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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. 15-159

1. OWNER POTS (USA) INC ADDRESS AT WELL LOCATION Cortez Gold mines (NEAR pipeline)
1520 WAVE NU 89821 P.T.
 2. LOCATION SE 1/4 SW 1/4 Sec. 7 T 27 N/S R. 47 E LANDER County
 PERMIT NO. M10-1003 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 |
|-------------------|--------------|------------|------------|------------|
| <u>Alluvium</u> | | <u>0</u> | <u>130</u> | <u>130</u> |
| <u>SAND PACK</u> | | <u>130</u> | <u>75</u> | <u>55</u> |
| <u>Chips</u> | | <u>75</u> | <u>53</u> | <u>22</u> |
| <u>Cement L</u> | | <u>53</u> | <u>0</u> | <u>53</u> |
| <u>Hole #17-2</u> | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 130 Feet Depth Cased 122 Feet
 HOLE DIAMETER (BIT SIZE)
8 1/2 Inches 130 Feet 130 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|---------------|------------|
| <u>4 1/2</u> | <u>N/A</u> | <u>5th 40</u> | <u>12 1/2</u> | <u>122</u> |

Perforations:
 Type perforation Horiz
 Size perforation .020
 From SCREEN 130 feet to 82 feet
 From BLANK 82 feet to 12.5 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes, No Seal Type:
 Depth of Seal 53 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 130 feet to 75 feet

9. WATER LEVEL
 Static water level 92 feet below land surface
 Artesian flow N/A G.P.M. _____ P.S.I. _____
 Water temperature 63 °F Quality clean

Date started 5/7, 1996
 Date completed 5/8, 1996

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>130</u> | <u>2</u> | <u>NA</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 Co Contractor
 Address P.O. Box 2786 Contractor
Elko, NU 89803
 Nevada contractor's license number 0030823 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1942
 Signed William Riley
 By driller performing actual drilling on site or contractor
 Date 5/8/96