

OFFICE USE ONLY
 Log No. 50523
 Permit No. _____
 Basin 109

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. _____

1. OWNER JBR (CONSULTANTS) Echo Bay ADDRESS AT WELL LOCATION BORRANS MINE
 MAILING ADDRESS _____

2. LOCATION 6N 1/4 29E 1/4 Sec. 34 T. 33N R. _____ E. _____ County _____

PERMIT NO. _____ 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
M4 MONITOR WELL				
LOWERED RIG				
TO M4 MONITOR WELL				
SET RIG UP OVER				
M4 MONITOR WELL				
LOWERED ROPE				
WITH WEIGHT TO				
341 FT HOLE				
DRY. REMOVED				
ROPE AND LOWERED				
1" STEEL PIPE TO				
320 FT PUMPED				
2 BAGS OF CEMENT				
NEAT CEMENT.				
THEN FILLED				
HOLE TO SURFACE				
WITH CEMENT.				

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)

Perforations:
 Type perforation _____
 Size perforation _____
 From SURFACE feet to 341 feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level 190 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 JOHN ROBINSON DRILLING LTD Contractor
 Address Box 2328 Contractor
HAUTHORNE NEVADA 89415
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1332
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date _____

Date started 28 MAY, 1995
 Date completed 29 MAY, 1995

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 type="checkbox"/> Air Lift			