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. 22573
Permit No.
Basin

1. OWNER Wayne Kingsley ADDRESS Sparks, Nevada

2. LOCATION ¼ ¼ Sec. 1 T. 19 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
Boulders and clay		0	10	10
decomposed granite		10	20	10
red lava rock		20	70	50
clay and rock		70	100	30
clay and rock		100	150	50
fractured granite		150	170	20
" "		170	200	30
fractured granite, black				
sand and water		200	275	75
granite, sand water		275	300	25
Static water 225				

Date started 11-19-81, 19
Date completed 11-21-81, 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 300 feet
Casing record
Weight per foot Thickness

Diameter	From	To
6-5/8 inches	0 feet	300 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 300 feet

Perforations:
Type perforation factory sawed slots
Size perforation 3/32
From 264 feet to 300 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 225 Feet below land surface
Flow 15 G.P.M.
Water temperature cold ° 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 [illegible]
Date 3-18-81

USE ADDITIONAL SHEETS IF NECESSARY

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