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. 18728
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Fred Pedro ADDRESS Virginia Highlands
LOT 43 BLOCK I
FRICES CORTWRIGHT — THIS WELL PROBABLY LOT 19, BLK I, C21575 APPALOOSA, APN: 003.022-48
2. LOCATION NE ¼ NW ¼ Sec. 32 T. 18N N/S R. 21 E. Storey 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
top soil		0	2	2
granite		2	90	88
fractured granite	✓	90	125	35

Date started 8/27, 19 78
Date completed 8/29, 19 78

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
65 GPM 250 PSI	25	20	1 HR

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 10" to 50' 8½ to bottom inches Total depth 125 feet
Casing record 6 5/8
Weight per foot 12.9 Thickness .156

Diameter	From	To
6 5/8 inches	0 feet	125 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 feet
Gravel packed: Yes ☐ No ☒
Gravel packed from feet to feet

Perforations:
Type perforation factory
Size perforation 1/16 x 3
From 100 feet to 120 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 60 Feet below land surface
Flow 25 G.P.M.
Water temperature cold ° F. Quality clear

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

Name Aqua Drilling & Well Service
Address Box 2123 Carson City
Nevada contractor's license number 15291
Nevada driller's license number 900
Signed Robert G Foster
Date 8/29/78

USE ADDITIONAL SHEETS IF NECESSARY

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