

WELL DRILLERS REPORT

PRINT OR TYPE ONLY

Please complete this form in its entirety

NOTICE OF INTENT NO. 3931

1. OWNER Bob Williams ADDRESS AT WELL LOCATION 6280 Wayland Sparks Nev  
MAILING ADDRESS 6000 Wayland Sparks Nev

2. LOCATION 1/4 Sec 12 T 20 N/S R 20 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
Brown clay		0	1	
Sand		1	50	
Sand gravel		50	69	
Fracture volcanic		69	100	

8. WELL CONSTRUCTION  
Diameter hole 10 1/2 inches Total depth 100 feet  
Casing record 100  
Weight per foot..... Thickness 156

Diameter	From	To
<u>6 7/8</u> inches	<u>100</u> feet	
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet

Surface seal: Yes  No  Type.....  
Depth of seal 5.5 feet  
Gravel packed: Yes  No   
Gravel packed from 5.5 feet to 100 feet

Perforations:  
Type perforation mill slot  
Size perforation 3/32 4 3/32  
From 65 feet to 100 feet  
From..... feet to..... feet  
From..... feet to..... feet  
From..... feet to..... feet  
From..... feet to..... feet

Date started 9/3/86, 19.....  
Date completed 9/5/86, 19.....

7. WELL TEST DATA

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

9. WATER LEVEL  
Static water level 12 feet below land surface  
Flow 5.0 G.P.M. P.S.I.  
Water temperature 60.1 ° F. Quality unknown

10. DRILLERS CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name Paul Williams and son's Contractor  
Address 22 South Patterson Contractor  
Nevada contractor's license number 14483  
Nevada contractor's drillers number 957  
Nevada driller's license number 1287  
Signed Paul Williams Sr. Actual Driller  
Contractor  
Date.....

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