

OFFICE USE ONLY  
Log No. 59279  
Permit No. \_\_\_\_\_  
Basin 207  
**25713**

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 BHP Copper ADDRESS AT WELL LOCATION P26-7 @ Tailings pond  
MAILING ADDRESS Box 382 Ruth, NV 89319

2. LOCATION NW 1/4 SW 1/4 Sec 20 T. 16 N/S R. 62 E White Pine County  
PERMIT NO. M10 914-C 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
Light brn sand		0	40	40
Lt. brn sand + gravel		40	70	30
Gray-white clay		70	80	10
DK. Brn. sand		80	170	90
DK. Brn. silty clay		170	190	20
Gray-coarse sand		190	260	70
Gray-white clay		260	270	10
Coarse sand		270	350	80
Lt. brn. clay		350	370	20
Coarse gray sands		370	420	50
Gray-white Limestone		420	460	40
NO circ. - NO sample		460	505	45

RECEIVED  
95 DEC 16 PM 2:05  
STATE ENGINEERS DEPT

8. WELL CONSTRUCTION  
Depth Drilled 505 Feet Depth Cased 485 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
14	0	20
7	20	505

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	24	.1277	0	20
2	2.47	.083	0	435
2	2.47	.083	475	485

Perforations:  
Type perforation Johnson Wire Wrap  
Size perforation 3/32

From 435 feet to 475 feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
Depth of Seal 292  Neat Cement  
Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
From 298 feet to 505 feet

9. WATER LEVEL  
Static water level 400 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 9-10 1996  
Date completed 9-14 1996

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Sheridan McCard Contractor  
Address HC-30 Box 102 Contractor  
Elko, NV 89801

Nevada contractor's license number issued by the State Contractor's Board 006661  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1631

Signed Sheridan McCard  
By driller performing actual drilling on site or contractor  
Date 10-13-96