

OFFICE USE ONLY
 Log No. 30908
 Permit No. 54316-T, 54317
 Basin. 51-4-53

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 13890

1. OWNER Cominco American Resources ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 847 _____
Carlin, NV 89822 Buckhorn Operations
 2. LOCATION SE 1/4 SE 1/4 Sec. 31 T. 27 N/S R. 49 E. Eureka County
 PERMIT NO. 47178 54316-T Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock

5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Clay		0	10	10
Broken rock, big		10	13	3
Clay		13	25	12
Rock		25	95	70
Broken rock, small		95	105	10
Rock	x	105	140	35
Broken rock, small	x	140	155	15
Rock		155	200	45
Broken rock, small		200	215	15
Hard rock		215	240	25
Hard rock		240	270	30
Hard rock		270	300	30
Med. broken rock, sm.	x	300	340	40
Med. broken rock	x	340	360	20
Rock		360	400	40
Broken rock, small	x	400	420	20
Broken rock, small	x	420	460	40
Rock		460	500	40
Rock		500	520	20
Broken rock	x	520	555	35

8. WELL CONSTRUCTION

Diameter 12 inches Total depth 555 feet
 _____ inches
 _____ inches
 Casing record steel
 Weight per foot 19.66 Thickness .219
 Diameter From To
8 5/8 inches +2 feet 555 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type _____
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation Holt Air Perforator
 Size perforation 3/16 x 2
 From 140 feet to 200 feet
 From 280 feet to 360 feet
 From 400 feet to 480 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Date started January 12 19 90
 Date completed January 22 19 90

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

9. WATER LEVEL

Static water level 114 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality Good

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Elsing Drilling & Pump Co., Inc.
P.O. Box 919 Contractor
 Address Twin Falls, ID 83303-0919 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0017177
 Nevada contractor's driller's number issued by the Division of Water Resources 1295
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1637
 Signed Wm Elsing, Cont.
 By driller performing actual drilling on site or contractor
 Date January 31, 1990