

OFFICE USE ONLY
 Log No. 38856
 Permit No. 57412
 Basin 131

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. 15589

1. OWNER Santa Fe Pacific Mining ADDRESS AT WELL LOCATION Section 29, Township 32, Range 43, Lander County, Nevada
 MAILING ADDRESS 250 S. Rock Blvd Reno, NV 89502

2. LOCATION SW 1/4 SW 1/4 Sec 29 T 32 N/S R. 43 E Lander County
 PERMIT NO. MM-86 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 | Thick-ness |
|---|--------------|------|-----|------------|
| Gravel, sand bed | | 0 | 30 | 30 |
| Limestone | | 30 | 605 | 575 |
| <i>Plugged by Well Log # 114160</i> | | | | |
| <i>*92 SEP 14 12:05 RECEIVED STATE ENGINEERS OFFICE</i> | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 605 Feet Depth Cased 605 Feet

HOLE DIAMETER (BIT SIZE)
 From 0 To 605
8.0 Inches Feet Feet
 Inches Feet Feet
 Inches Feet Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 4 | | 1/8 | 0 | 605 |

Perforations:
 Type perforation Slot
 Size perforation 1/8"
 From 50 feet to 605 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 ft. Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 53 feet to 605 feet

9. WATER LEVEL
 Static water level 130 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started July 23 19 92
 Date completed July 31 19 92

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 checked="" type="checkbox"/> Air Lift | 60 | 100 | 2 |

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, Inc
 Address P. O. Box 2786
Elko, NV 89801
 Nevada contractor's license number 0030823
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1777
 Division of Water Resources, the on-site driller
 Signed Dennis L. White
 By driller performing actual drilling on site or contractor
 Date 8-27-92