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. 35079
Permit No.
Basin 97

1. OWNER Fish Springs Ranch ADDRESS Fos 2?

2. LOCATION as per map ¼ ¼ Sec. 23 T. 26 N/S R. 18 E. Washoe County 400' South of Ford well
PERMIT NO. 1032-2?

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	4	4
Sandy clay		4	10	6
Clay		10	12	2
Clay with sand streaks		12	54	42
Clay		54	85	31
Sandy clay		85	95	10
Clay-plastic		95	98	3
Sand with clay streaks		98	115	17
Clay to claystone		115	140	25
Tight sand		140	146	6
Clay		146	166	20
Sand		166	180	14
Lake deposit type clay		180	262	82
Claystone		262	264	2
Lake clay		264	270	6
Claystone		270	280	10
Soft lake deposit		280	508	228

Date started ....., 19..
Date completed 4-12, 1985

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 hole ..... inches Total depth ..... feet
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. .....
Water temperature ..... ° F. Quality .....

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

Name F. M. Eaton
Address 255 N. West Street
Woodland, Ca. 95695
Wm. P. Wilson and Sons
Nevada contractor's license number 12368A
Nevada driller's license number 1434
Signed .....
Date .....

USE ADDITIONAL SHEETS IF NECESSARY

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