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. 10456
Permit No.
Basin

1. OWNER David ALLISON ADDRESS PAHRUMP, NEV.

2. LOCATION SE ¼ SE ¼ Sec. 36 T. 21 N/S R. 53 E. NYE County
PERMIT NO. 24337

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
SURFACE		0	4	4
SANDY CLAY		4	146	142
SHALE	X	146	149	3
SANDY CLAY		149	187	38
BLUE SANDSTONE	X	187	191	4
SOFT WHITE ROCK FORMATION	X	191	201	10
TOUGH BROWN CLAY		201	236	35
BROWN CLAY		236	302	66

RECEIVED
FEB 25 1969
DIV. OF WATER RESOURCES
BRANCH OFFICE
LAS VEGAS, NEVADA

Date started NOV. 4, 1968
Date completed JAN. 17, 1969

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 14 inches Total depth 302 feet
Casing record 302' 14" CASING
Weight per foot 36 LBS Thickness ¼"

Diameter	From	To
14 inches	0 feet	302 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 TORCH CUT
Size perforation ¼" WIDE 10" LONG
From 80 feet to 302 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 53 Feet below land surface 53
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 CHARLES NYBERG
Address P.O. BOX 214 PAHRUMP, NEV.
Nevada contractor's license number 7484
Nevada driller's license number 418
Signed Charles Nyberg
Date Feb. 20, 1969

USE ADDITIONAL SHEETS IF NECESSARY

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