

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. 36865

1. OWNER Cortez Gold mines ADDRESS AT WELL LOCATION Frame Property
 MAILING ADDRESS Hc66-50 Star Route
Beowawe, NV 89821
 2. LOCATION NE 1/4 SW 1/4 Sec. 13 T. 28 N. R. 47 E. LANDER County
 PERMIT NO. M10-1003 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>Alluvium</u>		<u>0</u>	<u>90</u>	<u>90</u>
<u>SAND PACK</u>		<u>90</u>	<u>45</u>	<u>45</u>
<u>Chips Bentonite</u>		<u>45</u>	<u>20</u>	<u>25</u>
<u>Cement</u>		<u>20</u>	<u>0</u>	<u>20</u>

PREVIOUS LOGS
 24 NOV 11 AM 11:42
 27 NOV 11 AM 11:42
 28 NOV 11 AM 11:42

8. WELL CONSTRUCTION
 Depth Drilled 90 Feet Depth Cased 88 Feet
 HOLE DIAMETER (BIT SIZE)
 From 7 7/8 Inches To 90 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>	<u>N/A</u>	<u>SCM-40</u>	<u>42</u>	<u>88</u>

Perforations:
 Type perforation Horz Slot
 Size perforation .020
 From SCREEN 88 feet to 48 feet
 From PLANK 48 feet to 42 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 20 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 90 feet to 45 feet

Date started 7/24, 1997
 Date completed 7/24, 1997

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

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		<u>N/A</u>	

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 Contractor
 Address P.O. Box 2748 Contractor
EIKO, NV 89803
 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 1942
 Signed William Riley
 By driller performing actual drilling on site or contractor
 Date 7/25/97