



WELL DRILLERS REPORT

PRINT OR TYPE ONLY

Please complete this form in its entirety

NOTICE OF INTENT NO. 3497

1. OWNER JIM WALLACE ADDRESS AT WELL LOCATION PARDISE VALLEY, NEV
 MAILING ADDRESS BOX 80
PARADISE VALLEY, NEV 89426

2. LOCATION N 1/4 NE SW 1/4 Sec. 21 T 42 N/S R. 40 E HUMBOLDT County
 PERMIT NO. 33524-46109 Issued by Water Resources Parcel No. Subdivision Name

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	Thick-ness
SANDY TOPSOIL		0	3	3
BR. CLAY W/GRAVEL IMBEDED		3	20	17
HD. BR. CLAY W/S GRAVEL		20	30	10
SOFT BR. CLAY W/GRAVEL IMBEDED		30	45	15
LG. ROCKS IN BR. CLAY		45	145	100
SAND & GRAVEL W/S CLAY		145	175	30
COURS SAND & GRAVEL		175	180	5
SAND & GRAVEL IN BR. CLAY		180	205	25
SAND & GRAVEL		205	215	10
SAND & GRAVEL IN BR. CLAY		215	245	30
LG. ROCKS W/S CLAY		245	265	20
BR. CLAY W/S GRAVEL		265	280	15
SAND & GRAVEL		280	290	10
SAND & GRAVEL w/clay STRIN.		290	300	10
SAND & GRAVEL		300	310	10
SAND & GRAVEL W/CLAY				
STRINGERS		310	325	15
CLAY W/S SAND & GRAVEL		325	335	10
LG. GRAVEL IN CLAY		335	340	5
SAND & GRAVEL W/S CLAY		340	360	20
BR. CLAY		360	370	10
HD. BR. CLAY W/GRAVEL		370	390	20
BR. CLAY W/S GRAVEL		390	405	15
BR. CLAY W/GRAVEL STRING.		405	490	85
SAND & GRAVEL W/S CLAY		490	500	10
SAND & GRAVEL W/CLAY STRIN.		500	560	60

8. WELL CONSTRUCTION
 Diameter hole 24 inches Total depth 710 feet
 Casing record 16
 Weight per foot _____ Thickness 1/4
 Diameter _____ From _____ To _____
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type _____
 Depth of seal _____ feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ ° F. Quality _____

Date started 7-13-84, 19____
 Date completed 7-27-84, 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

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name _____ Contractor
 Address _____ Contractor
 Nevada contractor's license number See pg 2
 Nevada contractor's drillers number _____
 Nevada driller's license number _____ Actual Driller
 Signed _____ Contractor
 Date _____

