

PRINT OR TYPE ONLY
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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. **17559**
3355.50 LAS VEGAS

1. OWNER **SANDS HOTEL & CASINO** ADDRESS AT WELL LOCATION **3355.50 LAS VEGAS BLVD, LAS VEGAS, NV**
 MAILING ADDRESS **3355 LAS VEGAS BLVD. 50 LAS VEGAS NV 89109**
 2. LOCATION **NW 1/4 SW 1/4 Sec. 16 T. 21 N. R. 61 E CLARK** County
 PERMIT NO. **MO-2728** Issued by Water Resources Parcel No. **162-16-202-008** Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE **CEC-1**
 Domestic Irrigation Test Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC Air Other **AUGER**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CONCRETE FILL		0	1	1
SILTY SAND		1	7	6
CALICHE		7	8	1
SILTY SAND		8	10	2
CALICHE		10	15	5
SILTY SAND		15	18	3
SILTY CLAY		18	25	7

8. WELL CONSTRUCTION
 Depth Drilled **25** Feet Depth Cased **25** Feet
 HOLE DIAMETER (BIT SIZE)
 From **8** Inches To **25** Feet
 From _____ Inches To _____ Feet
 From _____ Inches To _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375	1.64	0.57	0	25

Perforations:
 Type perforation **FACTORY SLOT**
 Size perforation **0.020**
 From **5** feet to **25** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal **0-1' 1-3' BENTONITE**
 Placement Method: Pumped Poured
 Scal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From **3** feet to **25** feet

9. WATER LEVEL
 Static water level **12.0** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **JUNE 17**, 19**96**
 Date completed **JUNE 17**, 19**96**

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **THOMAS HIGH** Contractor
 Address **731 PILOT RD STE H LAS VEGAS NV 89119** Contractor
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M1869**
 Signed **Tom High** By driller performing actual drilling on site or contractor
 Date **7/24/96**

