

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

OFFICE USE ONLY *106674*  
 Log No. ....  
 Permit No. ....  
 Basin *179* .....

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. **62723**

1. OWNER **Quadra-Robinson NV Mining** **KP-6** ADDRESS AT WELL LOCATION **Robinson Mine, 2 miles south of Ruth, NV**  
 MAILING ADDRESS **P.O. Box 382**  
**Ruth, NV 89319** **Subdivision Name: NA** **County: White Pine**

2. LOCATION **SW¼SE¼ Sec10T16N/ R62E** Latitude **39.260879** UTM E **674574**  NAD 27  
 PERMIT/WAIVER NO. **m/o-1102** **NA** Longitude **114.976627** N **4347470**  NAD 83/WGS 84  
Issued by Water Resources Parcel No.

3. TYPE OF WELL  
 Domestic  Irrigation  Test  Municipal/Industrial  Monitor  Stock  
 Is this well being plugged because a replacement well was drilled?  Yes  No  
 If yes, what is replacement well NOI? \_\_\_\_\_  
 Is there an existing well log?  Yes  No  
 If yes, what is NDWR well log #? **68562**

4. EXISTING WELL CONSTRUCTION  
 Depth Drilled **920** Feet Depth Cased **796** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
7.625	28.57	.250	+1.50	39
1.500	3.63	.200	+1	796

Existing Perforations:  
 Type of perforation **Slotted**  
 Size of perforation **.125**  
 From **732** feet to **796** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

5. WATER LEVEL  
 Static water level: **662** feet below land surface  
 Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water Temperature: \_\_\_\_\_ °F Quality \_\_\_\_\_

6. Additional Notes or Comments  
**Materials Used:**

**Neat Cement : 26 cu.ft.**

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 STATE ENGINEERS OFFICE

7. WELL PLUGGING PROCEDURE  
 Was well cleaned out to total depth?  Yes  No  
 If well was not cleaned out to total depth, please explain why: \_\_\_\_\_

Was the well contaminated?  Yes  No  
 Was the casing pulled?  Yes  No  
 Was the casing over drilled?  Yes  No  
 If casing was left in place, please show where additional perforations were made:  
 Additional Perforations:  
 Type of perforator used: **NA**  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_

8. WELL PLUGGING MATERIALS

Material Used

From	To	Material	Pumped	Poured
0	796	Cement	<input checked="" type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight **15.6** lbs/gal  
 Bentonite Grout \_\_\_\_\_ % bentonite

Date Started **04-Aug-08**  
 Date Completed **04-Aug-08**

9. DRILLER'S CERTIFICATION

This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.

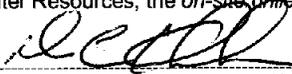
Name **Boart Longyear Drilling Services** (CONTRACTOR)

Address **P.O. Box 5279** (CONTRACTOR)

**Elko, NV 89802**

Nevada contractor's license number issued by the State Contractor's Board **0021976**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2329**

Signed 

By driller performing actual drilling on site or contractor  
 Date **05-Aug-08**