WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 90686
Permit No.
Basin 064

NOTICE OF INTENT NO. 48723

1. OWNER Glamis Marigold Mining Company
MAILING ADDRESS P.O. Box 160 Valmy, Nevada 89438
ADDRESS AT WELL LOCATION Marigold Mine 2 miles South of Valmy, Nevada

2. LOCATION NE ¼ NW ¼ Sec. 9 T. 33N N/S R. 43 E. Humboldt County

PERMIT NO. (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
DZ1 - 10-94lbs portland Cement	91'S.	93'	0'	93'
DZ2 - 7-94lbs portland Cement	70.3'S.	77'	0'	77'
DZ3 - 8 Bags 94lbs portland Cement	79'S.	79'	0'	79'
DZ4 - 3-Bags 94lbs portland Cement	70'S.	70'	0'	70'

Date started 6/3, 19 03
Date completed 6/4, 19 03

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)
Inches ____ From ____ Feet To ____ Feet
Inches ____ From ____ Feet To ____ Feet
Inches ____ From ____ Feet To ____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2				

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

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

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level SEE Water Strata 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 Eklund Drilling Company (Contractor)
Address P.O. Box 2748 Elko, Nevada 89803 (Contractor)
Nevada contractor's license number issued by the State Contractor's Board 0030823
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1820
Signed Curt Sterlie (By driller performing actual drilling on site or contractor)
Date 6-9-03

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627