COPIES TO
- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- WELL DRILLER'S COPY

PRINT OR TYPE ONLY

STATE OF NEVADA

DIVISION OF WATER RESOURCES

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. 96458
Permit No.
Basin 212

NOTICE OF INTENT NO. 27353

1. OWNER NEVADA DEVELOPMENT PARTNERS LP
MAILING ADDRESS 727 W SEVENTH ST. #800
LOS ANGELES, CA 90017-3715

ADDRESS AT WELL LOCATION ~~2170~~ S LAS VEGAS BLVD.
LAS VEGAS, NV 2710

2. LOCATION SW ¼ NE ¼ Sec 09 T 21 S R 61 E CLARK County

PERMIT NO. DW1189 (Issued by Water Resources) | 162-09-613-002 (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	Thickness
23-30' dewater wells				
Brown dirt & rock		0	8	8
Silt	x	8	12	4
White clay		12	14	2
Brown silty clay	xx	14	19	5
Brown clay		19	25	6
Brown silty clay		25	30	3

RECEIVED
MAY 09 2005
LAS VEGAS OFFICE

Date started 3/21, 20 05
Date completed 3/29, 20 05

7. WELL TEST DATE

TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ 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)

Perforations:
Type perforation
Size perforation
From _____ feet to _____ 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 ☐ 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 _____ 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 ALLEN DRILLING INC. (CONTRACTOR)
Address 4015 WEST TOMPKINS AVE. (CONTRACTOR)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18916 & 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller ABDS2161
Signed _____ By driller performing actual drilling on site or contractor
Date 4/28/05

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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