

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

OFFICE USE ONLY
Log No. 114207
Permit No. _____
Basin 142

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. 64025

1. OWNER Metallia Goldfield Inc./International Minerals ADDRESS AT WELL LOCATION North of the town of Goldfield Nevada
MAILING ADDRESS 2305 Rock Blvd. Suite # 30
Reno NV. 89502 Subdivision Name: _____ County: _____

2. LOCATION SW 1/4 NW 1/4 Sec 26 T 25 R 92 E Latitude 478691.6 UTM E 478691.6 NAD 27
PERMIT/WAIVER No. 1695 Longitude 4176942.7 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 Monitor
 Municipal/Industrial Stock
5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Alluvium		0'	15'	15'
Milltown Andesite		15'	40'	25'
Sandstone Rhyolite		40'	310'	270'
Kendall Tuff		310'	450'	140'
Well-A - DEEP Perf. - 450' up to 320' 130 Bags Silica Sand 10 Bags 3/8" Hole plug				
Well-B - Short Perf. - 234' up to 134' 125 Bags Silica Sand 8 Bags 3/8" Hole plug				
30 Bags Neat Cement - 107' up to Surface plus 2				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>450'</u>		<u>450'</u>	

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>10 7/8"</u>	<u>0'</u>	<u>20'</u>	
<u>9"</u>	<u>20'</u>	<u>450'</u>	

CASING SCHEDULE - 80

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2 3/8"</u>		<u>1/4"</u>	<u>450'</u>	<u>0 plus 3'</u>
<u>2 3/8"</u>		<u>1/4"</u>	<u>234'</u>	<u>0 plus 3'</u>

Perforations:
Type of perforation Horz. slot
Size of perforation 0.010
From A - 450' feet to 320' feet
From _____ feet to _____ feet
From B - 234' feet to 134' feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0' to 107' Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No _____ to _____ Pumped Poured
Type: Silica Sand
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: 3/8" Hydrated Hole plug.

Date started: 4-28, 20 11
Date completed: 4-30, 20 11

7. Water Level
Static water level: A-160'/B-151' feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 62° °F
Quality: Clear

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	Draw Down (Feet Below Static)	Time (Hours)
DCNR/DWR RECEIVED		<u>A - 3 Hours</u>
JUN 08 2011		<u>B - 2 Hours</u>
LAS VEGAS OFFICE		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Ward Weaver Contractor
Address Rimrock Drilling Inc.
2305 Last Chance Rd. ELKO, NV. 89801
Nevada contractor's license number _____
issued by the State Contractor's Board 0030630
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1676
Signed Ward Weaver
By driller performing actual drilling on-site or contractor
Date 4-30-11