



WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Margarita Hernandez ADDRESS Charente Ave - Villa City - Tonopah Stage

2. LOCATION NW 1/4 SW 1/4 Sec 35 T 11 N R 58 E County Lincoln
 PERMIT NO. _____

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input type="checkbox"/> Rotary <input checked="" type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top soil		0	20	20
Rock + Gravel		20	48	28
Water Sand		48	76	28
Gravel				
Hard Rock		76	78	2

8. WELL CONSTRUCTION

Diameter hole 14 3/4 inches Total depth 78 feet
 Casing record _____
 Weight per foot _____ Thickness 3/8
 Diameter _____ From _____ To _____
 _____ 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 78 feet

Perforations:
 Type perforation Fact. Cut
 Size perforation 8x3
 From 50 feet to 78 feet
 From _____ feet to _____ feet

RECEIVED
 Div. of Water Resources
 Branch Office - Las Vegas, Nev.

Date started 8-27 1978
 Date completed 8-28 1978

9. WATER LEVEL

Static water level 35 Feet below land surface 35
 Flow _____ G.P.M.
 Water temperature 60 F. Quality Good

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

10. DRILLERS CERTIFICATION

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

Name C. M. Robinson Jr
 Address Box 20 Hiko New
 Nevada contractor's license number 10791
 Nevada driller's license number 904
 Signed C. M. Robinson Jr
 Date 8-28-78

BAILER TEST

G.P.M. 60 Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours