

OFFICE USE ONLY
Log No. 78993
Permit No. 55905
Basin 59

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. 43606

1. OWNER ECHO BAY MINERALS ADDRESS AT WELL LOCATION MCCOY/COVE MINESITE
MAILING ADDRESS P.O. BOX 1658 ABOUT 25 MILES SOUTH OF BATTLE MTN., NV.
BATTLE MTN., NV. 89820

2. LOCATION SW 1/4 SE 1/4 Sec. 36 T 29 N 42 E LANDER County
PERMIT NO. 55905 Parcel No. N/A Subdivision Name N/A
Issued by Water Resources

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
GREY & BLACK ROCK		0	150	150
GREY ROCK/CLAY		150	345	195
BLACK ROCK/CLAY		345	375	30
BLACK/GREY ROCK		375	400	25
BLACK ROCK		400	415	15
BLACK ROCK/CLAY		415	480	65
BLACK ROCK/CLAY		480	525	45
BLACK & GREY		525		
ROCK/CLAY			600	75
GREY ROCK/CLAY		600	620	20
BLACK GREY		620		
ROCK/CLAY			700	80
BLACK ROCK/CLAY		700	930	230
BLACK ROCK		930	940	10
BLACK ROCK/CLAY		940	1010	70

8. WELL CONSTRUCTION
Depth Drilled 1010 Feet Depth Cased 1000 Feet

HOLE DIAMETER (BIT SIZE)

From	To
3.1 Inches	0 Feet 3.0 Feet
1.9 Inches	30 Feet 1010 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
22	86.61	0.375	0	30
14	54.57	0.375	+3	540
14	45.61	0.312	540	1000

Perforations:
Type perforation LOUVERED
Size perforation 0.125
From 540 feet to 1000 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal 50' Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
From 450 feet to 1010 feet

9. WATER LEVEL
Static water level 462.9 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature 89 °F Quality GOOD

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

Name LANG EXPLORATORY DRILLING Contractor
Address P.O. BOX 5279 Contractor
ELKO, NV 89802

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 2108
Signed Chris O'Brien
By driller performing actual drilling on site or contractor
Date DECEMBER 18, 1999

Date started DECEMBER 9, 1999
Date completed DECEMBER 18, 1999

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
211	11	1