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

A. 6.17

STATE OF NEVADA

DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 18398
Permit No. 92091
Basin 212

ALEX. S. REINHARCZ

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Alex Reinhartez ADDRESS 8140 S. FAIRFIELD ST.

2. LOCATION NE ¼ NE ¼ Sec. 16 T. 22 N/S R. 61 E. Clark County
PERMIT NO. 92091

3. TYPE OF WORK
New Well ☐ Recondition ☐
Deepen ☑ Other ☐

4. PROPOSED USE
Domestic ☑ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☑
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Clay + Gravel		135	285	150

RECEIVED
1978
Div. of Water Resources
Branch Office — Las Vegas, Nev.

Date started 10-20- 1977
Date completed 10-28- 1977

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 7 7/8 inches Total depth 285 feet
Casing record 6" to 285
Weight per foot ..... Thickness .....

Diameter	From	To
6" inches	130 feet	285 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☐ No ☑ Type .....
Depth of seal ..... feet
Gravel packed: Yes ☐ No ☑
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation Cutting torch
Size perforation .....
From 200 feet to 285 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 125 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 Lee R. Thomas
Address 5965 N. Maverick
Nevada contractor's license number 10831
Nevada driller's license number 623
Signed Lee R. Thomas
Date 11-16-77

USE ADDITIONAL SHEETS IF NECESSARY

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