

WELL DRILLERS REPORT

PRINT OR TYPE ONLY

Please complete this form in its entirety

NOTICE OF INTENT NO. _____

1. OWNER **Walter Block** ADDRESS AT WELL LOCATION **1975 Sheep Camp Rd.**
 MAILING ADDRESS **1975 Sheep Camp Rd.** **Gard. Nev. 89410**
Gard. Nev. 89410

2. LOCATION 1/4 Sec. **12** T. **12** N/S R. **20** E. **Douglas** County

PERMIT NO. _____ none
 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 Other
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Clay & cobblestones		0	55	
clay		55	59	
clay & cobbles		59	134	
clay & sand		134	175	
clay		175	211	
clay, sand, cobbles		211	232	
sand, gravel & clay	xx	232	251	
clay	xx	251	260	

8. WELL CONSTRUCTION
 Diameter hole **8** inches Total depth **260** feet
 Casing record _____
 Weight per foot _____ Thickness **188**

Diameter	From	To
8 inches	0 feet	260 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 **50'** feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation **factory**
 Size perforation **3x5/32**
 From **239** feet to **260** feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **172** feet below land surface
 Flow _____ G.P.M. **+12** P.S.I.
 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 **Kawchack Drilling Inc** Contractor
 Address **1373 Judy St., Minden, NV 89423** Contractor
 Nevada contractor's license number **# 021268**
 Nevada contractor's drillers number **# 1380**
 Nevada driller's license number **# 1380** Actual Driller

Signed **Eddy A Kawchack** Contractor
 Date **Dec. 26, 1984**

7. WELL TEST DATA

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

BAILER TEST
 G.P.M. **+12** Draw down **4** feet **1** hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours