

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

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 104117
 Permit No. _____
 Basin 212

WELL DRILLER'S REPORT

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

PRINT OR TYPE ONLY

1. OWNER Flamingo Structures LLC
 MAILING ADDRESS 3220 Nebraska Ave. Santa Monica, CA 90404
 ADDRESS AT WELL LOCATION 4055 Palos Verdes Street Las Vegas, Nv

NOTICE OF INTENT NO. 31363

2. LOCATION SW 1/4 Sw 1/4 Sec 15 T 21 S R 61 E Clark County
 PERMIT NO. DW1254 162-15-401-013

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 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	Thick-ness
10-Dewater wells				
Silt		0'	4'	4'
Caliche		4'	6'	2'
Brown rocky soil		6'	12'	6'
Caliche		12'	16'	4'
White silty clay	x	16'	28'	12'
Caliche		28'	32'	4'
Brown silty clay		32'	40'	8'

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet
 HOLE DIAMETER (BIT SIZE)
 From 24 Inches To 0 Feet 40 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 20 feet to 40 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Depth of Seal _____
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 0 feet to 40 feet

9. WATER LEVEL
 Static water level 14 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.
 (CONTRACTOR)

Date started 10/22, 20 07
 Date completed 10/24, 20 07

7. WELL TEST DATE

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

Address 4015 West Tompkins Ave. Las Vegas, NV 89103
 (CONTRACTOR)
 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 11/2/2007

DCNR/DWR
 RECEIVED
 NOV 06 2007
 LAS VEGAS OFFICE