



#5

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO.

1. OWNER Herbert Krush Trust ADDRESS AT WELL LOCATION Lakeview Dr. Verde Lake Est. Lot 3
 MAILING ADDRESS 950 P.O. Box Verde

2. LOCATION N.E. 1/4 Sec. 18 T. 19 N/S R. 15 E Washoe County
 PERMIT NO. _____ Issued by Water Resources Parcel No. _____ Subdivision Name _____

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	Thick-ness
sand gravel & rocks		0	12	12
brown clay		12	26	14
blue clay		26	38	12
dark Brown Clay w/ lignite layers	X	38	67	29
grey clay	X	67	87	20
dark brown clay w/ lignite layers	X	87	115	28
grey truckee	X	115	131	16

8. WELL CONSTRUCTION
 Diameter hole 10 inches Total depth 131 feet
 Casing record _____
 Weight per foot 11 Thickness 1.56
 Diameter From To
6 5/8 inches 0 feet 130 feet
 _____ inches _____ feet _____ feet

Surface seal: Yes No Type pumped gravel
 Depth of seal 64 feet
 Gravel packed: Yes No
 Gravel packed from 64 feet to 131 feet

Perforations:
 Type perforation factory sewed
 Size perforation 3-3/2 x 2 1/2
 From _____ feet to _____ feet
 From 108 feet to 131 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 15 feet below land surface
 Flow approx. 80 G.P.M. _____ P.S.I.
 Water temperature 56 ° F. Quality unknown

Date started 2-9, 1984
 Date completed 2-10, 1984

7. WELL TEST DATA

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

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Paul Williams & sons
 Address 22 So. Patterson, Sparks, Nev.
 Nevada contractor's license number 14483
 Nevada contractor's drillers number 957
 Nevada driller's license number 957
 Signed Paul E Williams (Actual Driller)
 Date 2-12-84

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours