

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY  
 Log No. 39180  
 Permit No.  
 Basin 072

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. **50038-2**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

1. OWNER **FLORIDA CANYON MINING, INC.**  
 MAILING ADDRESS **P.O. BOX 330**  
**IMLAY, NV 89418**

ADDRESS AT WELL LOCATION **OFF EXIT 138 I-80 EAST**  
**NEAR IMLAY, NV**

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **3** T **31N**  
 PERMIT NO. **M/O-1266-A** **08-580-57**  
Issued by Water Resources Parcel No.

N/S R **33** E **PERSHING** County  
**WELL # R**  
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
<b>BOULDERS &amp; CLAY</b>		<b>0</b>	<b>40</b>	<b>40</b>
<b>BOULDERS, GRAVEL &amp; CLAY</b>		<b>40</b>	<b>160</b>	<b>120</b>
<b>BOULDERS, GRAVEL &amp; SAND</b>		<b>160</b>	<b>200</b>	<b>40</b>

**USED 41. 50# BAGS OF 3/8" HOLE PLUG CEMENTED TOP 10 FEET**

8. WELL CONSTRUCTION

Depth Drilled **200** Feet Depth Cased **190** Feet

HOLE DIAMETER (BIT SIZE)

	From	To	
<b>8 3/4</b> Inches	<b>0</b> Feet	<b>200</b> Feet	
Inches	Feet	Feet	
Inches	Feet	Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>4.5</b>	<b>PVC</b>	<b>SCH 40</b>	<b>+2</b>	<b>190</b>

Perforations:

Type perforation **PVC SCREEN**  
 Size perforation **.020**  
 From **150** feet to **180** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No

Depth of Seal **145'**

Placement Method:  Pumped  Poured

Seal Type:

Neat Cement  
 Cement Grout  
 Concrete Grout

Gravel Packed:  Yes  No

From **145** feet to **200** feet

9. WATER LEVEL

Static water level **150** feet below land surface  
 Artesian 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 **HACKWORTH DRILLING, INC** Contractor

Address **P.O. BOX 850** Contractor

**ELKO, NV 89803**

Nevada contractor's license number issued by the State Contractor's Board **020582**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1689**

Signed *[Signature]*  
 By driller performing actual drilling on-site or contractor

Date **2/27/2003**

Date started **1/30/2003**, 19\_\_  
 Date completed **1/30/2003**, 19\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift  
 G.P.M. Draw Down (Feet Below Static) Time (Hours)

**2-3** **2**