

Log No. 69372
 Permit No. 714
 Basin. 714

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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 28072

1. OWNER SCANNA ORE ADDRESS AT WELL LOCATION 9455 Betty Lane
 MAILING ADDRESS 9455 Betty Lane Winnemucca
 2. LOCATION NK 1/4 SK 1/4 Sec. 24 T 35 @ S R 38 E Humboldt County
 PERMIT NO. 10-532-15 Parcel No. Z135 Subdivision Name

3. WORK PERFORMED New Well Replace Recondition Deepen Abandon Other
 4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock
 5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-------------------|--------------|------|-----|------------|
| SAND/ROCK | | 0 | 30 | 30 |
| rock | | 30 | 60 | 30 |
| rock 60% | } | 60 | 100 | 40 |
| SAND 40% | | | | |
| clay/3/4" rock | | 100 | 115 | 15 |
| clay/small gravel | | 115 | 140 | 25 |
| gravel/sand | XX | 140 | 170 | 30 |
| gravel/sand | XX | 170 | 210 | 40 |
| gravel | XX | 210 | 220 | 10 |

8. WELL CONSTRUCTION
 Depth Drilled 220 Feet Depth Cased 220 Feet
 HOLE DIAMETER (BIT SIZE)
10 7/8 Inches From 0 Feet To 220 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| <u>10 7/8</u> | <u>12</u> | <u>1.80</u> | <u>0</u> | <u>220</u> |

Perforations:
 Type perforation Factory Cuts
 Size perforation 3/32
 From 190 feet to 220 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 54
 Placement Method: Pumped Poured
 Gravel Packed: Yes No From 54 feet to 220 feet

9. WATER LEVEL
 Static water level 139 feet below land surface
 Artesian flow NO G.P.M. N/A P.S.I.
 Water temperature COOL °F Quality GOOD

Date started 9-11, 1995
 Date completed 9-19, 1995

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>30</u> | <u>N/A</u> | <u>3hr</u> |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name FRED ANDERSON Contractor
 Address 10760 GRASS VLY Contractor
WINNEMUCCA, NV
 Nevada contractor's license number issued by the State Contractor's Board 0021467
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1375
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 10-20-95