



OFFICE USE ONLY
 Log No. 55074
 Permit No. _____
 Basin. _____

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 28414
Twin Creeks Project

1. OWNER Santa Fe Pacific Gold Corp ADDRESS AT WELL LOCATION 50 Miles Northeast of Winnemucca NV
 MAILING ADDRESS P O Box 69
Golconda NV 89414

2. LOCATION SE 1/4 NW 1/4 Sec 5 T. 38 N S R. 43 E Humboldt County

PERMIT NO. MO 823 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
Alluvium		0	100	100
Pumped 16 lb. neat cement from 100 feet to surface				
*Please note that all PVC and Gravel pack was drilled out before pumping cement.				

8. WELL CONSTRUCTION
 Depth Drilled 100 Feet Depth Cased 100 Feet

HOLE DIAMETER (BIT SIZE)
 From To
8 Inches 0 Feet 100 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	Steel		+3	5
1 1/2	PVC	Schedule 40	+2	100
1 1/2	PVC	Schedule 40	+2	45

Perforations:
 Type perforation Slotted
 Size perforation .020 inch
 From _____ feet to _____ feet
 From 40 feet to 45 feet
 From 95 feet to 100 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0 - 100 feet Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 86 feet feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started August 27 1996
 Date completed August 27 1996

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name SFPGC - Twin Creeks Mine Contractor
 Address Mine Owned Rig Contractor
Ken Anderson - Driller
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M1934
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 9-17-96

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 16 SEP 23 PM 4:27
 DIVISION OF WATER RESOURCES