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. 21204
Permit No.
Basin

# WELL DRILLERS REPORT

**Please complete this form in its entirety**

1. OWNER La Moyne Addleman ADDRESS Eureka, Nevada 89316

2. LOCATION S E ¼ S W ¼ Sec. 18 T. 17 N/S R. 55 E. white Pine County 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 |
|---|---|---|---|---|
| Not Completed | | | | |
| drilled down to about | | | | |
| 70 ft. Struck ~~down~~ granite | | | | |
| & just could not drill | | | | |
| through it Mr Christiansen | | | | |
| is going to bring in a | | | | |
| Rotary drill & finish it | | | | |

Date started April 28, 19 80
Date completed, 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 16 inches Total depth feet
Casing record
Weight per foot Thickness

| 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
Depth of seal feet
Gravel packed: Yes ☐ No ☐
Gravel packed from feet to feet

Perforations:
Type perforation
Size perforation
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 Feet below land surface
Flow 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
Address
Nevada contractor's license number 10705
Nevada driller's license number 701
Signed E.B. Hicks
Date 6-15-80

USE ADDITIONAL SHEETS IF NECESSARY

5471