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WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 47421
Permit No.
Basin 137B

NOTICE OF INTENT NO. 26618

1. OWNER Nevada Gold Fields Inc
MAILING ADDRESS 1801 Broadway Suite 1620 Denver Co. 80202
ADDRESS AT WELL LOCATION Kingston, NV (NO Adress)

2. LOCATION NE ¼ NW ¼ Sec. 5 T. 15 N/S R. 44 E. Lander County
PERMIT NO. 48404 (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
Waver on Prefor Ripping Pipe from Tom Gallagher Because Casing Installed (PVC.) was done by Non-Licened Driller.				
We mixed 2nd pumped 114 Bags Cement to Fill Casing Back to Surface.				

'94 NOV -7 P3:42
RECEIVED
STATE ENGINEERS OFFICE

Date started Oct 5, 1994
Date completed Oct 6, 1994

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
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)
6 5/8	Sch 40	3/8	+1	460

Perforations:
Type perforation
Size perforation
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☒ Pumped ☐ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From 0 feet to 460' feet

9. WATER LEVEL
Static water level 355' feet below land surface
Artesian flow ..... G.P.M. ..... P.S.I.
Water temperature ..... °F Quality

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Leach Drilling Inc (Contractor)
Address Po. Box 599 (Contractor)
Silver Springs NV
Nevada contractor's license number issued by the State Contractor's Board 0031841
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1740
Signed [signature] Sr. (By driller performing actual drilling on site or contractor)
Date Nov 4/94

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627