

OFFICE USE ONLY
 Log No. 47353
 Permit No. _____
 Basin. BT 059
 NOTICE OF INTENT NO. 22189

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

1. OWNER Battle Mt Gold ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Box 1627 CON-3
Battle Mt NV 89820
 2. LOCATION NW 1/4 SE 1/4 Sec. 29 T. 32 S. R. 44 E. Lander County
 PERMIT NO. MO 651-C 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	Thickness
Quartzite		0	195	195
Argillite		195	272	77
Granite		272	312	40
Quartzite		312	390	78
Argillite		390	626	230
Quartzite		626	678	52

LOCATION UPDATE
 194 NOV -2 AT 50
 STATE ENGINEER BOARD

8. WELL CONSTRUCTION
 Depth Drilled 678 Feet Depth Cased 678 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 678 Feet
65 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)
<u>2"</u>		<u>PUC</u>	<u>0</u>	<u>678</u>

Perforations:
 Type perforation PUC
 Size perforation .50 slot
 From 618 feet to 668 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 54'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 54' feet to 678 feet

9. WATER LEVEL
 Static water level 501 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 57 °F Quality FAIR

Date started Oct 10 1994
 Date completed Oct 15 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>2</u>		<u>6 1/2</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name AAA Drill Inc Contractor
 Address Box 2487 Contractor
EIKa NV 89803
 Nevada contractor's license number issued by the State Contractor's Board 002064
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller _____
 Signed Lee R. O'Connell
 By driller performing actual drilling on site or contractor
 Date 10-17-94