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**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. **36505**

1. OWNER **BHP COPPER** ADDRESS AT WELL LOCATION **BHP COPPER**  
MAILING ADDRESS **P.O. BOX 382** MINE SITE  
**RUTH, NV 89319**

2. LOCATION **NW 1/4 NW 1/4 Sec. 13 T 16 N SR 62 E WHITE PINE COUNTY** County  
PERMIT NO. **1101-A** Parcel No. **N/A** Subdivision Name **N/A**

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	Thickness
BROWN ROCK		0	85	85
LIMESTONE		85	175	90
SKARN		175	200	25
LIMESTONE		200	260	60
SKARN		260	300	40
HOLE PLUG FROM 12' TO 250'				

39.255083° N  
114.948646° W  
NA027 (1A)

plugged by  
NOI # 64531

8. WELL CONSTRUCTION  
Depth Drilled **305** Feet Depth Cased **300** Feet

HOLE DIAMETER (BIT SIZE)  
From To  
**12 1/4** Inches **0** Feet **39** Feet  
**6 1/2** Inches **39** Feet **305** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375	3.65	SCH. 40	0	260
7.675	38.05	.500	0	39

Perforations:  
Type perforation **WIRE WRAPPED**  
Size perforation **.020**  
From **260** feet to **300** feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
Depth of Seal **12'**  Neat Cement  
Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
From **250** feet to **305** feet

9. WATER LEVEL  
Static water level: **191.4** feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature **COOL** °F Quality **FAIR**

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.

Date started **JULY 23**, 19 **97**  
Date completed **JULY 24**, 19 **97**

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	<b>5</b>		<b>1 1/2</b>

Name **LANG EXPLORATORY DRILLING** Contractor  
Address **P.O. BOX 5279** Contractor  
**ELKO, NV 89803**

Nevada contractor's license number issued by the State Contractor's Board: **0021976**  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: **1716**

Signed **DAVID HAAS** *David Haas*  
By driller performing actual drilling on site or contractor  
Date **JULY 25, 1997**

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