

213702
 PRINT OR TYPE ONLY
 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. 31464

1. OWNER CASA BLANCA RESORTS LLC ADDRESS AT WELL LOCATION 811 W. MESQUITE BLVD
 MAILING ADDRESS 899 W. MESQUITE BLVD MESQUITE NV
 2. LOCATION SE 1/4 NE 1/4 Sec. 18 T. 13 N. R. 71 E. CLARK County
 PERMIT NO. 001-18-60-008 Issued by Water Resources Parcel No. Subdivision Name

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 MSP

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>ASPHALT</u>		<u>0</u>	<u>0.4</u>	<u>0.4</u>
<u>SAND SILTY SAND</u>		<u>0.4</u>	<u>45.0</u>	<u>44.6</u>
<u>CLAY SILTY CLAY w/sandy</u>		<u>45.0</u>	<u>65.0</u>	<u>20.0</u>
<u>MAP 02 sum</u>				
<u>W 65 84</u>				
<u>MW-5 36°48.246N 114°05.975W</u>				<u>65'</u>
<u>MW-2R 36°48.239N 114°06.025W</u>				<u>65'</u>
<u>MW-7 36°48.204N 114°05.772W</u>				<u>64'</u>
<u>MW-6 36°48.202N 114°06.007W</u>				<u>60'</u>

8. WELL CONSTRUCTION
 Depth Drilled 65/64/60 Feet Depth Cased 65/64/60 Feet
 HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>1 1/2</u>	<u>0</u>	<u>65</u>
<u>1 1/2</u>	<u>0</u>	<u>64</u>
<u>1 1/2</u>	<u>0</u>	<u>60</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.25</u>		<u>SC40 PVC</u>	<u>0</u>	<u>65</u>
<u>4.25</u>		<u>SC40 PVC</u>	<u>0</u>	<u>64</u>
<u>4.25</u>		<u>SC40 PVC</u>	<u>0</u>	<u>60</u>

Perforations:
 Type perforation MACHINING SCOT
 Size perforation .020
 From 65 feet to 45 feet
 From 64 feet to 44 feet
 From 60 feet to 40 feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 43/42/38 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 65/64/60 feet to 43/42/38 feet

9. WATER LEVEL
 Static water level 47 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 ERAGG DRILLING SERVICES LLC Contractor
 Address 7150 PLANO ST. Contractor
LAS VEGAS NV 89119
 Nevada contractor's license number issued by the State Contractor's Board 51266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2272
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 9/27/07

Date started 9/17, 2007
 Date completed 9/21, 2007

7. WELL TEST DATA
 TEST METHOD: Bailor Pump Air Lift
 Draw Down _____ Time (Hours) _____
 G.P.M. _____
 OCT 02 2007
 LAS VEGAS OFFICE