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

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 32032
Permit No.
Basin 6-87

PRINT OR TYPE ONLY

NOTICE OF INTENT NO.

1. OWNER DAN BRIDGEMAN
MAILING ADDRESS 1050 ZOLEZZI Ln
ADDRESS AT WELL LOCATION 1050 Zolezzi Ln.

2. LOCATION NW ¼ NW ¼ Sec. 20 T. 18N N/S R. 20 E WASHOE County
PERMIT NO. WE (Issued by Water Resources) 045-133-OL (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	Thickness
WELL ABANDONMENT				
EXISTING 6" DOMES. WELL 84' DEPTH				
STATIC 84'				
PULL PUMP				
INSTALL TREMIE PIPE				
PUMP GROUT FROM BOTTOM UP				
9 SACK 94 LB PORTLAND @ 5 GAL WATER EA.				
GROUT BLUMPED 3' OVERNIGHT				
REPOUR NEXT MORN. TO THE SERVICE				
See log #31903 for replacement				

STATE ENGINEERS OFFICE
RECEIVED
'89 AUG 23 AM 11:04

Date started ....., 19.....
Date completed ....., 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 ..... inches Total depth ..... feet
..... inches
..... inches

Casing record .....
Weight per foot ..... Thickness .....

Diameter	From	To
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... inches	..... feet	..... feet
..... 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
From ..... feet to ..... feet
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 .....

10. DRILLER'S CERTIFICATION

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

Name Joseph Leisek
Contractor

Address .....
Contractor

Nevada contractor's license number issued by the State Contractor's Board .....

Nevada contractor's driller's number issued by the Division of Water Resources .....

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1539

Signed .....
By driller performing actual drilling on site or contractor

Date .....

(Rev. 11-85) USE ADDITIONAL SHEETS IF NECESSARY (O)-627