

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 80307
 Permit No. _____
 Basin 212

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 20673

1. OWNER TURNBERRY PAVILLION PARTNERS ADDRESS AT WELL LOCATION 2777 PARADISE RD.
 MAILING ADDRESS 2777 PARADISE RD. LAS VEGAS, NV 89109 9 WELLS
 2. LOCATION NE 1/4 SE 1/4 Sec. 9 T. 21 N/S R. 61 E. CLARK County
 PERMIT NO. DW1119 Issued by Water Resources Parcel No. 162-09-602-006 Subdivision Name TOWER II

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
9-50' DEWATER WELLS				
Fill		0'	2'	
Caliche		2'	4'	
Clay, silt, brown-dry		4'	12'	
Clay, sand & gravel-wet		12'	22'	
Brown clay-dry		22'	27'	
Brown clay sand with gravel		27'	29'	
Caliche		29'	35'	
Clay, sand & gravel-wet		35'	45'	
Sandy silt		45'	50'	

8. WELL CONSTRUCTION
 Depth Drilled 50' Feet Depth Cased 50' Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	36.71	1.250	0	50

Perforations: **MACHINE**
 Type perforation _____
 Size perforation 1/4" x 2 1/2" x 3 rows @ 13
 From 10 feet to 50 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal _____ Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 14' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 6/22
 Date completed 7/16

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.
ALLEN DRILLING INC.
 Name _____ Contractor
 Address 4847 S. VALLEY VIEW Contractor
LAS VEGAS, NV 89103
 Nevada contractor's license number 18917
 issued by the State Contractor's Board
 Nevada driller's license number issued by the ABDS2161
 Division of Water Resources, the on-site driller.
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 7-13-00