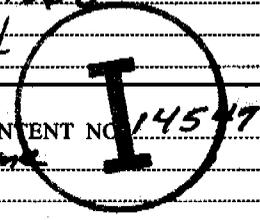


OFFICE USE ONLY  
 Log No. 39860  
 Permit No. 44  
 Basin. 44



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 14547

PRINT OR TYPE ONLY

1. OWNER INDEPENDENCE MINING Co. ADDRESS AT WELL LOCATION SAME  
 MAILING ADDRESS MTN. City STAR Route  
ELKO, NEVADA 89801  
 2. LOCATION NW 1/4 NN 1/4 Sec 33 T 41 N N/S R. 54 E E. ELKO County  
 PERMIT NO. \_\_\_\_\_ Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name NA

3. TYPE OF WORK  
 New Well  Recondition   
 Deepen  Other   
 4. PROPOSED USE  
 Domestic  Irrigation  Test   
 Municipal  Industrial  Stock   
 5. TYPE WELL  
 Cable  Rotary   
 Other  Hammer

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>GRAVELY SAND</u>		<u>0</u>	<u>4</u>	
<u>Gravelly, clayed sand</u>		<u>4</u>	<u>10.5</u>	
<u>GRAVELY SAND</u>		<u>10.5</u>	<u>13</u>	
<u>Gravelly clayed sand</u>		<u>13</u>	<u>44</u>	
<u>Silty sandy clay</u>		<u>44</u>	<u>52</u>	
<u>Gravelly clayed sand</u>		<u>52</u>	<u>67</u>	

92 MAY -1 AND 38  
 RECEIVED  
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION  
 Diameter 8 5/8 inches Total depth 64 feet  
 \_\_\_\_\_ inches  
 \_\_\_\_\_ inches  
 Casing record 4" PVC Sched 40  
 Weight per foot \_\_\_\_\_ Thickness 1/8"  

Diameter	From	To
<u>4"</u> inches	<u>0</u> feet	<u>44</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes  No  Type NEAT Cement  
 Depth of seal 37.5 to 40' Bentonite feet  
 Gravel packed: Yes  No   
 Gravel packed from 40 feet to 67 feet  
FLUSH Mount Cristy box 1' concrete  
 Perforations:  
 Type perforation slot  
 Size perforation .030  
 From 44 feet to 64 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started MAR 30, 1992  
 Date completed APRIL 1, 1992

7. WELL TEST DATA

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

9. WATER LEVEL  
 Static water level \_\_\_\_\_ feet below land surface  
 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 BECKER DRILLS (DIVISION OF LAINE-WESTERN)  
 Address P.O. box 567 Commercial City, Colorado 80037  
 Nevada contractor's license number issued by the State Contractor's Board 0019101  
 Nevada contractor's driller's number issued by the Division of Water Resources \_\_\_\_\_  
 Nevada driller's license number issued by the Division of Water Resources the on-site driller M-1575  
 Signed W.C. Dillard  
 By driller performing actual drilling on site or contractor  
 Date \_\_\_\_\_

BAILER TEST  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours