

Log No. 21044
 Permit No. _____
 Basin _____

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Bill Francis ADDRESS Box 281
STURMANT NV 89437
 2. LOCATION $\frac{1}{4}$ $\frac{1}{4}$ Sec. 5 T. 14 N/S R. 20 E. CC County
 PERMIT NO. Parcel 17 Martha Cabe Sub Div

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	Thick-ness
Sand		0	10	10
CLAY		10	40	30
SAND & GRAVEL	X	40	45	5
CLAY GRAVEL		45	60	15
SAND GRAVEL		60	70	10
CLAY		70	85	15
SAND GRAVEL		85	98	13
CLAY GRAVEL		98	100	2

WELL CONSTRUCTION
 Diameter Hole 8-5/8" inches Total depth 100 feet
 Casing record 8-5/8"
 Weight per foot 16.9 Thickness 1.88
 Diameter From To
8 inches 0 feet 100 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type Concrete
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation Freeport
 Size perforation 3-1/2" / 3/4"
 From 78 feet to _____ feet
 From _____ feet to _____ feet

Date started 3-17-80, 19____
 Date completed 3-19-80, 19____

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
 G.P.M. 15 Draw down 20 feet 1 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours

9. WATER LEVEL
 Static water level 40 Feet below land surface
 Flow Ni G.P.M.
 Water temperature 60.4 F. Quality _____

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name W. M. Blain
 Address Box 353 Dayton NV
 Nevada contractor's license number 10950
 Nevada driller's license number 1156
 Signed Huston Wilkerson
 Date 5/8/80