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. 22437
Permit No.
Basin

1. OWNER Phillips Petroleum Company ADDRESS P.O. Box 6256 Reno, Nevada 89513

2. LOCATION NW ¼ SE ¼ Sec. 14 T. 4 N/S R. 28 E. Mineral 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
Gravel		0	65	65
Clay		65	110	45
Gravel		110	160	50
Andesite		160	1853	1693

Date started December 8, 19 80
Date completed December 19, 19 80

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 6¼ inches Total depth 1853 feet
Casing record 7" to 220 feet
Weight per foot 20 pound Thickness .602
Tubing Diameter 6.50 From To .340

7	inches	0	feet	220	feet
2 7/8	inches	0	feet	1853	feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet

Surface seal: Yes ☒ No ☐ Type cement
Depth of seal surface to 220 feet
Gravel packed: Yes ☐ No ☒
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation none
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 unknown 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 Gerald McComack
Address P. O. Box 6256 Reno, Nevada 89513

Nevada contractor's license number
Nevada driller's license number 01135
Signed [signature] for G. McComack
Date 2/10/81

USE ADDITIONAL SHEETS IF NECESSARY

O-627