

OFFICE USE ONLY  
 Log No. 82370  
 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. 21511  
 3200 S. LAS VEGAS BLVD.

1. OWNER ROUSE FS LLC ADDRESS AT WELL LOCATION FASHION SHOW MALL 2000  
 MAILING ADDRESS PO BOX 833  
COLUMBIA, MD 21044-0833  
 2. LOCATION NW 1/4 NW 1/4 Sec. 16 T 21 N/S R 61 E CLARK County  
 PERMIT NO. DW1125 162-17-510-001 NEIMAN MARCUS Subdivision Name  
 Issued by Water Resources Parcel No.

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
4-DEWATER WELLS				
SAND GRAVEL		0	12	12
CALICHE		12	14	2
SILTY CLAY		14	19	5
CLAY		19	30	11

8. WELL CONSTRUCTION  
 Depth Drilled 30 Feet Depth Cased 30 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 24 Inches To 30 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	0.250	0	30'

Perforations: Machine  
 Type perforation \_\_\_\_\_  
 Size perforation 1 7/8 X 2 1/2 X  
 From 10' feet to 30' feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal \_\_\_\_\_ Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 0 feet to 30 feet

9. WATER LEVEL  
 Static water level 20' feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 1/2/01, 19\_\_\_\_\_  
 Date completed 1/2/01, 19\_\_\_\_\_

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.  
 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 18917  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301 T-1  
 Signed [Signature] By driller performing actual drilling on site or contractor  
 Date 2-21-01

