

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. **106853**
Permit No. _____
Basin **212**

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

Downer Family

NOTICE OF INTENT NO. **33534**

1. OWNER **Trident Trust LP Partnership** ADDRESS AT WELL LOCATION **4235 E. Charleston Blvd**
MAILING ADDRESS **30240 Ranch Viejo Rd # B** **Las Vegas, NV**
San Juan Capistrano, CA 92675 Subdivision Name: _____ County: **Clark**
2. LOCATION **NW 1/4 NW 1/4 Sec 05 T 21 N R 62 E** Latitude **N 36° 09' 30.8"** UTM E NAD 27
PERMIT/WAIVER No. **161-05-110-002** Longitude **W 115° 01' 55.9"** N NAD 83/WGS 84
Issued by Water Resources _____ Parcel No. **MUJ-12**

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other _____

4. PROPOSED USE
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other **8" HSA Auger**

5. WELL TYPE

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
2" Asphalt Base		0	1	1
Fill Silty Sand		1	4	3
Silty Clay		4	8	4
Sandy Silt		8	10	2
Silty Sand		10	12	2
Clayey Silt		12	15	3
Silty Sand	X	15	19	4
Silty Clay		19	25	6

9. WELL CONSTRUCTION

Depth Drilled **25** Feet Depth Cased **25** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
8	0	25		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2" sch 40	460	PVC	0	25

Perforations:

Type of perforation **Factory Slots**

Size of perforation **0.20**

From **10** feet to **25** feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout **0** to **8** Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No **9** to **25** Pumped Poured

Type: **#3 Monterey Sand**

Bentonite Chips: Yes No **6** to **9** Pumped Poured

Type: **3/8 Bentonite Hole Plug**

Date started: **8-15** 20 **08**

Date completed: **8-15** 20 **08**

7. Water Level

Static water level: **14.18** feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: _____ °F

Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
NA		

10. DRILLER'S CERTIFICATION

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

Name **Elite Drilling Inc.** Contractor

Address **4255 W. Post Rd.** Contractor

Las Vegas, NV 89118

Nevada contractor's license number _____

issued by the State Contractor's Board **54931**

Nevada driller's license number issued by the _____

Division of Water Resources, the on-site driller **M-19401**

Signed **Thomas M. Beal** By driller performing actual drilling on-site or contractor

Date **9-4-08**