



WELL DRILLERS REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 5363

PRINT OR TYPE ONLY

OWNER Dowell Ward ADDRESS AT WELL LOCATION _____
MAILING ADDRESS P.O. Box 644 _____
Crescent Valley Nev. _____
2. LOCATION NW 1/4 NE 1/4 Sec. 5 T. 29 N/S R. 48 E EUREKA County
PERMIT NO. _____ Parcel No. 5 Subdivision Name CURFE

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
<u>Fill</u>		<u>0</u>	<u>100</u>	
<u>Sandy Rockfall</u>	<input checked="" type="checkbox"/>	<u>100</u>	<u>150</u>	
<u>" "</u>		<u>150</u>	<u>200</u>	
<u>Rocky Fill</u>	<input checked="" type="checkbox"/>	<u>200</u>	<u>270</u>	

8. WELL CONSTRUCTION
Diameter hole 6 inches Total depth 270 feet
Casing record _____
Weight per foot _____ Thickness 3/8
Diameter _____ From _____ To _____
6 inches _____ feet _____ feet
_____ inches _____ feet _____ feet
Surface seal: Yes No Type Cement
Depth of seal 50 ft feet
Gravel packed: Yes No
Gravel packed from _____ feet to _____ feet
Perforations:
Type perforation 1/4 x 8"
Size perforation _____
From 250 feet to 270 feet
From _____ feet to _____ feet

Date started 7-24 1985
Date completed 7-30 1985

7. WELL TEST DATA

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

9. WATER LEVEL
Static water level 100 feet below land surface
Flow _____ G.P.M. _____ 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 Alcove Drilling Contractor
Address P.O. Box 139 Battle Mt Nev. Contractor
Nevada contractor's license number 20692
Nevada contractor's drillers number _____
Nevada driller's license number 1357 Actual Driller
Signed W. A. Allen Contractor
Date 8-19-85

BAILER TEST
G.P.M. 20 Draw down 10 feet 2 1/2 hours
G.P.M. _____ Draw down _____ feet _____ hours
G.P.M. _____ Draw down _____ feet _____ hours