

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

office use only
Log No. 63434

Permit No. _____

Basin 088

NOTICE OF INTENT NO **W-10** 32422

1. OWNER **Asamera Minerals**
MAILING ADDRESS **1000 Bible Way Ste. 16**
Reno, Nevada

ADDRESS AT WELL LOCATION

2. Location **SW 1/4 NW 1/4 Sec 11 T 19N R 22E**

PERMIT NO. _____ PARCEL NO. **04-150-05**

SUBDIVISION NAME

Storey County

3. WORK PERFORMED			4. PROPOSED USE			5. WELL TYPE		
<input checked="" type="checkbox"/> New Well	Replace	Recondition	<input checked="" type="checkbox"/> Domestic	Irrigation	Test	Cable	<input checked="" type="checkbox"/> Rotary	RVC
Deepen	<input checked="" type="checkbox"/> Abandon	Other	Municipal/Industrial	Monitor	Stock	<input checked="" type="checkbox"/> Air	Other	Mud

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thickness
Red & green volcanic cobbles & boulders/multi colored volcanic sands & gravels.		0	7	7
Red & green volcanic rock/reddish brown clay.		7	16	9
Reddish brown clay/red & green volcanic gravels.		16	432	416
Sticky brown clay/coarse green, brown, red, yellow volcanic sands & gravels.		432	600	168
Filled with native material from 600 to 145. Cement from 145 to surface.				0

8. WELL CONSTRUCTION				
Depth Drilled	600 feet	Depth Cased	feet	
HOLE DIAMETER (BIT SIZE)				
	From	To		
12 3/4 inches	0 feet	100 feet	100 feet	
10 5/8 inches	100 feet	600 feet	600 feet	
CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
Perforations::				
Type Perforation				
Size perforation				
From	feet to		feet	
From	feet to		feet	
From	feet to		feet	
From	feet to		feet	
From	feet to		feet	
Surface Seal <input checked="" type="checkbox"/> YES		No	Seal Type:	
Depth of Seal 145 feet			Neat Cement	
		Pumped	<input checked="" type="checkbox"/> Cement Grout	
		<input checked="" type="checkbox"/> Poured	Concrete Grout	
Gravel Packed: Yes <input checked="" type="checkbox"/> No				
From	feet to	feet		

9. WATER LEVEL
Static water level **DRY** feet below land surface
Artesian flow **0** GPM **0** P.S.I.
Water Temperature _____ Degrees F Quality _____

Date started **4-15 -96**
Date completed **4-16 -96**

7. WELL TEST DATA			
TEST METHOD:	Bailer	Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)		Time (hours)
	DRY		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **McKay Drilling, Inc.**
2290 Pioneer Drive
Reno, NV 89509
NV Contractors No. **14170**
NV Driller's Lic (on site) **1511**
Signed *Steve McKay*
By driller performing actual drilling on site or contractor
Date **4-18-96**