

FINALIZED
MA

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

OFFICE USE ONLY
Log No. 110593
Permit No. _____
Basin 129

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. 65188

1. OWNER Coeur Rochester ADDRESS AT WELL LOCATION Coeur Rochester mine
MAILING ADDRESS P.O. Box 1057 Lovelock, NV
Subdivision Name: _____ County: Pershing

2. LOCATION NW 1/4 SE 1/4 Sec 15 T 28N N/S R 34 E Latitude W 40 29 42 UTM E 402942 NAD 27
PERMIT/WAIVER No. M/o-1621 Longitude N 44 58 5 8 N 4460580 NAD 83/WGS 84

Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen 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
fill		0	6	6
brown clay		6	8	2
brown clay & rock		8	18	10
slip rock		18	23	5
brown hard rock		23	140	117
silt stone & gravel mix	145	140	160	20
hard gray & brown rock mix		160	300	140
NAD 27 GPS 40.290174° N 118.140910° W				

9. WELL CONSTRUCTION

Depth Drilled 300 Feet Depth Cased 270 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
9 7/8 Inches	0	10
8 Inches	10	300

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4		scl 80	+2 1/2	270

Perforations:

Type of perforation mill slot
Size of perforation .020

From	feet to	feet
250	270	

Annular Seal: Yes No

Neat Cement 0 to 15 Pumped Poured
 Cement Grout to Pumped Poured
 Concrete Grout to Pumped Poured
 ≥30% Bentonite Grout to Pumped Poured

Gravel Pack: Yes No 140 to 270 Pumped Poured
Type: 10-20 silica sand

Bentonite Chips: Yes No 15 to 137 Pumped Poured
Type: 1/4 chips

Date started: 4-Apr 20 10
Date completed: 10-Apr 20 10

7. Water Level
Static water level: 145 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

10. DRILLER'S CERTIFICATION

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

Name Alternative Drilling
Contractor
Address P.O. Box 281166
Contractor
Lamoille, NV 89828

Nevada contractor's license number 73955
issued by the State Contractor's Board
Nevada driller's license number issued by the 1689 1689
Division of Water Resources, the on-site driller

Signed [Signature]
By driller performing actual drilling on site or contractor
Date 5-3-2010