

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

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
 Log No. 64716
 Permit No. _____
 Basin 066

NOTICE OF INTENT NO. 35587
Adams Peak Properties

1. OWNER Santa Fe Pacific Mine Co. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 69
Golconda NV 89414
 2. LOCATION NE 1/4 NW 1/4 Sec 2 T 37 N S R 42 E Humboldt County
 PERMIT NO. M101123 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Alluvium</u>		<u>0</u>	<u>55'</u>	<u>55'</u>
<u>Neat Cement</u>		<u>0</u>	<u>10'</u>	<u>10'</u>
<u>1/4" Hole Plug</u>		<u>10'</u>	<u>20'</u>	<u>10'</u>
<u>Sand Pack</u>		<u>20'</u>	<u>50'</u>	<u>30'</u>

8. WELL CONSTRUCTION
 Depth Drilled 55' Feet Depth Cased 50' Feet
 HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>14"</u>	<u>0</u>	<u>6'</u>	<u>0</u>	<u>6'</u>
<u>8 3/4"</u>	<u>6'</u>	<u>10'</u>	<u>6'</u>	<u>10'</u>
<u>7 3/8"</u>	<u>10'</u>	<u>55'</u>	<u>10'</u>	<u>55'</u>

 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10 3/8"</u>		<u>1/2" wall</u>	<u>+2</u>	<u>6'</u>
<u>4 1/2"</u>	<u>SCH 80</u>	<u>PVC</u>	<u>+2</u>	<u>50'</u>

 Perforations:
 Type perforation Horz. Slots
 Size perforation 1/20 Slots
 From 30' feet to 50' feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 10' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 20' feet to 50' feet

Date started 1-25- 1997
 Date completed 1-26- 1997

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>140</u>	<u>1</u>		<u>3 hrs</u>

9. WATER LEVEL
 Static water level 42' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality Clean

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.
 Address P.O. Box 2748
Elko NV 89803
 Nevada contractor's license number #0030823
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 1786
 Division of Water Resources, the on-site driller.
 Signed Craig Dine
 By driller performing actual drilling on site or contractor
 Date 1-26-97