

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. 28282

1. OWNER KINROSS ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 661 Anderson St.
WINNEMUKCA NV. 89445
 2. LOCATION SENE 1/4 NW 1/4 Sec. 23 T. 30 N S R. 38 E Perishing County
 PERMIT NO. M01105 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
GRAVEL		0	10	10
QUARTZITE		10	800	790
Fracture w/ water	450			
Fracture w/ water	560			
Fracture w/ water	700			
Fracture w/ water	740			
SANITARY SEAL Cement 7 SACKS		0	50	50
GROUT Aqua Guard 30 SACKS Enviro Plug 3/4 53 SACKS		50	660	610
SILICA SAND 40 SACKS		660	800	140

8. WELL CONSTRUCTION
 Depth Drilled 800 Feet Depth Cased 800 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches 0 Feet 600 Feet
5 3/8 Inches 600 Feet 800 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1 1/4</u>		<u>.125</u>	<u>+20</u>	<u>800</u>
<u>6 3/8</u>		<u>.250</u>	<u>+2</u>	<u>20</u>

Perforations:
 Type perforation slotted
 Size perforation .020 inches
 From _____ feet to _____ feet
 From 700 feet to 800 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 SAND
 Gravel Packed: Yes No
 From 660 feet to 800 feet

Date started 1-15, 1997
 Date completed 1-25, 1997

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>560</u>	<u>15</u>		
<u>620</u>	<u>15</u>		
<u>700</u>	<u>25</u>		
<u>740</u>	<u>60</u>		
<u>800</u>	<u>60</u>		

9. WATER LEVEL
 Static water level 459 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality Good

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., INC. Contractor
 Address P. O. Box 2748 Contractor
Elko, NV 89803
 Nevada contractor's license number 0030823
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 1960
 Division of Water Resources, the on-site driller.
 Signed Jim Hunt
 By driller performing actual drilling on site or contractor
 Date JANUARY 25, 1997