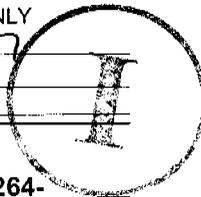


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 82717
 Permit No. _____
 Basin 72



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **43264-**

1. OWNER Florida Canyon Mining MW-101
 MAILING ADDRESS P.O. Box 330
Imlay, NV 89418

ADDRESS AT WELL LOCATION Florida Canyon minesite,
seven miles southwest of Imlay, NV.

2. LOCATION SW 1/4 NW 1/4 Sec. 11 T 31N N/S R 33E E Pershing County

PERMIT NO. N/A Issued by Water Resources 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	Thick-ness
Coarse alluvium		0	289	289
Clay		289	290	1
Construction Detail:				
Cement		0	50	50
Hole plug		50	195	145
Gravel pack		195	290	95

8. WELL CONSTRUCTION
 Depth Drilled 290 Feet Depth Cased 280 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>12.250</u> Inches	<u>0</u> Feet	<u>20</u> Feet
<u>6.125</u> Inches	<u>20</u> Feet	<u>280</u> Feet
_____ Inches	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>7.625</u>	<u>26.40</u>	<u>0.328</u>	<u>+2</u>	<u>21</u>
<u>2.375</u>	<u>0.958</u>	<u>0.218</u>	<u>+1</u>	<u>200</u>

Perforations:
 Type perforation Slot
 Size perforation 0.020"

From	To
<u>200</u> feet	<u>280</u> feet
_____ feet	_____ feet
_____ feet	_____ feet
_____ feet	_____ feet
_____ feet	_____ feet

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

Gravel Packed: Yes No
 From 195 feet to 290 feet

9. WATER LEVEL
 Static water level 211 feet below land surface
 Artesian flow N/A G.P.M. N/A P.S.I.
 Water temperature Cool °F Quality Good

Date started 12/1/2000, 19____
 Date completed 12/3/2000, 19____

7. WELL TEST DATA

TEST METHOD:	Bailer		Pump		Air Lift	
	G.P.M.	Draw Down (Feet Below Static)	G.P.M.	Draw Down (Feet Below Static)	G.P.M.	Time (Hours)
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

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 89802-5279
 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 1888

Signed David Doriot
 By driller performing actual drilling on-site or contractor
 Date 12/11/00

BST.L