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. 25189
Permit No. DOMESTIC
Basin CHURCHILL 8-102

1. OWNER Henry Randers on ADDRESS Silver Springs Nev. 89429

2. LOCATION ¼ SE ¼ Sec. 20 T. 17 N/S R. 25 E. Lyon County
STOCKTON SUBDIV UNIT #3 PARCEL 137
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
Sandy Clay	•	0	20	20
Gravel		20	30	10
Sandy Clay		30	45	15
Sand Water	45	45	50	5
Sand Clay Gravel		50	70	20
Gravel Sand & Water	70	70	85	15
Sandy Clay		85	100	15
Sand Clay Gravel Water	100	100	140	40

Date started 7-21, 19 83
Date completed 7-30, 19 83

7. WELL TEST DATA

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

BAILER TEST
G.P.M. 25 Draw down 90 feet 1 hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 8" inches Total depth 140 feet
Casing record Black Tex 13
Weight per foot 6.9 Thickness .8

Diameter	From	To
12" inches	0 feet	50 feet
8" inches	50 feet	140 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 Machine
Size perforation 3/32
From 50 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 3 Feet below land surface
Flow G.P.M.
Water temperature ° F. Quality

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

Name Pump
ACE PUMP SALES & SERVICE
Address 5551 Highway 50 E. #5
Carson City, Nev. 89701
Nevada contractor's license number 15429
Nevada driller's license number 841-263
Signed James W Thompson
Date 3-6-84

USE ADDITIONAL SHEETS IF NECESSARY

O-627