

2-84

WELL DRILLERS REPORT

NOTICE OF INTENT NO. 1685

PRINT OR TYPE ONLY

Please complete this form in its entirety

1. OWNER TRAE GEOTHERMAL ENERGY CO. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. BOX 2360 CASPER, WY

2. LOCATION SE 1/4 SW 1/4 Sec. 7 T. 30 N. N/S R. 39 E. PERSHING County
 PERMIT NO. SHALLOW TEMPERATURE GRADIENT HOLE ABOVE 500 FEET FOR GEOTHERMAL EXPLORATIONS
Issued by Water Resources Parcel No. Subdivision Name

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>GVL'S SILT MINOR SAND</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>GVL'S MINOR SILT E SAND</u>		<u>10</u>	<u>20</u>	<u>10</u>
<u>GVL'S SILT MINOR SAND</u>		<u>20</u>	<u>30</u>	<u>10</u>
<u>SILT GVL'S MINOR SAND</u>		<u>30</u>	<u>40</u>	<u>10</u>
<u>CLAY MINOR SAND E GVL'S</u>		<u>40</u>	<u>100</u>	<u>60</u>
<u>CLAY GVL'S MINOR SAND</u>		<u>100</u>	<u>110</u>	<u>10</u>
<u>CLAY MINOR SAND E GVL'S</u>		<u>110</u>	<u>150</u>	<u>40</u>
<u>CLAY SAND GVL'S</u>		<u>150</u>	<u>190</u>	<u>40</u>
<u>CHERT FM.</u>		<u>190</u>	<u>390</u>	<u>200</u>
<u>ARBILLITE WITH INTERBEDDED CHERT.</u>		<u>390</u>	<u>500</u>	<u>110</u>

8. WELL CONSTRUCTION
 Diameter hole 6 inches Total depth 500 feet
 Casing record 1" DIAMETER PVC
 Weight per foot _____ Thickness _____

Diameter	From	To
<u>1</u> inches	<u>0</u> feet	<u>500</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type CEMENT
 Depth of seal 12-2 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL NO H2O ENCOUNTERED
 Static water level _____ feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ ° F. Quality _____

Date started 2-4, 1983
 Date completed 2-8, 1983

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WARNER F. STODDARD
Contractor
 Address P.O. BOX 1667 WINNEMUCA, NV 89445
Contractor
 Nevada contractor's license number _____
 Nevada contractor's drillers number _____
 Nevada driller's license number 01326
Actual Driller
 Signed W.F. Stoddard
Contractor
 Date 2-15-83

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours