

017-01

WHITE-DIVISION OF WATER RESOURCES  
CANARY-CLIENT'S COPY  
PINK-WELL DRILLER'S COPY

STATE OF NEVADA  
DIVISION OF WATER RESOURCES

OFFICE USE ONLY  
Log No. 72783  
Permit No. 31  
Basin. 31

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. 1152

1. OWNER AMAX ADDRESS AT WELL LOCATION Super mine  
MAILING ADDRESS 600 Sad House Rd  
WINNEMUCA NV 89405  
2. LOCATION SW 1/4 NW 1/4 Sec 9 T. 40 N/S R. 34 E Humboldt County  
PERMIT NO. MO 202 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
OH 51 TO 646 ST WATER 40' FILL FROM BOTTOM TO 10' W/ BENT GRAVEL - 10' TO SURF. Cement				
OH 51 TO 160' ST WATER 40' FILL TO 10' BENT GRAVEL - Cement TO SURFACE				
OH 51 TO 50' ST WATER 40' FILL W/ Cement to surface				
<del>OH 51 TO</del>				
RECEIVED 98 JUN 10 AM 10:00 STATE ENGINEERING OFFICE				
P+A				
Deep well OH-51 plugging of log #32787				
Med well OH-51 plugging of log 32788				
Shallow well OH-51 plugging of log 32799				

8. WELL CONSTRUCTION  
Depth Drilled.....Feet Depth Cased.....Feet  
HOLE DIAMETER (BIT SIZE)  
From To  
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)

Perforations:  
Type perforation.....  
Size perforation.....  
From.....feet to.....feet  
From.....feet to.....feet  
From.....feet to.....feet  
From.....feet to.....feet  
From.....feet to.....feet  
Surface Seal:  Yes  No Seal Type:  
Depth of Seal.....  Neat Cement  
Placement Method:  Pumped  Concrete Grout  
 Poured  
Gravel Packed:  Yes  No  
From.....feet to.....feet

Date started 3-15- 1998  
Date completed 3-25- 1998

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 type="checkbox"/> Air Lift			

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

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name AAA DRLE Contractor  
Address Box 2487 Contractor  
ELKO NV 89803  
Nevada contractor's license number issued by the State Contractor's Board 20684  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1799  
Signed Owen Penne  
By driller performing actual drilling on site or contractor  
Date 4-30-98