

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. 24306
24306

1. OWNER TURNBERRY PAVILLION PARTNERS ADDRESS AT WELL LOCATION 2747 PARADISE RD.
 MAILING ADDRESS 2777 PARADISE RD. LAS VEGAS, NV 89109
 2. LOCATION S 1/4 NE 1/4 Sec. 9 T 21 N 1/2 R 61 E CLARK County
 PERMIT NO. _____ Issued by Water Resources 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
 5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-----------------------------|--------------|------|-----|------------|
| 2-40' DEWATER WELLS | | | | |
| Fill | | 0' | 2' | |
| Caliche | | 2' | 4' | |
| Clay, silt, brown-dry | | 4' | 6' | |
| Clay, sand & gravel-wet | | 6' | 12' | |
| Brown clay-dry | | 12' | 17' | |
| Brown clay sand with gravel | | 17' | 19' | |
| Caliche | | 19' | 25' | |
| Clay, sand & gravel-wet | | 25' | 33' | |
| Sandy silt | | 33' | 40' | |

8. WELL CONSTRUCTION
 Depth Drilled 40' Feet Depth Cased 40' 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 | 40 |

Perforations: **MACHINE**
 Type perforation 1/4" x 2 1/2" x 3 rows @ 13'
 Size perforation 40
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal _____ Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ 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.
ALLEN DRILLING INC.
 Name _____ Contractor
4015 West Tompkins
 Address _____ 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 1301
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 2/3/03

Date started 1/16/03, 20
 Date completed 1/17/03, 20

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 | | | |
| | | | |
| | | | |
| | | | |

RECEIVED
 FEB 06 2003
 LAS VEGAS OFFICE