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. 5234
Permit No.
Basin 110

1. OWNER Clyde Van Bebber ADDRESS 539 W. Winston Indian Springs, Nevada

2. LOCATION ¼ ¼ Sec 5 T. 16 N (S) R. 56 E. CLARK County
PERMIT NO.

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
Rock + Gravel		0	30	
Green Clay		30	150	

RECEIVED
JUN 15 1981
Div. of Water Resources
Branch Office — Las Vegas, Nev.

Date started June 2, 19 81
Date completed June 8, 19 81

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 12 1/4 inches Total depth 150 feet
Casing record 8 5/8
Weight per foot ..... Thickness 1/4"

Diameter	From	To
12 1/4 inches	0 feet	150 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☑ No ☐ Type Const. Cement
Depth of seal 50 feet
Gravel packed: Yes ☐ No ☑
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation Acetylene
Size perforation 1/8 x 6"
From 70 feet to 150 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 25 Feet below land surface
Flow 18 G.P.M.
Water temperature ..... ° F. Quality Good

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

Name Robert G. Wickoff
Address 7250 Lone Mtn. Rd. L.V. Nev. 89110
Nevada contractor's license number 12866
Nevada driller's license number 721
Signed Robert G. Wickoff
Date 6-12-81

USE ADDITIONAL SHEETS IF NECESSARY

5471