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

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No.
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER [illegible] ADDRESS [illegible]

2. LOCATION [illegible] County
PERMIT NO. [illegible]

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
[illegible]		0	40	40
[illegible]		40	48	8
[illegible]		48	76	47
[illegible]		76	77	4
[illegible]		77	108	4
[illegible]		108	110	2

Date started 9/25 1994
Date completed 10/8 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 8 5/8 inches Total depth 110 feet
Casing record 6"
Weight per foot 12 Thickness 188

Diameter	From	To
6 inches	0 feet	110 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 50 feet
Gravel packed: Yes ☑ No ☐
Gravel packed from 50 feet to 110 feet

Perforations:
Type perforation Machine
Size perforation [illegible]
From 70 feet to 110 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 60 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 HC 79 Box 03513 [illegible]
Nevada contractor's license number 5566
Nevada driller's license number 1108
Signed [illegible]
Date 10/25/94

USE ADDITIONAL SHEETS IF NECESSARY