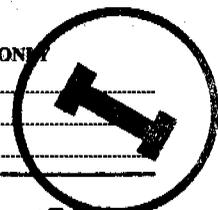


OFFICE USE ONLY
 Log No. 52876
 Permit No. _____
 Basin 212



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. 17751

1. OWNER Seren Crown Resorts ADDRESS AT WELL LOCATION 322 Lake Shore Rd, Boulder City, NV 89005
 MAILING ADDRESS 322 LAKE SHORE RD BOULDER CITY NV 89005

2. LOCATION NE 1/4 NE 1/4 Sec. 15 T. 22 N/S R. 64 E Clark County

PERMIT NO. MO-2609B Issued by Water Resources Parcel No. NONE Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE MW-5
 Domestic Irrigation Test Municipal/Industrial Monitor Stock

6. LITHOLOGIC LOG MW-5

Material	Water Strata	From	To	Thick-ness
<u>Cobbly Silty Gravelly Sand</u>		<u>0'</u>	<u>5'</u>	<u>5'</u>
<u>Silty Sand w/ cobbles</u>		<u>5'</u>	<u>12.5'</u>	<u>7.5'</u>
<u>Sand with gravel</u>		<u>12.5'</u>	<u>22'</u>	<u>9.5'</u>
<u>Silty gravelly sand</u>		<u>22'</u>	<u>26.5'</u>	<u>4.5'</u>
<u>Gravelly, silty clay</u>		<u>26.5'</u>	<u>29.5'</u>	<u>3'</u>

5. WELL TYPE
 Cable Rotary RVC Air Other AUGER

8. WELL CONSTRUCTION
 Depth Drilled 29.5 Feet Depth Cased 25 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 29.5 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

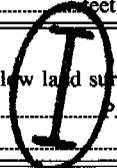
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>1.9</u>	<u>0.237</u>	<u>0</u>	<u>25</u>

Perforations:
 Type perforation Factory Slot
 Size perforation 0.020711
 From 5 feet to 25 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0-2.5 bentonite Neat Cement
 Placement Method: Pumped Poured Cement Grout Concrete Grout Bentonite
 Gravel Packed: Yes No
 From 5 feet to 25 feet

9. WATER LEVEL
 Static water level Not Applicable feet below land surface
 Artesian flow (VADOSE WELL) G.P.M. _____ P.S.I. _____
 Water temperature _____ °F Quality _____



Date started March 18 1996
 Date completed March 18 1996

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Kent Groover 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 M-1953
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 7/8/96