

OFFICE USE ONLY
 Log No. 47044
 Permit No. _____
 Basin 13

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 28543

1. OWNER Battle Mtn Gold Co. ADDRESS AT WELL LOCATION 18 miles SW of Battle Mtn
 MAILING ADDRESS P.O. Box 1627 Battle Mtn NV 89820
 2. LOCATION SE 1/4 NW 1/4 Sec. 34 T. 31 N. 43 E. Lander County
 PERMIT NO. M 10-870 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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
<u>Siltstone</u>		<u>0</u>	<u>500</u>	<u>500</u>
		<u>500</u>	<u>365</u>	<u>gravel</u>
		<u>365</u>	<u>53</u>	<u>brackish slurry</u>
		<u>53</u>	<u>0</u>	<u>cement</u>

8. WELL CONSTRUCTION
 Depth Drilled 500 Feet Depth Cased 500 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
7 7/8 Inches 0 Feet 10 Feet
6 3/4 Inches 10 Feet 500 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2 3/8</u>		<u>Sch 80</u>	<u>+1.5</u>	<u>500</u>

Perforations:
 Type perforation Horiz.
 Size perforation .05
 From 410 feet to 490 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 53 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 365 feet to 500 feet

9. WATER LEVEL
 Static water level 440 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature N/A °F Quality N/A

Date started 2-18 1995
 Date completed 2-22 1995

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>N/A</u>	<u>2</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name EKlund Drilling Co. Contractor
 Address P.O. Box 2786 Eureka NV 89503 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0030823
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1769
 Signed Warren Hattley
 By driller performing actual drilling on site or contractor
 Date 2-23-95