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. 44540
Permit No.
Basin 137a

1. OWNER John Davis ADDRESS Tonopah Nev 89049

2. LOCATION SW ¼ SW ¼ Sec. 12 T. 6 N. R. 40 E. Nye County
PERMIT NO. Parcel # 12-401-17 (Now combined w/ 16) 12-401-19 - 29.51 Ac John P. Davis

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
Surface		0	12	12
Volcanic Rock		12	75	63
Clay		75	84	9
Rocky Clay		84	95	11
Rock Sand gravel		95	160	65

Date started 6/13, 1994
Date completed 6/15, 1994

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 12¼ inches Total depth 160 feet
Casing record 6"
Weight per foot 13 Thickness 1.88

Diameter	From	To
6 inches	0 feet	160 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 4' TO 50 feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 50 feet to 160 feet

Perforations:
Type perforation Machine
Size perforation 30 mesh
From 140 feet to 160 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 80 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 W S Wright
Address HC72 Box 03513 Dyer NV 89010
Nevada contractor's license number 5566
Nevada driller's license number 1108
Signed W S Wright
Date 7/9/94

USE ADDITIONAL SHEETS IF NECESSARY

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