

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

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

OFFICE USE ONLY
 Log No. 97552
 Permit No. 212
 Basin 212

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 29463

1. OWNER **FLAMINGO PARADISE GAMING LLC** ADDRESS AT WELL LOCATION **4100 PARADISE RD.**
 MAILING ADDRESS **5195 LAS VEGAS BLVD S** **LAS VEGAS, NV 89119**

2. LOCATION NW 1/4 NW 1/4 Sec 22 T 21 S R 61 E **CLARK** County
 PERMIT NO. DW1192 162-22-104-001 DSB

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
10 dewater wells				
Silty dirt		0	5	5
Caliche		5	10	5
White silty clay	x	10	16	6
Caliche		16	17	1
Tan clay		17	23	6
Caliche		23	25	2
Brown Dirt	x	25	30	5

8. WELL CONSTRUCTION

Depth Drilled 30' Feet Depth Cased 30' Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>24</u> Inches	<u>0</u> Feet <u>30</u> 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	To
<u>10</u> feet to	<u>30</u> feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ 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

Date started 9/12, 20 05
 Date completed 10/4, 20 05

7. WELL TEST DATE

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			

9. WATER LEVEL
 Static water level 11 feet below land surface
 Artesian flow no 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.**
 Address **4015 West Tompkins Ave.**
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 [Signature]
 By driller performing actual drilling on site or contractor
 Date 10/14/05