

Log No. 89558

Permit No. _____

Basin 129

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.300

NOTICE OF INTENT NO. -48577-

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Coeur Rochester WI-12
 MAILING ADDRESS P.O. Box 1057
Lovelock, NV 89419

ADDRESS AT WELL LOCATION Coeur Rochester
minesite, northeast of Lovelock, NV.

2. LOCATION SW 1/4 NE 1/4 Sec. 15 T 28N N/S R 34E E Pershing County
 PERMIT NO. NEV 50037 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 Unknown

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Client had no report for this well. DWR database shows one 4" monitor well at SE 1/4, Sec. 15, T28N, R34E, but it was cased to 195'. Therefore we have no original construction information.				
Tagged the botom of the well at 82'.				
Abandoned by pumping full of neat cement from T.D. to surface.				
Used 12 cu.ft. cement.				

Date started 1/28/2003, 19____
 Date completed 1/28/2003, 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)	Time (Hours)	Time (Hours)

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased 82 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>2.86</u>	<u>0.337</u>	<u>0</u>	<u>82</u>

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

9. WATER LEVEL

Static water level Dry _____ 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 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 1716
 Signed David Hines
 By driller performing actual drilling on-site or contractor
 Date 2/6/03

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 03 FEB 10 AM 11:23
 STATE ENGINEERS OFFICE

B.S.T.L