

OFFICE USE ONLY
 Log No. 98638
 Permit No. 36249
 Basin 213

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. 27131

1. OWNER Don Laughlin/River Side Hotel & Casino ADDRESS AT WELL LOCATION Don Laughlin/River Side Hotel and Casino 1650 Casino Dr. Laughlin Nevada 89029
 MAILING ADDRESS Laughlin NV 89029

2. LOCATION NW 1/4 NW 1/4 Sec 13 T 32 N 66 E Clark County
 PERMIT NO. 36249 264-13-101-001
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other

4. PROPOSED USE
 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
<u>pump grout cement</u>				
<u>From 490 to surface</u>				
<u>2.79 yds</u>				
<u>Permit number</u>				
<u>R-1304</u>				
<u>plugging of log 2φ55φ</u>				
<u>DCNR/DWR RECEIVED</u>				
<u>DEC 16 2005</u>				
<u>LAS VEGAS OFFICE</u>				

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:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal.....
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From.....feet to.....feet

Date started.....December 16....., 2005
 Date completed.....December 16....., 2005

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			

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 T.D.C. Water Well Drilling Contractor
 Address 2870 W. Pebble Rd Contractor
Las Vegas NV, 89123
 Nevada contractor's license number issued by the State Contractor's Board 0059948
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1737-T1
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 12/16/05