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WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 27101

1. OWNER Conoco Phillips Co. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1230 W. WASHINGTON #212 4375 Spring Mountain Rd.
TEMPE, AZ 85281 LAS VEGAS, NV
 2. LOCATION NE 1/4 NE 1/4 Sec 18 T. 21 N. R. 61 E CLARK County
 PERMIT NO. _____ Parcel No. 162-18-001-001 Subdivision Name _____
 Issued by Water Resources _____

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 HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TYPE II FILL		0.0	2.0	2.0
BROWN CLAY		2.0	4.0	2.0
CALICHE		4.0	7.0	3.0
BROWN CLAY w/ SAND		7.0	11.0	4.0
CALICHE		11.0	13.0	2.0
BROWN SANDY CLAY		13.0	18.0	5.0
GRAY CLAY w/ GRAVEL		18.0	27.0	9.0
GRAY CLAY		27.0	32.0	5.0

8. WELL CONSTRUCTION
 Depth Drilled 32 Feet Depth Cased 32 Feet
 HOLE DIAMETER (BIT SIZE)
 From 9.0 Inches To 3.20 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.250		SCH 40	00	17.0

Perforations:
 Type perforation MACHINE SLOTTED
 Size perforation .020
 From 32.0 feet to 17.0 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 12.0 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 15.0 feet to 32.0 feet

9. WATER LEVEL
 Static water level 17.0 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 WDC EXPLORATION & WELLS Contractor
 Address 570 CORINTHIAN WAY Contractor
N. LAS VEGAS, NV 89030
 Nevada contractor's license number issued by the State Contractor's Board 0012852
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2202
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 10/12/04

Date started 9/20 1904
 Date completed 9/24 1904

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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