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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. 22197

1. OWNER Battle MT Gold ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Box 1627 PW-5
Battle MT NV. 89820
 2. LOCATION SW 1/4 SE 1/4 Sec. 27 T. 31 N. S. R. 43 E. Lander County
 PERMIT NO. W-408 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	Thickness
<u>Fill</u>		<u>0</u>	<u>2</u>	<u>2'</u>
<u>Altered Siltstone</u>		<u>2</u>	<u>100</u>	<u>98'</u>
<u>Slate</u>		<u>100</u>	<u>120</u>	<u>20'</u>
<u>Fract. Quartzite</u>	<u>X</u>	<u>120</u>	<u>270</u>	<u>150'</u>
<u>Slate</u>	<u>X</u>	<u>270</u>	<u>290</u>	<u>20'</u>
<u>Fract. Quartzite</u>	<u>X</u>	<u>290</u>	<u>390</u>	<u>60'</u>
<u>Slate</u>		<u>390</u>	<u>368</u>	<u>18'</u>
<u>Fract. Quartzite</u>	<u>X</u>	<u>368</u>	<u>460</u>	<u>92'</u>

8. WELL CONSTRUCTION
 Depth Drilled 460 Feet Depth Cased 460 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 Inches 0 Feet 460 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"</u>		<u>.188</u>	<u>0</u>	<u>460</u>

Perforations:
 Type perforation Mill Slot
 Size perforation .125
 From 260 feet to 460 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 100
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 101 feet to 460 feet

9. WATER LEVEL
 Static water level 223 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 58 °F Quality FAIR

Date started 8-14, 1994
 Date completed 8-24, 1994

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	<u>35</u>		<u>12</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name AAA Drilling Contractor
 Address Box 2487 Elk NV. 89803 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 002684
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1783
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 8-26-94