

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S PLUGGING REPORT



OFFICE USE ONLY
 Log No. 100132
 Permit No. 044
 Basin 044

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **58499**

1. OWNER **Queenstake Resources GW-21** ADDRESS AT WELL LOCATION **Starvation Canyon, 35 miles north of Eiko, NV.**
 MAILING ADDRESS **HC 31, Box 78, Eiko, NV 89801** Subdivision Name: **N/A** County: **Elko**

2. LOCATION **NE¼NE¼ Sec4T40N/ R54E** Latitude **41 23.732 N** UTM E NAD 27
 PERMIT/WAIVER NO. **M/O-389A** Parcel No. **N/A** Longitude **115 53.366 W** N NAD 83/WGS 84
Issued by Water Resources

3. TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 Is this well being plugged because a replacement well was drilled? Yes No
 Is there an existing well log? Yes No
 If yes, what is replacement well NOI? _____
 If yes, what is NDWR well log #? **NOI 16890**

4. EXISTING WELL CONSTRUCTION
 Depth Drilled **90 Feet** Depth Cased **88 Feet**
 EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5.50	2.77	0.258	+1	88

Existing Perforations:
 Type of perforation **Slotted**
 Size of perforation **0.060"**
 From **28** feet to **88** feet
 From _____ feet to _____ feet

5. WATER LEVEL
 Static water level: **51** feet below land surface
 Artesian flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments
Materials Used:

Neat Cement: 23.3 cu.ft.

7. WELL PLUGGING PROCEDURE
 Was well cleaned out to total depth? Yes No
 If well was not cleaned out to total depth, please explain why: _____

Was the well contaminated? Yes No
 Was the casing pulled? Yes No
 Was the casing over drilled? Yes No
 If casing was left in place, please show where additional perforations were made:
 Additional Perforations: _____

Type of perforator used: **N/A**
 From _____ feet to _____ feet Number of perms per linear foot _____
 From _____ feet to _____ feet Number of perms per linear foot _____
 From _____ feet to _____ feet Number of perms per linear foot _____
 From _____ feet to _____ feet Number of perms per linear foot _____
 From _____ feet to _____ feet Number of perms per linear foot _____
 From _____ feet to _____ feet Number of perms per linear foot _____

8. WELL PLUGGING MATERIALS

Material Used
Neat Cement Pumped Poured
 From **+1** feet to **88** feet Pumped Poured
 From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight **15.6** lbs/gal
 Bentonite Grout _____ % bentonite
 Date Started **09/10/06**
 Date Completed **09/10/06**

9. DRILLER'S CERTIFICATION

This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.

Name **Lang Exploratory Drilling**
 (CONTRACTOR)

Address **P.O. Box 5279**
 (CONTRACTOR)

Elko, NV 89802-5279

Nevada contractor's license number issued by the State Contractor's Board **0021976**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2258**

Signed _____
 By driller performing actual drilling on site or contractor

Date **09/12/06**

STATE ENGINEERS OFFICE
 2006 SEP 18 AM 11:46
 RECEIVED

aw