

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 91616

1. OWNER des Teel Jr ADDRESS AT WELL LOCATION \_\_\_\_\_

MAILING ADDRESS Box 7, Raymond \_\_\_\_\_

2. LOCATION SW 1/4 SW 1/4 Sec. 31 T. 36 N/S.R. 57 E. ELKO County \_\_\_\_\_

PERMIT NO. \_\_\_\_\_ Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name Block 4, Lot 4, Unit 1, Humboldt River Ranch

3. TYPE OF WORK		4. PROPOSED USE		5. TYPE WELL	
New Well <input checked="" type="checkbox"/>	Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/>	Irrigation <input type="checkbox"/>	Test <input type="checkbox"/>	Cable <input checked="" type="checkbox"/> Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/>	Other <input type="checkbox"/>	Municipal <input type="checkbox"/>	Industrial <input type="checkbox"/>	Stock <input type="checkbox"/>	Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Gravel & clay		0	14	14
clay & gravel		14	18	4
light tan clay	X	18	102	84
Sand & fine gravel	X	102	110	8

'88 JUL 22 09:50  
 STATE ENGINEER

8. WELL CONSTRUCTION

Diameter 6" inches Total depth 110 feet

Casing record \_\_\_\_\_

Weight per foot \_\_\_\_\_ Thickness \_\_\_\_\_

Diameter	From	To
<u>6</u> inches	<u>±1</u> feet	<u>110</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes  No  Type \_\_\_\_\_

Depth of seal 50' feet

Gravel packed: Yes  No

Gravel packed from 50' feet to 110' feet

Perforations:

Type perforation Torch cut

Size perforation 1.8" x 1.0"

From 110 feet to 80 feet

From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started \_\_\_\_\_, 19\_\_\_\_

Date completed \_\_\_\_\_, 19\_\_\_\_

9. WATER LEVEL

Static water level 51 feet below land surface

Flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.

Water temperature Cold °F Quality Good

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name R.D. Reynolds Contractor

Address Box 402, Wells NV Contractor

Nevada contractor's license number issued by the State Contractor's Board 014410

Nevada contractor's driller's number issued by the Division of Water Resources 1390

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 517

Signed Blaine Bolin Jr By driller performing actual drilling on site or contractor

Date July-19-88

BAILER TEST

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