



**WELL DRILLERS REPORT**

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO 4253

1. OWNER Mr. Charles Ron ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 863 Marion Way \_\_\_\_\_  
Minden, Nev. 89423 \_\_\_\_\_  
 2. LOCATION  $\frac{1}{4}$  Sec. 17 T. 12 N/S R. 20 E Douglas County  
 PERMIT NO. Not Required Issued by Water Resources Parcel No. 10 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
Soil		0	18	
Gravel & Boulder		18	38	
Sand & Gravel		38	49	
Sand		49	100	
	60			

8. WELL CONSTRUCTION  
 Diameter hole 6 inches Total depth 100 feet  
 Casing record 665/8  
 Weight per foot 11.59 Thickness 1.88  

Diameter	From	To
<u>10</u> inches	<u>0</u> feet	<u>50</u> feet
<u>6</u> inches	<u>50</u> feet	<u>100</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes  No  Type Concrete  
 Depth of seal \_\_\_\_\_ feet  
 Gravel packed: Yes  No   
 Gravel packed from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Perforations:  
 Type perforation Factory  
 Size perforation 1/8  
 From 80 feet to 100 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 860 14 feet below land surface  
 Flow no G.P.M. P.S.I.  
 Water temperature cool °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 Sierra Pump & Drilling Contractor  
 Address 4639 Hwy. 50 E. Contractor  
 Nevada contractor's license number 0122368  
 Nevada contractor's drillers number 1393  
 Nevada driller's license number 1394 Actual Driller

Signed Quinta Bludworth Contractor  
 Date 10-23-84

Date started 10-1- 84  
 Date completed 10-12 84

7. WELL TEST DATA

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

BAILER TEST  
 G.P.M. 20 Draw down 2 feet 1 1/2 hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours