

OFFICE USE ONLY
 Log No. 92152
 Permit No. _____
 Basin 72

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. 43500

1. OWNER FLORIDA CANYON MINING, CO. ADDRESS AT WELL LOCATION FLORIDA CANYON MINE
 MAILING ADDRESS P.O. BOX 330
IMLAY, NV 89418

2. LOCATION NW 1/4 NW 1/4 Sec. 12 T. 31 N N/S R. 33 E PERSHING County
 PERMIT NO. M/O - 1306
 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 |
|---------------------------|--------------|------|-----|-----------|
| MONITOR WELL RTP-14 | | | | |
| DARK GRAY ARGILLITE | | 0 | 350 | 350 |
| GRAY-YELLOW ARGILLITE | | 350 | 610 | 260 |
| BLACK ARGILLITE | | 610 | 720 | 110 |
| 715 to 495 SLOT PVC | | | | |
| 495 to +1 BLANK PVC | | | | |
| SAND PACKED 720 to 380 | | | | |
| BENTONITE FROM 380 to 50 | | | | |
| CEMENT SEAL 50 to SURFACE | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 720 Feet Depth Cased 715 Feet

HOLE DIAMETER (BIT SIZE)
 From To
6 Inches 0 Feet 720 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 1.5 | PVC | SCH 80 | +1 | 715 |

Perforations: Type perforation SLOT SCREEN
 Size perforation .020
 From 495 feet to 715 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 720 feet to 380 feet

9. WATER LEVEL
 Static water level 5.66 feet below land surface
 Artesian flow NO G.P.M. _____ P.S.I. _____
 Water temperature _____ °F Quality _____

Date started JANUARY 23, 2004
 Date completed JANUARY 26, 2004

7. WELL TEST DATA

| TEST METHOD: | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|--------|-------------------------------|--------------|
| <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift | | | |
| | | | |
| | | | |
| | | | |

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

Name GEORGE DELONG CONSTRUCTION, INC.
 Address P.O. BOX 907 WINNEMUCCA, NV 89446
 Contractor

Nevada contractor's license number 0002120C
 issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 01375

Signed _____
 Date FEB 05 04

RECEIVED
 04 FEB 11 AM 10:26
 STATE ENGINEERS OFFICE