COPIES TO
- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- 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. 105671
Permit No.
Basin 212

NOTICE OF INTENT NO. 33329

1. OWNER ECHELON RESORTS LLC
MAILING ADDRESS 6465 S RAINBOW
LAS VEGAS, NV 89118

ADDRESS AT WELL LOCATION 3000 S LAS VEGAS BLVD.
LAS VEGAS, NV

2. LOCATION NW ¼ SW ¼ Sec 09 T 21 S R 61 E CLARK County

PERMIT NO. DW1248 (Issued by Water Resources) | 162-09-311-003 (Parcel No.) | ~~ECHELON~~ (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 2-Dewatering well				
Depth 30'				
cut off at grade and filled				
from bottom to top with				
1.25 yards of 9 sack				
slurry each.Casings left				
in place.				
WGS84				
N36 07 947'				
W115 10 203'				

Date started 6/9, 20 08
Date completed 6/9, 20 08

7. WELL TEST DATE
TEST METHOD ☐ Bailer ☐ Pump ☐ Air Lift

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

DCNR/DWR RECEIVED JUN 16 2008 LAS VEGAS OFFICE

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
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

Seal Type:
☐ Neat Cement
☐ Cement Grout
☐ Concrete Grout

9. WATER LEVEL
Static water level ____ 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 MPDEW2343
Signed
By driller performing actual drilling on site or contractor
Date June 10, 2008

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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