DIVISION OF WATER RESOURCES

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 56700
Permit No.
Basin
Date

RECEIVED OCT 11 1971 DIV. OF WATER RESOURCES BRANCH OFFICE LAS VEGAS, NEVADA

1. OWNER BRICE NEILSON ADDRESS 513 SALEM

2. LOCATION NE ¼ NW ¼ Sec. 36 T. 21 N/S R. 61 E. CLARK County
PERMIT NO.

3. TYPE OF WORK
New Well [X] Recondition [ ]
Deepen [ ] Other [ ]

4. PROPOSED USE
Domestic [X] Irrigation [ ] Test [ ]
Municipal [ ] Industrial [ ] Stock [ ]

5. TYPE WELL
Cable [X] Rotary [ ]
Other [ ]

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SAND GRAVEL SOIL		0	4	4
DECOMPOSED LIME		4	55	51
	55			
PINK CLAY		55	70	15
GRAVEL & BOULDERS	70	70	72	2
CEMENT GRAVEL		72	155	82
GRAVEL & ROCKS	155	155	160	5
LAVENDER CLAY		160	200	40
TOTAL DEPTH 200 FT				
INSTALLED 2 HP SUB PUMP (SEAT)				
TO 160 FT 1½ D P 485 P TANK				

Date started 9/1, 1971
Date completed 9/10, 1971

7. WELL TEST DATA

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

BAILER TEST
G.P.M. 20 Draw down 20 feet 15 m hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 12 inches Total depth 200 feet
Casing record
Weight per foot Thickness 106A

Diameter	From	To
inches	feet	feet
8 5/8 inches	0 feet	200 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes [X] No [ ] Type GROUT
Depth of seal feet
Gravel packed: Yes [ ] No [ ]
Gravel packed from 50 feet to 200 feet

Perforations:
Type perforation Torch
Size perforation 1/8 X 8
From feet to feet
From 50 feet to 200 feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 45 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 CHARLIE CRIBBS
Address 3400 W LAKE MEAD
Nevada contractor's license number 2018
Nevada driller's license number 76 & 156
Signed [signature]
Date 9/10 71

USE ADDITIONAL SHEETS IF NECESSARY

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