevada driller's license number 611
Signed H. Wayne Burroughs
Date 8-2-77

USE ADDITIONAL SHEETS IF NECESSARY

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