WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 18482
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Bill Martin ADDRESS 3369 5 Carson St CC, Nev

2. LOCATION NE ¼ ¼ Sec 2 T. 17 N/S R 23 E. Lyon County
PERMIT NO. Stagecoach

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
Gravel & Clay		0	20	20
Gravel & Sand		20	104	84
Clay & Sand		104	120	16
Red Clay		120	138	18
Yellow Clay		138	140	2
Gravel & Sand	142'	140	146	6
Yellow Clay		146	152	6
Sand & Gravel	152'	152	156	4
Sand		156	162	6
Clay	✓	162	173	11

Date started 6-29-78, 19
Date completed 7-5-78, 19

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. 15 Draw down feet hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 12" 50 = 8" 123 inches Total depth 173 feet
Casing record 8 5/8
Weight per foot 16.9 Thickness 188

Diameter		From		To	
8	inches	0	feet	173	feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet

Surface seal: Yes ☒ No ☐ Type Concrete
Depth of seal 50 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50 feet to 80 feet

Perforations:
Type perforation Factory
Size perforation 3 + 3/32
From 150 feet to 170 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level Feet below land surface 130
Flow No G.P.M.
Water temperature cold Quality

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

Name W.M. Blair
Address Box 353 Dayton Nev 89403
Nevada contractor's license number 10950
Nevada driller's license number 963
Signed R.E. O'Farrell
Date 7/10/78

USE ADDITIONAL SHEETS IF NECESSARY

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