

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. _____

1. OWNER James W. Che ADDRESS AT WELL LOCATION 821 Front St
 MAILING ADDRESS 840 Broadway Verdi, Nev.
Reno Nev

2. LOCATION $\frac{1}{4}$ $\frac{1}{4}$ Sec. 19 T. 19 N/S R. 18 E. Washoe County
 PERMIT NO. CA-1913
 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
Boulders		0	8	8
greyish brown clay		8	34	26
grey clay		34	45	11
lignite		45	66	
greyish brown shale	X	66	74	8
soft grey shale		74	90	16
fractured shale		90	100	10
grey shale		100	125	25
fractured shale	XX	125	138	13

8. WELL CONSTRUCTION
 Diameter hole 10 inches Total depth 138 feet
 Casing record _____
 Weight per foot 11 Thickness 156
 Diameter From To
6 7/8 inches 0 feet 138 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type pump & grout
 Depth of seal 108 feet
 Gravel packed: Yes No
 Gravel packed from 108 feet to 138 feet

Perforations:
 Type perforation factory sized
 Size perforation 3/32 x 2 1/2
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From 118 feet to 138 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 22 feet below land surface
 Flow _____ G.P.M. approx. 20
 Water temperature 57 ° F. Quality unknown

Date started 7/11 1986
 Date completed 7/15 1986

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 Drilling
 Contractor
 Address 22 So. Patterson, Sparks
 Contractor Nev.
 Nevada contractor's license number 14983
 Nevada contractor's drillers number 957
 Nevada driller's license number 957
 Actual Driller
 Signed Paul E. Williams Sr.
 Contractor
 Date 7-16-86

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