

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. **106372**
 Permit No. _____
 Basin **229**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **32701**

1. OWNER **MARIGOLD MINING CO.** ADDRESS AT WELL LOCATION **DAISY MINE SITE**
 MAILING ADDRESS **DAISY MINE SITE**
BETTY, NV

2. LOCATION **SW 1/4 SE 1/4 Sec. 12 T 12S** N/S R **47E E** **NYE** County
 PERMIT NO. **MO-2744** Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other **PLUG**

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	Thick-ness
PUMP NEAT CEMENT DOWN 1" (ONE) INCH PIPE FROM 160' TO SURFACE				
N 36 DEGREES 54'18.48" W 116 DEGRES 39' 56.0"				
WAIVER NUMBER R-1417A EXISTING WELL LOG#54222				

DCNR/DWR RECEIVED
 AUG 26 2008
LAS VEGAS OFFICE

Date started **8/21/2008**, 19
 Date completed **8/21/2008**, 19

7. WELL TEST DATA

TEST METHOD:	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			

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

HOLE DIAMETER (BIT SIZE)
 EXISTING 2 Inches From **0** Feet To **160** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
EXISTING	2"		0	160

Perforations:
 Type perforation **EXISTING**
 Size perforation **EXISTING**

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal **EXISTING**
 Placement Method: Pumped Poured
 Gravel Packed: Yes No

Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **83** 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 **GREAT BASIN DRILLING CO. OF NEVADA, INC.**
 Contractor
 Address **1220 E MANSE RD**
 Contractor
PAHRUMP, NV. 89048
 Nevada contractor's license number issued by the State Contractor's Board **47333**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1426**
 Signed _____
 By driller performing actual drilling on-site or contractor
 Date **8/22/2008**