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. 17318
Permit No.
Basin

1. OWNER TED MERRILL ADDRESS 3100 MILL ST RENO

2. LOCATION 2175 VALLEY VIEW DR GOLDEN VALLEY
¼ ¼ Sec. 10 T. 20 N/S R. 19 E. WASHOE 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
VALLEY FILL		0	22	22
DG		22	55	33
SAND	X	55	60	5
DG		60	90	30
GRANITE		90	210	120
WATER FRACTURES				
150				
162				
190				
200				
WATER @ 55 to 60 SEALED OFF				

Date started 10-16 1977
Date completed 10-18 1977

7. WELL TEST DATA

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

~~BAILER~~ Jet TEST
G.P.M. 20 Draw down ____ feet ____ hours
G.P.M. ____ Draw down ____ feet ____ hours
G.P.M. ____ Draw down ____ feet ____ hours

8. WELL CONSTRUCTION
Diameter hole 8 & 10 inches Total depth 210 feet
Casing record
Weight per foot 1 Thickness 188

Diameter	From	To
5/8 inches	feet	feet
8 5/8 inches	0 feet	90 feet
5/8 inches	feet	feet
6 5/8 inches	+2 feet	210 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 0 feet to 210 feet

Perforations:
Type perforation MILL SLOT
Size perforation 3/32
From ____ feet to ____ feet
From 150 feet to 200 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 INC
Address P.O. BOX 11324 RENO
Nevada contractor's license number 6589
Nevada driller's license number 899
Signed [signature]
Date 10 19

USE ADDITIONAL SHEETS IF NECESSARY

5471

7 DEC 15 AM 9 30