

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. **75930**
Permit No. **215**
Basin

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

NOTICE OF INTENT NO. **18509**

1. OWNER **Broadbent & Assoc. c/o Seven Crown Resorts**
MAILING ADDRESS **322 Lakeshore Road**
Boulder City, NV 89005

ADDRESS AT WELL LOCATION **Echo Bay Resort 64**
Northshore Road, Overton, NV 89040

2. LOCATION SE 1/4 SE 1/4 Sec. 6 T 19S
PERMIT NO. 740-360-019
Issued by Water Resources Parcel No.

N/S R R88E E E Clark County
NW-6
Subdivision Name

3. WORK PERFORMED
 New Well
 Replace
 Deepen
 Abandon
 Recondition
 Other

4. Domestic
 Municipal/Industrial

PROPOSED USE
 Irrigation
 Monitor
 Stock

5. WELL TYPE
 Test
 Cable
 Rotary
 RVC
 Air
 Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	0.5	.5
Silty sand		0.5	12	11.5
Sandy clay		12	19	7
Sandy gravel	X	19	30	11

8. WELL CONSTRUCTION
Depth Drilled 30 Feet
Depth Cased 30 Feet

HOLE DIAMETER (BIT SIZE)

From	To	From	To
12 Inches	0	30 Feet	30 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.5	1.9	0.287	0	30

Perforations:

Type perforation	Size perforation	From	To	From	To
Factory slot	0.020	10	feet to	30	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 **0-5/5-7 Bentonite** Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From 7 feet to 30 feet

9. WATER LEVEL
Static water level 20.30 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 **Thomas High c/o Converse Consultants**

Address **731 Pilot Road, Suite H** Contractor
Las Vegas, NV 89119

Nevada contractor's license number
Issued by the State Contractor's Board **48947**

Nevada driller's license number issued by the
Division of Water Resources, the on-site driller **M-1869**

Signed _____
By driller performing actual drilling on-site or contractor

Date 6/28/99

Date started 3/4/1999, 19__
Date completed 3/4/1999, 19__

7. WELL TEST DATA
TEST METHOD: Bailor Pump Air Lift
G.P.M. _____ Time (hours) _____
 Draw Down (Feet Below Static)

TEST METHOD:	Draw Down	Time (hours)
G.P.M.		