

OFF Set Hole # 2 (B-9 Hole # Aband)

WHITE—DIVISION OF WATER RESOURCES
 CANARY—CLIENT'S COPY
 PINK—WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 39085
 Permit No. _____
 Basin 601

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. 15586

1. OWNER DEE Gold Mining Co ADDRESS AT WELL LOCATION DEE Gold Mining Co
 MAILING ADDRESS 33 Miles North of Carlin
Carlin, Nevada 89822

2. LOCATION NE 1/4 NE 1/4 Sec. 4 T. 36N N/S R. 49E E County EAST
 PERMIT NO. APR 5 1992 5M/D-530 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 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	Thickness
<u>Pulled 4" SCH-40 Pvc</u>		<u>0</u>	<u>18.5</u>	
<u>Plugged & Aband w/ Neat cement</u>		<u>0</u>	<u>18.5 - 18.5</u>	
<u>18.5 T.D.</u>				

92 MAY -6 AM 127
 STATE ENGINEER

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

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 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)

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0 - 18.5 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

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

Date started 14 April 92 19____
 Date completed _____ 19____

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 type="checkbox"/> Air Lift			

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 Co Contractor
 Address 655 Union Pacific Way Contractor
Elko Nevada 89801
 Nevada contractor's license number 0030823
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1274
 Signed Marc Eklund
 By driller performing actual drilling on site or contractor
 Date 14 April - 92