|  |
| --- |
| Company details |
| Operating Company:  |  | Date:  |  |
| Postal Address:  |  | Contact Name:  |  |
|  |  | Phone No:  |  |
|  |  | Email: |  |
|  |  |  |  |

|  |
| --- |
| **Drilling details** (complete one form for each hole drilled) |
| Locality/Prospect Name: |  | GDA94 UTM Coordinates: |
| Well Name/No:  |  |  | m EAST |
| Depth of Hole (m): |  |  | m NORTH |
| Drilling Completion Date: |  | Zone: |  |
| Title Type/No.: |  | Source of Coordinates: (eg. Hand held GPS) |
| Geological Province:  |  |  |
| 1:250K Map Sheet Name:  |  | Azimuth: |  |
| 1:100K Map Sheet Name: |  | Declination: |  |

|  |
| --- |
| **Samples to be submitted** |
| Core Intervals: |  | Core Diameter: |  |
|  |  | No. of Core Trays: |  |
|  |  | No. of Pallets: |  |
|  |  |  |  |
|  |  | No. of Cutting Samples: |  |
|  |  |  |  |
|  |  | Comments (e.g. 5 trays missing, trays 1-3 damaged) |
|  |  |  |
|  |  |  |
|  |  |  |
| Cutting Intervals: |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Note: Form to be submitted to Core Facility Manager with samples in accordance with the Geological Sample Submission (Core and Cuttings) procedure.

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| **Department of Industry, tourism and tRade** |
| Report No.:  |  | Rack Location:  |  |
| Recorded by:  |  | Date Recorded:  |  |