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. 23692
Permit No.
Basin

1. OWNER Fred Bradley ADDRESS 1836 Pinion Ave Reno Nev 89506

2. LOCATION NW ¼ NW ¼ Sec. 20 T. 21 N/S R. 18 E. Washoe County
PERMIT NO. 1683

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
Surface Soil		0	3	3
Hard Pan		3	8	5
Sand w/ Some Clay		8	20	12
Brown Clay w/ Some Clay		20	27	7
Coarse Sand & Cobble Stone		27	38	11
Brown Clay w/ Some Sand		38	55	17
Coarse Sand w/ Streaks of Brown Clay		55	120	65
Coarse Sand		120	140	20

Date started 4-28-, 1982
Date completed 4-30, 1982

7. WELL TEST DATA

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

BAILER TEST
G.P.M. 32 Draw down 3 feet 2 hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 12¼ inches Total depth 140 feet
Casing record 8⅝ OD
Weight per foot Thickness .188

Diameter	From	To
8⅝ inches	71 feet	140 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 55 feet
Gravel packed: Yes ☑ No ☐
Gravel packed from 55 feet to 140 feet

Perforations:
Type perforation Mill
Size perforation ⅛ X 3"
From 100 feet to 140 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 17 Feet below land surface
Flow G.P.M.
Water temperature Cold ° F. Quality Good

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

Name William Sage
Address 10605 Silver Knoll Blvd Reno Nev 89506
Nevada contractor's license number 14299
Nevada driller's license number 1318
Signed William Sage
Date 4-30-82

USE ADDITIONAL SHEETS IF NECESSARY

O-627