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

OFFICE USE ONLY
Log No. 120808
Permit No.
Basin No. 212

PRINT OR TYPE IN BLACK INK 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. 37192
WELL NAME *(If applicable)*: EWxMCF-12

1. OWNER/CLIENT NAME Titanium Metals Corporation
MAILING ADDRESS P.O.Box 2128 Henderson NV. 89009-70

DETAILED ADDRESS AT WELL LOCATION Clark County
Subdivision Name: PT N2 SW4 SEC 07 22 63 *County:* Clark

2. PLS LOCATION NW ¼ SW ¼ 7 Sec 22s N/S 63e E
PERMIT/WAIVER NO. *Issued by Water Resources* 179-07-301-002 *Current Parcel No.*

Latitude UTM E 830483.48 ☐ NAD 27
Longitude UTM N 26719560.78 x NAD 83/WGS 84

3. WORKED PERFORMED
☐ New Well ☐ Deepen: Orig WL#
☐ Replacement: Original well log #
x Recondition: Original well log # 98871

4. PROPOSED USE
☐ Domestic ☐ Irrigation x Monitor
☐ Mining / Dewater ☐ Com / Ind ☐ Stock
☐ Test / Other ☐ Mun / QM ☐ Rec

5. WELL TYPE
☐ Auger ☐ Rotary ☐ RVC
☐ Air ☐ Mud ☐ Sonic
x Other Elevation Change Only

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
Elevation Change- from 1769.03				
too1771.03 .Two FT. Extenion added				
Facility #H-000537				

DCNR/DWR/SNBC
RECEIVED
JUN 16 2014

Date started: Feb. 27 , 20 14
Date completed: Feb. 28 , 20 14

7. WATER QUALITIES
Static water level: Feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: ° Fahrenheit
Water Quality:

8. WELL TEST DATA
Test Method: ☐ Bailer ☐ Pump ☐ Air Lift

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

9. INSTRUCTION
Depth Drilled: Feet Depth Cased: Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"	pvc	Sch 40		2.00 Above

ANNULAR MATERIALS
Sanitary Seal ☐ Yes ☐ No

☐ Neat Cement	to		☐ Pumped	☐ Poured
☐ Cement Grout	to		☐ Pumped	☐ Poured
☐ Concrete Grout	to		☐ Pumped	☐ Poured
☐ Bentonite Chips	to		☐ Pumped	☐ Poured
☐ Gravel Pack [> 0.2 in.]	to		☐ Pumped	☐ Poured
☐ Sand Pack [< 0.2 in.]	to		☐ Pumped	☐ Poured
☐ Other, explain:	to		☐ Pumped	☐ Poured

PERFORATIONS:
Type of perforation:
Size of perforation:

From	Feet	To	Feet
From	Feet	To	Feet
From	Feet	To	Feet
From	Feet	To	Feet
From	Feet	To	Feet

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Eagle Drilling Services LLC. *Contractor*
Address 7150 Placid ST. Las Vegas ; NV. 89119 *Contractor*
Nevada contractor's license number as issued by the *State Contractor's Board:* 51266
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller)* 2477-M
Signed: *By driller performing actual drilling on site or contractor*
Date: June-10-2014

(Rev. 12-13) **USE ADDITIONAL SHEETS IF NECESSARY** pg. of pg.

36.0478932
-114.9928069
NAD 27