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

STATE OF NEVADA
**DIVISION OF WATER RESOURCES**

OFFICE USE ONLY
Log No. 12316
Permit No.
Basin

# WELL DRILLERS REPORT

**Please complete this form in its entirety**

1. OWNER M.E SUTHERLAND ADDRESS 8390 CASSILIS RENO 89506

8440 CASSILIS DR. LEMMON VALLEY

2. LOCATION ¼ ¼ Sec. 4 T. 20 N/S R. 19 E. County

PERMIT NO. DOMESTIC

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 |
|---|---|---|---|---|
| VALLEY FILL - CLAY & SAND - | | 0 | 95 | 95 |
| DG. SEAMED. | | 95 | 145 | 50 |
| GRANITE SEAMED | X | 145 | 180 | |
| Picked up water @ 160 to 180' (20') | | | | |

Date started 11-28, 1977
Date completed 11-29, 1977

7. WELL TEST DATA

| Pump RPM | G.P.M. | Draw Down | After Hours Pump |
|---|---|---|---|
| | | | |

BAILER TEST
G.P.M. Jet 10 Draw down feet hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 8 inches Total depth 180 feet
Casing record
Weight per foot Thickness 188

| Diameter | From | To |
|---|---|---|
| 6 5/8 inches | +2 feet | 180' 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 50 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50' feet to 180 feet

Perforations:
Type perforation MILLED SLOT
Size perforation 3/32 x 3"
From feet to feet
From 140 feet to 180' feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 50 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 BURT DRILLING Co
Address BOX 11324 RENO
Nevada contractor's license number 6589
Nevada driller's license number 899
Signed [signature]
Date 11-29-77

USE ADDITIONAL SHEETS IF NECESSARY

5471