

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. 42049

1. OWNER Coeur Rochester  
 MAILING ADDRESS Bx 1057 Lovelock NV 89419  
 ADDRESS AT WELL LOCATION mine site

2. LOCATION NW 1/4 NW 1/4 Sec 22 T 28 R 34 E Pershing County  
 PERMIT NO. M/O 1219 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	Thickness
<u>Weaver CLASTIC</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>BROWN</u>				
<u>Weaver TUFF</u>		<u>10</u>	<u>100</u>	<u>90</u>
<u>LT BROWN</u>				
<u>Rochester TUFF</u>		<u>100</u>	<u>600</u>	<u>500</u>
<u>TAN BROWN</u>				
<u>Rochester TUFF</u>		<u>600</u>	<u>770</u>	<u>170</u>
<u>GRAY TAN</u>				

8. WELL CONSTRUCTION  
 Depth Drilled 770 Feet Depth Cased 770 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 6" Inches To 25 Feet  
5 1/2 Inches 25 Feet 770 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2 3/8</u>		<u>sch 80</u>	<u>0</u>	<u>670</u>

Perforations:  
 Type perforation SLOT  
 Size perforation .020  
 From 670 feet to 770 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal 25'  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From 770 feet to 665 feet

9. WATER LEVEL  
 Static water level 667 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 5-18  
 Date completed 5-20

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	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 EKLUND DRILLING Contractor  
 Address Bx 2748 ELKO NV 89803 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 0019378  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1788  
 Signed John Well  
 By driller performing actual drilling on site or contractor  
 Date 6-20-01