

PRINT OR TYPE ONLY
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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. 28463

1. OWNER Silver Nugget Casino ADDRESS AT WELL LOCATION 2236 N. Las Vegas Blvd.
 MAILING ADDRESS 2140 N. Las Vegas Blvd. N. Las Vegas NV 89030
 2. LOCATION NW 1/4 NE 1/4 Sec. 23 T. 20 N/S R. 61 E CLARK County
 PERMIT NO. 139-23-504-002 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 MW-2

| Material | Water Strain | From | To | Thickness |
|----------------------------|--------------|-------------|-------------|-----------|
| <u>2" asphalt pipe</u> | | <u>0</u> | <u>3</u> | |
| <u>fill - sandy gravel</u> | | | | |
| <u>SANDY CLAY</u> | | <u>3</u> | <u>7</u> | |
| <u>CALICHE</u> | | <u>7</u> | <u>10</u> | |
| <u>SANDY CLAY</u> | | <u>10</u> | <u>13</u> | |
| <u>CALICHE</u> | | <u>13</u> | <u>16</u> | |
| <u>SANDY CLAY</u> | | <u>16</u> | <u>17.5</u> | |
| <u>SILTY CLAY</u> | <u>Y</u> | <u>17.5</u> | <u>35</u> | |

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 35 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| <u>2"</u> | <u>PVC</u> | <u>sch 40</u> | <u>0</u> | <u>35</u> |

Perforations:
 Type perforation slotted screen
 Size perforation .010-inch
 From 20 feet to 35 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 18 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 18 feet to 35 feet

9. WATER LEVEL
 Static water level 16.68 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 Tim Aten Contractor
 Address 4343 S. Polaris Ave
Las Vegas, NV 89103
 Nevada contractor's license number _____
 issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: M2155
 Signed Tim Aten
 By driller performing actual drilling on site or contractor
 Date 1/30/06

Date started 1/25/06 2006
 Date completed 1/25/06

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 | | | |