

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY

Log No. 103189
Permit No. _____
Basin 054



PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 5863 2
CHP2-40

1. OWNER BARRICK - CORTEZ
MAILING ADDRESS HCLD Box 1250
Crescent Valley, NV 89821

ADDRESS AT WELL LOCATION CORTEZ HILLS
Subdivision Name: _____ County: LANDER

2. LOCATION SW 1/4 SE 1/4 Sec 7 T 260 SR 48 E
PERMIT/WAIVER No. M10-1441
Issued by Water Resources Parcel No. _____

Latitude 40.131565 UTM E 533639.848 NAD 27
Longitude 116.605157 N 4443224.206 NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Municipal/Industrial
 Irrigation Monitor

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thickness
ALLUVIUM / GRAVEL		0	20	20
GRAVEL / CLAYS		20	720	700
BEDROCK			720	
VOLCANICS ROCK/CLAYS		720	780	60
WHITE VOLCANIC CLAY		780	790	10
VOLCANIC ROCK - FRACTURED		790	800	10
CLAY - VOLCANIC		800	820	20
VOLCANIC FRACTURED ROCK		820	900	80
WATER	26 GPM	420'		
WATER	50 GPM	620'		
WATER	100 GPM	700'		
WATER	150 GPM	900'		

GRAVELED 20' SLOTTED SECTION
540' to 580', BENTONITE GROUT
FROM 580' TO 720'.
ABANDONITE FROM 220' TO
SURFACE, ~~60'~~ 60' CEMENT
SEAL.
USED SOME CHIPS WITH
ABANDONITE.

9. WELL CONSTRUCTION			
Depth Drilled	Feet	Depth Cased	Feet
HOLE DIAMETER (BIT SIZE)			
	From	To	
12 1/4	Inches	0	Feet 40
6 3/4	Inches	40	Feet 900
	Inches		Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8		0.188	0	40
2 1/2		SCHEDULE 80	0	900

Perforations: SLOTTED *pc 6-18-08 per well driller 7-27-07*
Type of perforation _____
Size of perforation 0.020
From PERFORATED 900 feet to 740 feet
From BLANK 740 feet to 540 0 feet
From PERFORATED 540 feet to 520 feet
From BLANK 520 feet to 0 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 60 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout 540 to 720 Pumped Poured
Gravel Pack: Yes No 740 to 900 Pumped Poured
Type: 1/4" GRAVEL
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: 3/8" HOLE PLUG

Date started: MARCH 14, 20 07
Date completed: MARCH 23, 20 07

7. Water Level
Static water level: 280' feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COOL °F
Quality: _____

8. WELL TEST DATA			
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
	<u>N/A</u>		
	<u>150 GPM</u>	<u>WHILE DRILLING AT 900'</u>	

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name EKLUND DRILLING COMPANY / AUGUST WILSON
Contractor
Address P.O. Box 2748
Contractor
ELKO, NV 89803
Nevada contractor's license number _____
issued by the State Contractor's Board 0030823
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2298
Signed _____
By driller performing actual drilling on site or contractor
Date 3-30-07