

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

Log No. 70128

Permit No. _____

Basin _____

NOTICE OF INTENT NO. 16492

1. OWNER Las Vegas Sands ADDRESS AT WELL LOCATION Sands-Vinietian Project
 MAILING ADDRESS 3355 Las Vegas Blvd So.

2. LOCATION 1/4 W 1/4 Sec. 16 T 21 N/S R 61 E Clark County
 PERMIT NO. DW-1065 162-16-301-001-001
Issued by Water Resources Parcel No. Subdivision Name

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	Thickness
Abandon 5 wells to depth fill with 1 1/4 yards of 9 sac Sand Cement Slurry		15'	0	43'
Well#'s 1,6,9,11,& 12				

8. WELL CONSTRUCTION
 Depth Drilled 43 Feet Depth Cased 43 Feet
 HOLE DIAMETER (BIT SIZE)
 From 24" Inches To 0 Feet
43' Feet
 _____ Inches _____ Feet
 _____ Inches _____ 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

Surface Seal: Yes No Seal Type:
 Depth of Seal 43' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 15 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 XXXX Allen Drilling, Inc.
 Address 4847 S. Valley View
Las Vegas, Nv 89103
 Nevada contractor's license number 0018916
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1301
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date October 6, 1997

7. WELL TEST DATA

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