WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 35081
Permit No.
Basin 97

I

1. OWNER Fish Springs Ranch ADDRESS

2. LOCATION per map ~~SE~~ ~~NW~~ SW ¼ Sec. 26 T. 26 N/S R. 18 E. Washoe County
PERMIT NO. NE E. D. C. #T06-1033-7

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	Thickness
Top soil		0	6	6
Brown clay		6	18	12
Sandy brn. clay		18	46	28
some sand streaks				
Clay-plastic		46	56	10
Sandy clay		56	100	44
Clay-some sandy streaks		100	210	110
Tight sand		210-	215	5
Clay-some sandy streaks		215	282	67
Sand-sma. clay streaks		282	310	28

40.092019°N
119.935216°W
NAD 27

SEE NOI #64286
Plugging this well

Date started ....., 19....
Date completed 4-25, 19 85

7. WELL TEST DATA

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

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

8. WELL CONSTRUCTION
Diameter hole ..... inches Total depth ..... feet
Casing record .....
Weight per foot ..... Thickness .....

Diameter	From	To
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet

Surface seal: Yes ☐ No ☐ Type .....
Depth of seal ..... feet
Gravel packed: Yes ☐ No ☐
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation .....
Size perforation .....
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level ..... Feet below land surface .....
Flow ..... G.P.M. .....
Water temperature ..... ° F. Quality .....

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

Name F. M. Eaton
Address 255 N. West Woodland, Ca. 95696
Wm. P. Wilson & So
Nevada contractor's license number 12368A
Nevada driller's license number 1434
Signed .....
Date .....

USE ADDITIONAL SHEETS IF NECESSARY

O-627