

OFFICE USE ONLY
Log No. 11930
Permit No. _____
Basin Carson Des 101

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Peter Sigrist ADDRESS 500 Hillsborough Drive, Fallon, Nev

2. LOCATION W 1/4 NE 1/4 Sec. 26 T. 19 N/S R. 28 E. Churchill County
PERMIT NO. _____

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
Fine Sand		0	7	7
Clay		7	15	8 1/2
Fine Sand	X	15	27	12
Coarse Sand		27	38	11
Casing on Clay				
Standing Water 7 1/8 ft.				
First Water 15 1/8 ft.				

8. WELL CONSTRUCTION

Diameter hole 8 inches Total depth 38 feet
Casing record _____
Weight per foot _____ Thickness .188

Diameter	From	To
12 inches	0 feet	10 feet
8 inches	0 feet	38 feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type Cement
Depth of seal 10 ft. feet
Gravel packed: Yes No
Gravel packed from _____ feet to _____ feet

Perforations:
Type perforation Torch Cut
Size perforation 1/8 X 4
From 28 feet to 38 feet
From _____ feet to _____ feet

Date started Sep 7, 1971, 19_____
Date completed Sep 9, 1971, 19_____

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
1750	12	3 ft	2 1/2
_____	_____	_____	_____
_____	_____	_____	_____

BAILER TEST

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

9. WATER LEVEL

Static water level 7 1/2 Feet below land surface
Flow _____ G.P.M.
Water temperature Cold ° F. Quality Good

10. DRILLERS CERTIFICATION

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

Name W "Swede" Welshenbaugh
Address Box 24, Hawthorne, Nev 89415
Nevada contractor's license number 9105
Nevada driller's license number 494
Signed Swede Welshenbaugh
Date 9-31-71