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. 17237
Permit No.
Basin

1. OWNER CUMMINGS CONSTRUCTION ADDRESS 236 California Street Reno Nevada

2. LOCATION ¼ ¼ Sec. 15 T. 21 N/S R. 19 E. Washoe County
~~PERMIT NO~~ Lot 14 Block #5 Sub #3 Heppner Lemon Valley

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
SAND		0	2	2
PACKED SANDY CLAY		2	6	4
DECOMPOSED GRANITE WITH CLAY		6	95	89
SAND		95	140	45
~~XXXXXXXXXXXXXXXX~~				
SAND & GRAVEL 1"	WB	140	160	20

Date started 10-18, 19 77
Date completed 10-18, 19 77

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 6 inches Total depth 160 feet
Casing record 160' of 6-5/8" OD
Weight per foot Thickness .188

Diameter	From	To
inches	feet	feet
~~132~~ inches	feet	feet
6-5/8 inches	~~132~~ feet	~~152~~ feet
inches	0 feet	160 feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type CEMENT
Depth of seal 50 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50 feet to 160 feet

Perforations:
Type perforation FACTORY SAWED SLOTS
Size perforation 3/32" X ~~6~~ 2½ X 6 Around
From feet to feet
From feet to feet
From 132 feet to 152 feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 64 Feet below land surface
Flow 10 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 WAYNE DRILLING, INC.
Address P.O. BOX 347 NEWCASTLE CA.
Nevada contractor's license number 14043
Nevada driller's license number 471
Signed Wayne Delusse
Date 11-4-77

USE ADDITIONAL SHEETS IF NECESSARY

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