

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. 72784  
Permit No. 31  
Basin.....

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 Spring mine  
 MAILING ADDRESS 600 Sad House Rd  
WINNEMUCA NV 89445  
 2. LOCATION SW 1/4 NW 1/4 Sec 9 T 40 N/S R 34 E Humboldt County  
 PERMIT NO. 10202 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>OH 51 TO 646 ST WATER</u>				<u>40'</u>
<u>FILL FROM BOTTOM TO 10' W/</u>				
<u>BENT GRAVEL - 10' TO SURF. Cement</u>				
<u>OH 51 TO 160' ST WATER</u>				<u>40' FILL TO 16'</u>
<u>BENT GRAVEL - Cement TO SURFACE</u>				
<u>OH 51 TO 50' ST WATER</u>				<u>40' FILL W</u>
<u>Cement to surface</u>				
<u>OH 51 TO</u>				

RECEIVED  
 JUN 10 AM 10:00  
 STATE ENGINEERING OFFICE

P+A

Deep well OH-51 plugging of log #32777  
 Med well OH-51 plugging of log 32778  
 Shallow well OH-51 plugging of log 32779

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

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  
ELKO NV 89803 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board: 20689  
 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

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			