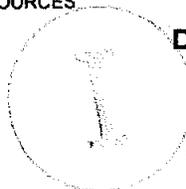


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 DO NOT WRITE ON BACK



WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 59092

1. OWNER Boomtown Hotel & Casino ADDRESS AT WELL LOCATION Boomtown / Garson Rd.
 MAILING ADDRESS P.O. Box 399 Verdi, NV #MW2
Verdi, NV 89439

2. LOCATION NW 1/4 NW 1/4 Sec. 16 T 19N N/S R 18E E Washoe County
 PERMIT NO. 038-870-02 Subdivision Name _____
Issued by Water Resources Parcel No.

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

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

5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
On this date we abandoned a 2.5" X 74' monitor well by pouring 1 bag of hole plug hydrated, followed by sand cement mix to the top of the well. The well was dry and we were unable to pull the casing.				
Washoe County Permit # WL 070022				
Nad 83				
N 39.51775				
W 119.97077				
2007 MAR 12 AM 10:10				
N 39.517861				
W 119.969766 MAD27				

8. WELL CONSTRUCTION
 Depth Drilled 74 Feet Depth Cased 74 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.5</u>	<u>SCH 40 pvc</u>		<u>0</u>	<u>74</u>

Perforations:
 Type perforation _____
 Size perforation _____

From	feet to	feet
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Surface Seal: Yes No
 Depth of Seal _____
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level. None Dry 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 Bruce MacKay Pump & Well Service, Inc. Contractor
 Address 1600 Mt. Rose Hwy Contractor
Reno, NV 89511
 Nevada contractor's license number issued by the State Contractor's Board 23096
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2299

Signed R. Bruce MacKay
 By driller performing actual drilling on-site or contractor
 Date 3/7/2007

Date started 3/7/2007, 19
 Date completed 3/7/2007, 19

7. 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			