

WELL DRILLERS REPORT

Please complete this form in its entirety

Log No. 96631
 Permit No. _____
 Basin _____

1. OWNER Majuba Place Mining ADDRESS P.O. Box 1192
Ren. Nev. 89510

2. LOCATION 1/4 SW 1/4 Sec. 30 T. 32 N/S R. 32 E per County _____
 PERMIT NO. waiver # 42141

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input type="checkbox"/>	Domestic <input type="checkbox"/>	Cable <input type="checkbox"/>
Recondition <input type="checkbox"/>	Irrigation <input type="checkbox"/>	Rotary <input checked="" type="checkbox"/>
Deepen <input type="checkbox"/>	Municipal <input type="checkbox"/>	Other <input type="checkbox"/>
Other <u>TEST HOLE</u> <input checked="" type="checkbox"/>	Industrial <input type="checkbox"/>	
	PLUG <input checked="" type="checkbox"/>	
	Test <input checked="" type="checkbox"/>	
	Stock <input type="checkbox"/>	

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown clay		0	3	
gray shale		3	12	
Brown shale		12	28	
gray shale		28	60	
Brown shale	50	60	65	
Black shale	175	65	280	
gray limestone		280	321	
black shale	360	321	500	

*abandoned Hole
not enough water*

8. WELL CONSTRUCTION

Diameter hole 6 inches Total depth 500 feet

Casing record _____

Weight per foot _____ Thickness _____

Diameter	From	To
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type _____

Depth of seal _____ feet

Gravel packed: Yes No

Gravel packed from _____ feet to _____ feet

Perforations:

Type perforation _____

Size perforation _____

From _____ feet to _____ feet

9. WATER LEVEL

Static water level _____ Feet below land surface

Flow _____ G.P.M. 100

Water temperature cold F. Quality clear

Date started 9/20, 1980

Date completed 9/21, 1980

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST

G.P.M. _____	Draw down _____ feet	_____ hours
G.P.M. _____	Draw down _____ feet	_____ hours
G.P.M. _____	Draw down _____ feet	_____ hours

10. DRILLERS CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Paul Williams

Address 22 S. Pateron Sparks

Nevada contractor's license number 14483

Nevada driller's license number 957

Signed Paul Williams

Date 9/21/80