

WELL DRILLERS REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. _____

PRINT OR TYPE ONLY

1. OWNER USGS ADDRESS AT WELL LOCATION N. side
 MAILING ADDRESS 333 W Nye Ln Governor's bowl
Carson City NV 89706
 2. LOCATION NE 1/4 NW 1/4 Sec. 25 T 19 N 19 E Washoe County
 PERMIT NO. MO-769 Parcel No. _____ Subdivision Name Governor's Bowl
 Issued by Water Resources _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock Other auger
 5. TYPE WELL
 Cable Rotary
 Other auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
sand silt & clay		0	1	1
moderately graded medium sand		1	7	6
pea gravel & pebbles		7	13	6
pea gravel, pebbles & cobbles		13	17	4
pea gravel, pebbles & sand		17	20	3
cobbles		20	22	2
pea gravel, pebbles & cobbles		22	27	5
clay		27	35	

8. WELL CONSTRUCTION
 Diameter hole 4.5 inches Total depth 35 feet
 Casing record _____
 Weight per foot shed 40 PVC Thickness _____
 Diameter From To
2 inches 0 feet 34 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type neat cement
 Depth of seal 5' feet
 Gravel packed: Yes No
 Gravel packed from 5 feet to 34 feet
 Perforations:
 Type perforation factory
 Size perforation 0.02 inches
 From 24 feet to 34 feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 18 feet below land surface
 Flow 0 G.P.M. P.S.I.
 Water temperature _____ ° F. Quality _____

Date started 7/6, 1994
 Date completed 7/6, 1994

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>94</u>	<u>5.1</u>		

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Kathryn C Kilroy Contractor
 Address 333 W. Nye Ln Contractor
 Nevada contractor's license number _____
 Nevada contractor's drillers number _____
 Nevada driller's license number FP 1519 Actual Driller
 Signed Kathryn C Kilroy Contractor
 Date 7/6/94

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours