

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

OFFICE USE ONLY
Log No. **106847**
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

Owner Family

NOTICE OF INTENT NO. **33535**

1. OWNER **Tribant Trust LO Partnership** ADDRESS AT WELL LOCATION **1255 So Lamb Blvd**
MAILING ADDRESS **30240 Rancho Viejo #B** **Las Vegas, NV**
S AN Juan Capistrano, CA 92675 Subdivision Name: _____ County: **Clark**

2. LOCATION **NW 1/4 Sec 05 T 21 N R 62 E** Latitude **N 36° 09' 29.9"** UTM E NAD 27
PERMIT/WAIVER No. **161-05-110-003** Longitude **W 115° 04' 54.4"** N NAD 83/WGS 84
Issued by Water Resources Parcel No. **MW-18**

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Cable
 Municipal/Industrial Monitor Stock Air Other **8" H.S. Auger**

5. WELL TYPE
 Rotary RVC
 Other **8" H.S. Auger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
2" Asphalt over Agg. Base		0	1	1
2" FINE SILTY SAND/plg		1	3	2
Sandy Clay		2	12 1/2	10 1/2
Clayey Silt		12 1/2	15	2 1/2
Sand and Silt	X	15	17	2
Silty Clay		17	25	8

9. WELL CONSTRUCTION

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

HOLE DIAMETER (BIT SIZE)

From	To	Inches	Feet
0	25	8	25

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2" sch 40	40	F 480	PVE	0 to 25

Perforations:

Type of perforation **Factory Slots**
Size of perforation **.020**

From **10** feet to **25** 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 **8 1/2** to **9** Pumped Poured
Type: **3/8 Bentonite Hole plug**

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

7. Water Level
Static water level: **15.43** feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
		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, Nevada 89118
Nevada contractor license number **54931**
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources the on-site driller **M-1944**

Signed **Thomas A. Beall**
By driller performing actual drilling on-site or contractor
Date **8-9-4-08**