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. 23518
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER KEN & HELLEN RANEY ADDRESS P.O. Box 2553, Sparks Nevada 89431

Sun Valley

2. LOCATION ¼ ¼ Sec. 13 T. 20 N/S R. 19 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 ☐ air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Top soil		0	2	2
Broken black rock with				
some brown clay		2	20	18
Brown clay		20	35	15
Yellow clay		35	65	30
Light brown clay		65	140	75
Gray broken fractured rock x		140	180	40

Date started 2-2-82, 19
Date completed 2-4-82, 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 inches Total depth 188 feet
Casing record 188
Weight per foot Thickness .156

Diameter	From	To
6/38 inches	0 feet	188 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 47 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 47 feet to 188 feet

Perforations:
Type perforation factory sawed slot
Size perforation 3/32 x 2½ x 6 around
From 155 feet to 188 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 105 Feet below land surface
Flow 30 G.P.M. with air
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 WAYNE DRILLING INC.

Address P.O. Box 12370, Reno Nevada 89510

Nevada contractor's license number 14043

Nevada driller's license number 923

Signed Edward Mondragon

Date Feb. 4, 1982

USE ADDITIONAL SHEETS IF NECESSARY

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