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. 17239
Permit No.
Basin

1. OWNER STARLITE HOMES ADDRESS 1000 Monte Vista Drive Reno, Nevada 89511

CEDARWOOD - APN = 045-573-15

2. LOCATION ¼ ¼ Sec. 2 T. 17 N/S R. 19 E. Washoe County

~~PERMIT NO.~~ Lot 11 Mt Meadows Sub Division

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 X

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Over Burden with Large Boulders		0	8	8
Sand/Gravel Cemented		8	46	38
Sand/Gravel Loose		46	94	56
Brown Sandy Mud with Gravel	WB	94	125	29

Date started 10-20, 19 77
Date completed 10-20, 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 125 feet
Casing record 125' 6-5/8" OD
Weight per foot Thickness 188

Diameter	From	To
inches	feet	feet
6-5/8 inches	0 feet	129 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒X No ☐ Type Cement
Depth of seal 50 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50 feet to 125 feet

Perforations:
Type perforation Factory Sawed Slots
Size perforation 3/32" X 2½ X 6 ~~XXXXXX~~ Around
From feet to feet
From 100 feet to 120 feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 65 Feet below land surface
Flow 15 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 CALIF 95658
Nevada contractor's license number 14043
Nevada driller's license number 471
Signed Wayne Dedman
Date 11-4-77

USE ADDITIONAL SHEETS IF NECESSARY

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