

WELL DRILLERS REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. *5167*

PRINT OR TYPE ONLY

1. OWNER *Amax* ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS *1707 Cole Blvd.* _____
Golden, CO 80401 _____
 2. LOCATION *NW 1/4 NW 1/4 Sec. 22 T. 40 R. 35 E* _____ County *Humboldt*
 PERMIT NO. _____
 Issued by Water Resources _____ Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE *Observation*
 Domestic Irrigation Test
 Municipal Industrial Stock Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<i>Sand Overburden</i>		<i>0</i>	<i>7</i>	<i>7</i>
<i>Rock</i>		<i>7</i>	<i>20</i>	<i>13</i>
<i>Clay</i>		<i>20</i>	<i>70</i>	<i>50</i>
<i>Rock</i>		<i>70</i>	<i>115</i>	<i>45</i>
<i>Clay & Rock</i>		<i>115</i>	<i>155</i>	<i>40</i>
<i>Rock</i>		<i>155</i>	<i>250</i>	<i>95</i>

8. *6" - 0 to 750'* WELL CONSTRUCTION
 Diameter hole *6"* inches Total depth *250'* feet
 Casing record *2" PVC*
 Weight per foot _____ Thickness *Sch 40*

Diameter	From	To
<i>6"</i> inches	<i>± 2</i> feet	<i>3</i> feet
<i>2"</i> inches	<i>± 7</i> feet	<i>100</i> feet
<i>2"</i> inches	<i>110</i> feet	<i>190</i> feet
<i>2"</i> inches	<i>200</i> feet	<i>240</i> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type *about*
 Depth of seal *5 ft* feet
 Gravel packed: Yes No
 Gravel packed from *5* feet to *250* feet
 Perforations:
 Type perforation *Slotted*
 Size perforation *0.19"*
 From *100'* feet to *110'* feet
 From *190'* feet to *200'* feet
 From *240'* feet to *250'* feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Date started *8-17* 19*85*
 Date completed *8-19* 19*85*

7. WELL TEST DATA

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

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

9. WATER LEVEL
 Static water level *75* feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature *cold* F. Quality _____

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name *LANG EXPLORATORY DRILLING*
185 WEST 8000 SOUTH
 Address *SALT LAKE CITY, UTAH 84115*
 Contractor _____
 Nevada contractor's license number *0021976*
 Nevada contractor's driller's number *0021976*
 Nevada driller's license number *1366* Actual Driller
 Signed *[Signature]* Contractor
 Date *8-29-85*