

OFFICE USE ONLY  
 Log No. 62823  
 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. 17261

1. OWNER Coast Hotels & Casinos ADDRESS AT WELL LOCATION 4300 West Carey, No. Las Vegas  
 MAILING ADDRESS C/O Broadbent, 833 Nevada Hwy, Boulder City, NV  
 2. LOCATION SE 1/4 SW 1/4 Sec. 18 T 20 N 10 R 6 E CLARK County  
 PERMIT NO. WD 2779 Parcel No. 139-18-404-001 Subdivision Name N/A  
 Issued by Water Resources

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 ALGER

6. LITHOLOGIC LOG

Material	Water Strata	From ft	To ft	Thickness ft
SILTY SAND		0	3	3
CALICHE		3	6	3
GRAVEL		6	16	10
GRAVEL		16	18	2
SILTY SAND		18	19	1
GRAVEL		19	20	1

8. WELL CONSTRUCTION  
 Depth Drilled 20 Feet Depth Cased 20 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 Inches To 0 Feet 20 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 1/4</u>		<u>1/2</u>	<u>0</u>	<u>10</u>

Perforations:  
 Type perforation Sawcut  
 Size perforation 0.020  
 From 10 feet to 20 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 6'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No w/ 3% bentonite  
 From 8' feet to 20' feet

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

Date started February 13, 1997  
 Date completed February 13, 1997

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 Weber Drilling Services Contractor  
 Address 115 So. Weber Dr Suite 1 Chandler Az 85226 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 39528  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M 1847  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date 3-6-97