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. 70259
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER H. Jason Pool ADDRESS 3475 War Paint
3475 WarPaint St - Golden Valley

2. LOCATION ¼ ¼ Sec. 1 T. 20 N/S R. 19 E. Washoe County
PERMIT NO. 943

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
D. G.		0	130	130
white sand & quartz	✓	130	156	26

Date started Aug. 17, 19 79
Date completed Aug 20, 19 79

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
600 CEM 250 PSI	12	40	2 HR

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 10" inches Total depth 156 feet
Casing record 6 5/8
Weight per foot ..... Thickness 156

Diameter	From	To
6 5/8 inches	0 feet	156 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 156' feet

Perforations:
Type perforation 1/16" x 3" factory mill
Size perforation 1/16" x 3"
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 80' Feet below land surface
Flow 12 G.P.M.
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 Aqua Drilling + Well Service
Address 2255 Glendale - Sparks
Nevada contractor's license number 15291
Nevada driller's license number 900
Signed Robert J Foster
Date Aug 23 1979

USE ADDITIONAL SHEETS IF NECESSARY

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