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. 20399
Permit No.
Basin

1. OWNER Wm. R. Ringdahl ADDRESS P. O. Box 650 Verdi, Nevada 89439

Location Lot 35 Block G Unit 2 Virginia City Highlands

2. LOCATION ¼ ¼ Sec. 32 T. 18 N/S R. 21 E. Storey County

PERMIT NO.

3. TYPE OF WORK
New Well [X] Recondition [ ]
Deepen [ ] Other [ ]

4. PROPOSED USE
Domestic [X] Irrigation [ ] Test [ ]
Municipal [ ] Industrial [ ] Stock [ ]

5. TYPE WELL
Cable [ ] Rotary [X]
Other [ ] Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
top soil		0	4	4
brn clay		4	42	38
gray clay		42	135	93
gray rock med hard w/ aprox 2gpm	x	135	165	30
gray rock med hard - broken up	xx	165	195	30

Date started 10-4-79, 19
Date completed 10-5-79, 19

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 6 inches Total depth 195 feet
Casing record 195 ft.
Weight per foot Thickness .156

Diameter	From	To
6 5/8 inches	0 feet	f 195 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes [X] No [ ] Type cement
Depth of seal 50 ft feet
Gravel packed: Yes [X] No [ ]
Gravel packed from 50 feet to 195 feet

Perforations:
Type perforation factory sawed slot
Size perforation 3/32 x 2½ x 6 around
From 155 feet to 195 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 100 Feet below land surface
Flow 40 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 WAYNE DRILLING, INC.
Address P. O. Box 12370 Reno, Nevada 8951
Nevada contractor's license number 14043
Nevada driller's license number #517
Signed Manuel Padilla
Date 10-9-79

USE ADDITIONAL SHEETS IF NECESSARY

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