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. 12234
Permit No.
Basin Carson Des. CARD

1. OWNER Harold VanEvery ADDRESS RT 2 Box 168 Fallon Nev

2. LOCATION SE ¼ SE ¼ Sec. 33 T. 19 N/S R. 29 E. Churchill 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
[illegible]		0	5	5
[illegible]		5	6	1
[illegible]		6	7½	1½
[illegible]		7½	31	[illegible]

Date started 3-11, 1972
Date completed 3-12, 1972

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
[illegible]	7	6	2

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 12 inches Total depth 8 feet
Casing record 6
Weight per foot ..... Thickness 250

Diameter	From	To
12 inches	0 feet	8 feet
6 inches	0.1 feet	246 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☑ No ☐ Type [illegible]
Depth of seal 8 feet
Gravel packed: Yes ☑ No ☐
Gravel packed from 8 feet to 31 feet

Perforations:
Type perforation Saw Cut
Size perforation 1/32
From 246 feet to 256 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL

Static water level 24 Feet below land surface 7
Flow [illegible] G.P.M. 7
Water temperature Cool ° 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 Tom M Hickman
Address [illegible] Carson
Nevada contractor's license number [illegible]
Nevada driller's license number 621
Signed Tom M Hickman
Date 3-12-72

USE ADDITIONAL SHEETS IF NECESSARY

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