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. 20763
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Gordon McKay ADDRESS 690 Starlight Cr.

2. LOCATION S.E. ¼ ¼ Sec. 25 T. 13 N/S R. 19 E. Washoe County
PERMIT NO.

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

4. PROPOSED USE Hot water
Domestic ☐ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☒ Rotary ☐
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
top soil		0	11	11
Sand + gravel	w	11	26	15
Sand + clay		26	52	26
clay		52	70	18
Sand + clay		70	138	68
Blue clay		138	200	62
Sand + clay	w	200	228	28
30 - 110				
52 - 115				
68 - 120				
15 - 125				
200 - 130				

Date started 1-30, 1980
Date completed 2-18, 1980

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 8 inches Total depth ..... feet
Casing record
Weight per foot ..... Thickness 1.53

Diameter	From	To
8 inches	0 feet	228 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 Factory
Size perforation 3/32
From 220 feet to 228 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level ..... Feet below land surface 35
Flow ..... G.P.M.
Water temperature 130 °F. Quality

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

Name Gordon McKay
Address 690 Starlight Cr.
Nevada contractor's license number 14170
Nevada driller's license number 1089
Signed Gordon McKay
Date 2-20-80

USE ADDITIONAL SHEETS IF NECESSARY

5471