

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. 99575
 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. 29781

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

2. LOCATION SE 1/4 SW 1/4 Sec 09 T 21 S R 61 E CLARK County
 PERMIT NO. 162-09-410-001

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

Material	Water Strata	From	To	Thick-ness
3-Monitor wells				
Asphalt & type II		0	2	2'
Silt		2	6	4
Brown alluvium & rock		6	13	7
Tan alluvium & rock		13	16	3
White alluvium & rock		16	19	3
Caliche		19	25	6
Caliche	xx	25	35	10
Brown clay		35	43	8
Red clay		43	54	11
Tan clay		54	60	6
DCNR/DWR RECEIVED				
MAY 26 2006				
LAS VEGAS OFFICE				

8. WELL CONSTRUCTION
 Depth Drilled 60 Feet Depth Cased 60 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
24" Inches _____ Feet 60 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 30 feet to 60 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 60 feet

Date started 4/25, 20 06
 Date completed 5/5, 20 06

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	

9. WATER LEVEL
 Static water level 25 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)
 Address 4015 West Tompkins Ave.
 (CONTRACTOR)
Las Vegas, NV 89103
 Nevada contractor's license number issued by the State Contractor's Board 18917 *alg*
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller _____
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date May 23, 2006