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. 19769
Permit No.
Basin 108

1. OWNER K. J. SWANSON ADDRESS 51 VELMO LANE YERINGTON

2. LOCATION SW ¼ NE ¼ Sec. 8 T. 13 N/S R. 26 E. Lyon County
PERMIT NO.

3. TYPE OF WORK
New Well [X] Recondition [ ]
Deepen [ ] Other [ ]

4. PROPOSED USE
Domestic [X] Irrigation [ ] Test [ ]
Municipal [ ] Industrial [ ] Stock [ ]

5. TYPE WELL
Cable [X] Rotary [ ]
Other [ ]

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
ADOBE CLAY		0	15	15
GRAVEL	YES	15	20	5
SAND & GRAVEL	YES	20	48	28
SANDY CLAY	YES	48	62	14
SAND, GRAVEL, CLAY	YES	62	70	8
SAND	YES	70	113	43
SAND, GRAVEL, ROCK	YES	113	125	12
SAND, GRAVEL, CLAY	YES	125	130	5
SAND, GRAVEL, ROCK	YES	130	141	11
FILL PLUG FROM		131	141	10

Date started APRIL 30, 19 79
Date completed MAY 9, 19 79

7. WELL TEST DATA

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

BAILER TEST
G.P.M. 30 Draw down 10 feet 3 hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 8 inches Total depth 141 feet
Casing record
Weight per foot Thickness 188

Diameter	From	To
8 inches	0 feet	141 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes [X] No [ ] Type CEMENT
Depth of seal 50 feet
Gravel packed: Yes [ ] No [X]
Gravel packed from feet to feet

Perforations:
Type perforation SAW CUT
Size perforation 2½ x 3/16
From 111 feet to 131 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 14 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 Edmund Miller Drilling Co.
Address Box 92, Smith, Nev. 89430
Nevada contractor's license number 12272
Nevada driller's license number 808
Signed [signature]
Date 5-9-79

USE ADDITIONAL SHEETS IF NECESSARY

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