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. 20070
Permit No.
Basin

Well #1

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER A. J. McDonald ADDRESS Karen St Reno, Nev. 1901 Moddway

2. LOCATION ¼ ¼ Sec. 30 T. 19 N/S R. 20 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 ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
sandy clay (Br.)		0	24	
sand (Brown)		24	29	
Clay (gray)		29	34	
sand Brown		34	36	
sandy clay		36	59	
clay (gray)		59	63	
sand & gravel	72	63	73	

Date started ....., 19.....
Date completed ....., 19.....

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
		[illegible]	[illegible]

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 73 feet
Casing record
Weight per foot 15 Thickness .219

Diameter	From	To
inches	feet	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 60 feet
Gravel packed: Yes ☐ No ☑
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation factory cut
Size perforation 3/32 x 2½
From ..... feet to ..... feet
From 68 feet to 73 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 4 Feet below land surface
Flow ..... G.P.M. 80
Water temperature cold ° F. Quality Clear

10. DRILLERS CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Paul Williams
Address 22 South Palmer Sparks
Nevada contractor's license number 14483
Nevada driller's license number 957
Signed Paul Williams
Date 6/30/79

USE ADDITIONAL SHEETS IF NECESSARY

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