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. 16796
Permit No.
Basin

1. OWNER Joe Cahill ADDRESS 510 Harrison Rd.

2. LOCATION SW ¼ SW ¼ Sec. 5 T. 18 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 ☐ Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Course Surface				
Sand		0	5	5
Clay		5	18	13
Medium Sand		18	32	14

Date started Aug 20, 19 77
Date completed Aug 20, 19 77

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	10	8	4

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 32 feet
Casing record 0-32 x 6 5/8
Weight per foot 8-68 Thickness .125

Diameter	From	To
6 inches	0 feet	32 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 10 feet
Gravel packed: Yes ☐ No ☑
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation machine slit
Size perforation 3/32 x 2½"
From 18 feet to 32 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 27 Feet below land surface 5
Flow ..... G.P.M. .....
Water temperature Cold °F. Quality UN-Tested

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

Name W. O. Siffle-Welsco Drlng
Address Box 888
Nevada contractor's license number 11752
Nevada driller's license number 772
Signed W. O. Siffle
Date Aug-20-77

USE ADDITIONAL SHEETS IF NECESSARY

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