WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

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. 72655
Permit No.
Basin 212

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

aladdin Hotel + Casino

NOTICE OF INTENT NO. 17131

1. OWNER ADP MARSHALL/FLOUR DANIEL
MAILING ADDRESS 3667 LAS VEGAS BLVD.
LAS VEGAS, NV 89109

ADDRESS AT WELL LOCATION ALADDIN HOTEL & CASINO
3667 LAS VEGAS BLVD. LAS VEGAS, NV 89109

2. LOCATION - ¼ NW ¼ Sec. 21 T. 21 N/S R. 61 E. CLARK County
PERMIT NO. Issued by Water Resources | 162-21-201-001 Parcel No. | Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Abandon ☒ Other Dewater

4. PROPOSED USE dewater
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

WELL TYPE
☐ Cable ☑ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
DEWATER WELL #17 of 22				
Hard rock		0	13	
fractured rock some clay		13	21	
clay		21	25	

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
24"	Inches	0	Feet	25	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations: MACHINE
Type perforation: 1/4"X2 1/2"
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
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 0 feet to 25 feet

9. WATER LEVEL
Static water level 5 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature ____ °F Quality

Date started 7/10, 1998
Date completed 7/10, 1998

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ 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 ALLEN DRILLING INC. (Contractor)
Address 4847 S. VALLEY VIEW (Contractor)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18916
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
Signed ____ By driller performing actual drilling on site or contractor
Date

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

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