

OFFICE USE ONLY
 Log No. 57716
 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. 24302

1. OWNER WL HOMES LLC ADDRESS AT WELL LOCATION Desert Inn & Cabana
 MAILING ADDRESS 4435 S JONES #1 LAS VEGAS, NV
LAS VEGAS, NV 89103-3307

2. LOCATION SE 1/4 SE 15 T. 21 N/S R. 62 E. CLARK County
 PERMIT NO. DW1153 161-15-801-001, 002 JOHN LAING HOMES-DESERT INN PLANNED COMM.
 Issued by Water Resources Parcel No. 161-15-701-001 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
35-24" DEWATER WELLS				
Silt		0'	2'	2'
Silt	xx	2'	26'	24'
red clay		26'	29'	3'
white clay		29'	30'	1'

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

HOLE DIAMETER (BIT SIZE)
 From To
24" Inches 0' 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)

Perforations:
 Type perforation MACHINE
 Size perforation
 From 20' feet to 30' feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured

Gravel Packed Yes No 30'
 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 _____
 Address 1013 WEST TOMPKINS
LAS VEGAS, NV 89103 Contractor
 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 2/4/03

Date started 1/6/03 20
 Date completed 1/28/03 20

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

RECEIVED
 FEB 11 2003
 LAS VEGAS OFFICE