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. 61018
Permit No.
Basin

in Book

1. OWNER Maurice Kincaid ADDRESS 300 E Tropicana Las V

2. LOCATION SW ¼ NW ¼ Sec. 1 T. 21 N/S R. 53 E. Nye County
PERMIT NO.

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
Brn Clay		0	90	90
Brn Clay w/ Streaks of granulated Clay		90	140	50

RECEIVED
DEC 17 1979
Div. of Water Resources
Branch Office — Las Vegas, Nev.

Date started 9-10, 1979
Date completed 9-11, 1979

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 12¼ inches Total depth 140 feet
Casing record 8 5/8
Weight per foot 15.00 Thickness .172

Diameter	From	To
8 5/8 inches	0 feet	140 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type Cement
Depth of seal 57 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 57 feet to 140 feet

Perforations:
Type perforation Torch
Size perforation 1/8 X 6" 3 rows
From 90 feet to 140 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 40 Feet below land surface 40
Flow ..... G.P.M.
Water temperature Cool °F. Quality

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

Name C. B. Capehart
Address 4425 Stacey Ave. L.V. Nev
Nevada contractor's license number 016521
Nevada driller's license number 1081
Signed C. B. Capehart
Date 9-11-79

USE ADDITIONAL SHEETS IF NECESSARY

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