

OFFICE USE ONLY
 Log No. 64623
 Permit No. _____
 Basin 131

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. 20893

1. OWNER Battle Mtn Gold Co. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 1627 Mail # CP-13 - Phoenix Mine
Battle Mtn NV 89820 N40.5294439697 W117.111663819 - NAD83
 2. LOCATION SE 1/4 SE 1/4 Sec 22 T. 31 N. S. R. 43 E. Lander County
 PERMIT NO. M10-967-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	Thick-ness
<u>Waste dump</u>		<u>0</u>	<u>45</u>	<u>45</u>
<u>Cambrian harmony</u>		<u>45</u>	<u>205</u>	<u>160</u>
<u>Cambrian Scott canyon formation</u>		<u>205</u>	<u>1300</u>	<u>1195</u>
<u>Plugged under NDE 61066</u>				

8. WELL CONSTRUCTION
 Depth Drilled 1510 Feet Depth Cased 1500 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>11</u>	<u>0</u>	<u>45</u>	<u>45</u>
<u>6 1/2</u>	<u>45</u>	<u>680</u>	<u>680</u>
<u>5 3/4</u>	<u>680</u>	<u>840</u>	<u>840</u>
<u>5 1/4</u>	<u>840</u>	<u>1500</u>	<u>1500</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>Sch 80</u>	<u>0</u>	<u>1500</u>

Perforations:
 Type perforation Horiz.
 Size perforation .020
 From 1400 feet to 1500 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 95 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 1385 feet to 1510 feet

Date started 2-17 1996
 Date completed 3-9 1996

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>1</u>		

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

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 Elko NV 89803 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0030823
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1769
 Signed Warren Hartley
 By driller performing actual drilling on site of contractor
 Date 3-11-96