

Log No. 68251

Permit No. _____

Basin 066

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. 35682

1. OWNER SANTA FE
MAILING ADDRESS P.O. Box 69
Colconda, Nevada 89414

ADDRESS AT WELL LOCATION Twin Creeks mine
Approx 30 miles north of Colconda, NV

2. LOCATION N¹/₂ 1/4 NW 1/4 Sec. 5 T. 38 N. R. 43 E Humboldt County

PERMIT NO. M/D-1134A Issued by Water Resources 7-131-25 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>Gravel and Clay</u>		<u>0</u>	<u>760</u>	<u>760</u>
<u>SAND</u>		<u>760</u>	<u>240</u>	
<u>Bentonite Product</u>		<u>240</u>	<u>50</u>	
<u>Neat Cement</u>		<u>50</u>	<u>0</u>	

8. WELL CONSTRUCTION

Depth Drilled 760 Feet Depth Cased 760 Feet

HOLE DIAMETER (BIT SIZE)

From To
6 1/2 Inches 760 Feet 20 Feet
8 1/2 Inches 20 Feet 0 Feet
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2 1/2</u>		<u>sch 80</u>	<u>-760</u>	<u>+1</u>

Perforations:

Type perforation slot
Size perforation 0.70
From 760 feet to 240 feet
From _____ feet to _____ feet

Surface Seal: Yes No

Depth of Seal 50

Placement Method: Pumped Poured

Seal Type:

Neat Cement
 Cement Grout
 Concrete Grout

Gravel Packed: Yes No

From 760 feet to 240 feet

9. WATER LEVEL

Static water level 15 feet below land surface

Artesian flow _____ G.P.M. _____ P.S.I.

Water temperature Cold °F Quality Clear

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

Address P.O. Box 2748

EIKO, NV. Contractor

Nevada contractor's license number issued by the State Contractor's Board 0019378

Nevada driller's license number issued by the Division of Water Resources, on-site driller 1698T-1

Signed Jan Skovrd
By driller performing actual drilling on site or contractor

Date 5-16-97

Date started 5-14-97 1997
Date completed 5-16-97 1997

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>TD 760</u>	<u>150</u>		