

OFFICE USE ONLY
 Log No. 49747
 Permit No. _____
 Basin 076

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. 15683

1. OWNER SANTA FE PACIFIC GOLD ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 861 W. 6th ST. WIND. NO. 89443
 2. LOCATION SW 1/4 SE 1/4 Sec. 5 T. 38 N. R. 43 E. HUMBOLDT County
 PERMIT NO. M/O 933 Parcel No. 7-131-03 Subdivision Name _____
Issued by Water Resources

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
ALLUVIUM				
CLAY SAND GRAVEL		0	140	140
SAND PACKED		140	12	128
BENTONITE PELLETS		12	10	2
NEAT CEMENT		10	0	10

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 140
6.5 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>2.5</u>	<u>SCH 80</u>	<u>P.V.C. BLANK</u>	<u>0</u>	<u>40</u>

Perforations:
 Type perforation 2.5" SCH 80 P.V.C. SCREEN
 Size perforation .020
 From 40 feet to 140 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 10' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 12 feet to 140 feet

9. WATER LEVEL
 Static water level 68 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 6-19, 1995
 Date completed 6-20, 1995

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>80</u>	<u>3</u>		<u>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 EKLUND DRILLING Contractor
 Address P.O. BOX 2786 ELKO NV. 89803 Contractor
 Nevada contractor's license number 0030823
 issued by the State Contractor's Board 0019374
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1784
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 6-21-95