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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. 107521
Permit No.
Basin 212

NOTICE OF INTENT NO. 33956

1. OWNER FONTAINEBLEAU LAS VEGAS LLC
MAILING ADDRESS 2827 PARADISE RD
LAS VEGAS, NV 89109

ADDRESS AT WELL LOCATION 2755 S LAS VEGAG BLVD.
LAS VEGAS, NV

2. LOCATION SE ¼ NE ¼ Sec 09 T 21 S R 61 E CLARK County

PERMIT NO. DW1233 (Issued by Water Resources) | 162-09-602-002 (Parcel No.) | Fontainebleau (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 -Dewater wells | | | | |
| Depth 60' | | | | |
| No access for drill rig; | | | | |
| Abandon casings in place | | | | |
| pulled & removed pumps | | | | |
| poured 2.5 yards of 9 sack | | | | |
| 4000 grout into each well | | | | |
| to surface. | | | | |
| WGS84 | | | | |
| N36 08 182' | | | | |
| W115 09 555' | | | | |

Date started 11/21, 20 08
Date completed 11/21, 20 08

7. WELL TEST DATE

TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

| Draw Down (Feet Below Static) | Time (Hours) |
|---|---|
| | |

DCNR/DWR RECEIVED
FEB 04 2009
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 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 ____ 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 Timothy Wesley
By driller performing actual drilling on site or contractor
Date December 21, 2008

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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