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. 51215
Permit No.
Basin

1. OWNER WALLY GOODMAN ADDRESS WASHOE VALLEY, NEVADA

2. LOCATION ¼ ¼ Sec. 5 T. 19N 16 N/S R. 20 E. WASHOE 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
Cobbles, clay		0	50	50'
cobbles sandy clay		50'	75'	25'
grey granite hard		75'	105'	30'
grey granite, brown clay		105'	130'	25'
grey granite, clay		130'	140'	10'
fractures granite		140'	155'	15'
fractured granite				
little water		155'	180'	25'
fractured gravel		180'	205'	25'
fractured gravel, water		205'	230'	25'

Date started 6-16-80, 19
Date completed 6-18-80, 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 6-5/8 inches Total depth 230 feet
Casing record
Weight per foot Thickness

Diameter	From	To
6-5/8 inches	0 feet	230 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 230 feet

Perforations:
Type perforation factory sawed slots
Size perforation 3/32
From 165 feet to 230 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 160 Feet below land surface
Flow 30 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 VALLEY PUMP COMPANY
Address P.O. BOX 624, SPARKS, NEV. 89431
Nevada contractor's license number 6045
Nevada driller's license number 1123
Signed [signature]
Date 6-18-80

USE ADDITIONAL SHEETS IF NECESSARY

5471