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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. 18502

1. OWNER CORTEZ GOLD MINES ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Star Rte. HC 66-50
Beowawe, NV 89821-9708

2. LOCATION NE 1/4 SE 1/4 Sec 12 T. 27 N. S. R. 47 E. Lander County _____
 PERMIT NO. R-150 (Unsurveyed) Subdivision Name _____
Issued by Water Resources Parcel No.

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
<u>Site #3 Reclamation well</u>				
<u>Silty clay</u>		<u>0</u>	<u>6</u>	<u>6</u>
<u>Clay & gravel</u>		<u>6</u>	<u>12</u>	<u>6</u>
<u>Sand</u>	<u>Seep</u>	<u>12</u>	<u>14</u>	<u>2</u>
<u>Sand & gravel</u>		<u>14</u>	<u>17</u>	<u>3</u>
<u>Gravel w/water</u>	<u>✓</u>	<u>17</u>	<u>23</u>	<u>6</u>
<u>Clay</u>		<u>23</u>	<u>24</u>	<u>1</u>
<u>Sand w/water</u>	<u>✓</u>	<u>24</u>	<u>26</u>	<u>2</u>
<u>Clay</u>		<u>26</u>	<u>27</u>	<u>1</u>
<u>Sand w/water</u>	<u>✓</u>	<u>27</u>	<u>35</u>	<u>8</u>
<u>Clay</u>		<u>35</u>	<u>41</u>	<u>6</u>
<u>Sand & gravel w/w</u>	<u>3 gpm</u>	<u>41</u>	<u>42</u>	<u>1</u>
<u>Clay</u>		<u>42</u>	<u>45</u>	<u>3</u>
<u>T.D. 45 ft</u>				

8. WELL CONSTRUCTION
 Depth Drilled 45 Feet Depth Cased 45 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 Inches 0 Feet 45 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.92</u>	<u>.188</u>	<u>+1 1/2</u>	<u>11</u>
			<u>26</u>	<u>30</u>
			<u>35</u>	<u>37</u>

Perforations:
 Type perforation SS SCREEN
 Size perforation 2.020

From 11 feet to 26 feet
 From 30 feet to 35 feet
 From 37 feet to 42 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Poured

Gravel Packed: Yes No
 From 10 feet to 45 feet

9. WATER LEVEL
 Static water level 17 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 5-13 ~~5-26~~, 1992
 Date completed 5-26, 1992

7. WELL TEST DATA Completed 6/25/92

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>15 gpm</u>	<u>= total capacity</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name MATH Drilling Co. Contractor
 Address 203 Pine St. Contractor
Elko, NV 89801

Nevada contractor's license number issued by the State Contractor's Board 10819
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 632

Signed James V. Smith
 By driller performing actual drilling on site or contractor
 Date 7/1/92