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. 25704
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Cal Kinney Jr. ADDRESS 7900 Lakeside Dr. Reno
Parcel # 41-120-26

2. LOCATION se ¼ se ¼ Sec. 2 T. 18N N/S R. 19 E. Washoe County
PERMIT NO. ~~1692~~

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
Brown clay mixed with				
cobblestones		0	4	4
Lt. Brown granite				
fractured Med. hard		4	85	81
Lt. brown granite				
broken up	7	85	90	5
Lt. brown granite				
hard	7	90	125	35

Date started April 20, 19 82
Date completed April 30, 19 82

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	20	18	24

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 8 inches Total depth 125 feet
Casing record
Weight per foot Thickness .188

Diameter	From	To
6 inches	+2 feet	125 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 57 feet to 125 feet

Perforations:
Type perforation factory sawed
Size perforation 3/32 x 4
From 105 feet to 125 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 7 Feet below land surface
Flow 20 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 David E. Ballard
Address 15000 Perlite Dr.
Nevada contractor's license number 14170
Nevada driller's license number 1274
Signed David E. Ballard
Date May 9, 1982

USE ADDITIONAL SHEETS IF NECESSARY

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