

OFFICE USE ONLY
 Log No. 23030
 Permit No. _____
 Basin _____

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Lois Baim ADDRESS Box 372 Winn. Nev.

2. LOCATION $\frac{1}{4}$ $\frac{1}{4}$ Sec 14 T. 35 N. R. 37 E. Humboldt County
 PERMIT NO. Lot 1 Block B

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input checked="" type="checkbox"/> Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SAND BRN.		0	3	
Clay HARD Pan BRN.		3	23	
Clay BRN.		23	52	
Clay SANDY BRN.		52	70	
SAND & GRAVEL BRN.		70	76	
Clay BRN.		76	99	
SAND & GRAVEL BRN.	yes	99		

8. WELL CONSTRUCTION

Diameter hole 6 inches Total depth 99 feet
 Casing record _____
 Weight per foot 14 Thickness 1.56

Diameter	From	To
<u>6</u> inches	<u>0</u> feet	<u>98</u> 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 _____ feet to _____ feet

Perforations:
 Type perforation None
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 47 Feet below land surface
 Flow _____ G.P.M.
 Water temperature 54 ° F. Quality Ave.

Date started 6-16, 1981
 Date completed 6-17, 1981

10. DRILLERS CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Eddie Stites
 Address 7495 Cloud burst Winn. Nev.
 Nevada contractor's license number 016578
 Nevada driller's license number 1197
 Signed Eddie Stites
 Date 6-25-81

7. WELL TEST DATA

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

BAILER TEST

G.P.M. 40 Draw down 13 feet 2 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours