WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 84056
Permit No.
Basin

NOTICE OF INTENT NO. 22118

1. OWNER ROUSE FS LLC (MARTEN & HARRIS)
MAILING ADDRESS PO BOX 833
COLUMBIA, MD 21044-0833

ADDRESS AT WELL LOCATION 3200 S. LAS VEGAS BLVD.
FASHION SHOW MALL 2000

2. LOCATION NW ¼ NW ¼ Sec. 16 T. 21 N/S R. 61 E. CLARK County
PERMIT NO. (Issued by Water Resources) | Parcel No. 162-17-510-001 | Subdivision Name NEIMAN MARCUS

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 4-30' dewater wells				
No access for drilling.				
Pulled casings and filled with				
1.5 yards each with 9 sack				
cement slurry.				

Date started July 11, 2001, 19
Date completed July 11, 2001, 19

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

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 ALLEN DRILLING INC. (Contractor)
Address 4847 S. VALLEY VIEW (Contractor)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller ABDS2117
Signed ____ (By driller performing actual drilling on site or contractor)
Date 8/1/01

RECEIVED
Received
AUG 6 2001
LAS VEGAS OFFICE

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

(O)-627

Martin Harris