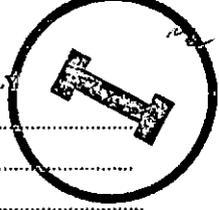


COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

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

OFFICE USE ONLY
 Log No. 101002
 Permit No. _____
 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. 30335

1. OWNER WYNN LAS VEGAS LLC ADDRESS AT WELL LOCATION 3141 S. LAS VEGAS BLVD.
 MAILING ADDRESS 3131 LAS VEGAS BLVD. S LAS VEGAS, NV 89109

2. LOCATION SE 1/4 SW 1/4 Sec 09 T 21 S R 61 E CLARK County

PERMIT NO. DW1218A 162-09-410-001
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE Dewatering
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
10-Dewater wells				
Brown dirt		0'	3'	3'
Caliche		3'	6'	3'
White clay		6'	8'	2'
caliche		8'	12'	4'
silt	xx	12'	13'	1'
caliche		13'	18'	5'
redish brown clay		18'	25'	7'

OCN/DWR RECEIVED
OCT 13 2006
LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 20-25 Feet Depth Cased 20-25 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
24" Inches _____ 0 Feet 20-25 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 _____ 0 feet to _____ 20'-25' 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 _____ 20-25' feet

9. WATER LEVEL
 Static water level _____ 125 feet below land surface
 Artesian flow _____ no G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 9/23, 20 06
 Date completed 9/23, 20 06

7. WELL TEST DATE

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	

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 [Signature]
 By driller performing actual drilling on site or contractor
 Date 10/10/06