



WELL DRILLERS REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 15219

PRINT OR TYPE ONLY

1. OWNER Jim TRAKAS ADDRESS AT WELL LOCATION _____
MAILING ADDRESS 10304 65th _____
WILMAMARCA MOUNTAIN _____
2. LOCATION N 1/4, Sec 25, T 35, R 36 E Humboldt County _____
PERMIT NO. 21 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
New Well Recondition
Deepen Other
4. PROPOSED USE
Domestic Irrigation
Municipal Industrial
5. TYPE WELL
Cable Rotary
Other Test
Stock

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-------------------------------------|--------------|------------|------------|------------|
| <u>SANDY TOP SOIL</u> | | <u>0</u> | <u>1</u> | <u>1</u> |
| <u>LARGE ROCK & HARD CLAY</u> | | <u>1</u> | <u>42</u> | <u>41</u> |
| <u>SANDY GRAY CLAY</u> | | <u>42</u> | <u>46</u> | <u>4</u> |
| <u>HARD GRAY CLAY & ROCK</u> | <u>13/4w</u> | <u>46</u> | <u>140</u> | <u>44</u> |
| <u>HARD GRAY CLAY & ROCK</u> | | <u>140</u> | <u>150</u> | <u>10</u> |
| <u>HARD CLAY & ROCK w/ SAND</u> | | <u>150</u> | <u>170</u> | <u>20</u> |
| <u>STRINGS</u> | | | | |

8. WELL CONSTRUCTION
Diameter hole 8 inches Total depth 170 feet
Casing record _____
Weight per foot _____ Thickness 1.88
Diameter _____ inches From _____ feet To _____ 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 SAW CUT
Size perforation _____
From 150 feet to 170 feet
From _____ feet to _____ feet

9. WATER LEVEL
Static water level 130 feet below land surface
Flow Good G.P.M. _____ P.S.I. _____
Water temperature Cold F. Quality Good

Date started July 29, 1987
Date completed July 12, 1987

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 _____ Contractor _____
Address _____ Contractor _____
Nevada contractor's license number 5348
Nevada contractor's drillers number _____
Nevada driller's license number 795
Actual Driller
Signed Joe L. Armstrong 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