

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 50177
Permit No. 266
Basin

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 26551

1. OWNER TWIN CREEKS MINE
MAILING ADDRESS P. O. BOX 69
GOLCONDA, NV 89414
ADDRESS AT WELL LOCATION TWIN CREEKS MINE

2. LOCATION SW 1/4 NW 1/4 Sec. 19 T 39N N/S R 43 E HUMBOLDT County
PERMIT NO. M/0-793-B
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 |
|---|--------------|------|-----|------------|
| 1) ALLUVIUM- GRAVELS, CLAYS, BOULDERS | | 0 | 130 | 130 |
| 2) BROWN SILTSTONE WITH INTERBEDDED CHERT | | 130 | 525 | 395 |
| 3) GRAY BASALT | | 525 | 560 | 35 |
| 4) DK GRAY SHALE | | 560 | 845 | 285 |

8. WELL CONSTRUCTION
Depth Drilled 845 Feet Depth Cascd 845 Feet
HOLE DIAMETER (BIT SIZE)
From To
12.5/8 Inches 0 Feet 10 Feet
6.5 Inches 10 Feet 845 Feet
Inches Feet Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 8 5/8 | 32 | 0.30 | +3 | 10 |
| 2.5 | SCH 80 | PVC | +2 | 545 |

Perforations:
Type perforation 2.5 SCH 80 PVC SCREEN
Size perforation 0.020 SLOT
From 545 feet to 845 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: Yes No Seal Type:
Depth of Seal 50' CEMENT; 50-545 Neat Cement
Placement Method: Pumped BENTONITE Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From 545 feet to 845 feet

9. WATER LEVEL
Static water level 490.1 feet below land surface
Artesian flow N/A G.P.M. N/A P.S.I.
Water temperature COOL °F Quality CLEAR

Date started 12/8, 19.95
Date completed 12/11, 19.95

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) | |
| EST 5 | N/A | 12 | |

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name B & B DRILLING CO., INC.
Contractor
Address P. O. BOX 2666
Contractor
GRAND JUNCTION, CO 81502
Nevada contractor's license number issued by the State Contractor's Board: 0030738
Nevada driller's license number issued by the Division of Water Resources, the onsite driller: 1886
Signed [Signature] 1711
By driller performing actual drilling on site or contractor
Date 12/27/95

RECEIVED
95 DEC 29 AM 11:30
STATE ENGINEERING OFFICE