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. 18369
Permit No.
Basin

1. OWNER LEN CHAVES CONST. ADDRESS 2545 Trident Way Reno, Nev.

2. LOCATION ¼ ¼ Sec. 24 T. 21 (N) S R. 18 E. Washoe County
~~PERMIT~~ NO. Corner Slide + Carlsbad Silver Knolls Red Rock Ranches Lot 15 - Unit 3

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☐

4. PROPOSED USE
Domestic ☒ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐ Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Top soil		0	3	3
Brn. clay		3	21	18
Brn. DG w/ clay layers	x	21	98	77
clay[redacted]se brn. sand	x	98	140	42
Loose Brn Sand WB	x	140	163	23

Date started 5/31/78, 19
Date completed 6/1/78, 19

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 6 inches Total depth 163 feet
Casing record 163
Weight per foot Thickness .156

Diameter	From	To
6 5/8 inches	0 feet	163 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 50 ft. feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50 ~~40~~ feet to 163 feet

Perforations:
Type perforation factory sawed slot
Size perforation 3/32 x 2½ x 6 around
From 116 feet to 156 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 100 Feet below land surface
Flow 10 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 WAYNE DRILLING INC.
Address P. O. Box 347 Newcastle, Cal. 95658
Nevada contractor's license number 14043
Nevada driller's license number 471
Signed Wayne Adcock
Date 6-5-78

USE ADDITIONAL SHEETS IF NECESSARY

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