COPIES TO
- DIVISION OF WATER RESOURCES
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- WELL DRILLER'S COPY

PRINT OR TYPE ONLY

STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 102730
Permit No.
Basin 212

NOTICE OF INTENT NO. 30827

1. OWNER 3700 ASSOCIATES LLC
MAILING ADDRESS 667 MADISON AVE
NEW YORK, NY 10021-8029

ADDRESS AT WELL LOCATION 3708 S. LAS VEGAS BLVD.
LAS VEGAS, NV

2. LOCATION SE ¼ NE ¼ Sec 20 T 21 S R 61 E CLARK County

PERMIT NO. DW1220 (Issued by Water Resources) | 162-20-603-007 (Parcel No.) | Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE Dewater
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Plug 1-Dewater wells				
Depth 25'				
Casings 14"				
Excavate near bottom				
cut off and cement in last				
10' of pipe.				
Filled with 1.5 yards of				
9 sack cement grout.				
I.14				

Date started 3/27, 20 07
Date completed 3/27, 20 07

7. WELL TEST DATE

TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION

Depth Drilled _____ Feet. Depth Cased _____ Feet.

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:
Type perforation
Size perforation
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: ☐ Yes ☐ No Seal Type:
Depth of Seal _____ ☐ Neat Cement
Placement Method: ☐ Pumped ☐ Cement Grout
☐ Poured ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From _____ feet to _____ feet

9. WATER LEVEL

Static water level 12 feet below land surface
Artesian flow _____ G.P.M _____ P.S.I
Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION

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

Name ALLEN DRILLING INC. (CONTRACTOR)
Address 4015 WEST TOMPKINS AVE. (CONTRACTOR)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18916 & 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301301T

Signed [signature] By driller performing actual drilling on site or contractor
Date 4/16/2007

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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