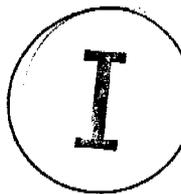


STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



OFFICE USE ONLY
Log No. 101530
Permit No. _____
Basin 066

* Revised Log *

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. 58406

1. OWNER Barrick Goldstrike ADDRESS AT WELL LOCATION Lower Clover Ranch
MAILING ADDRESS PO Box 29 Elko, NV Subdivision Name: _____ County: Humboldt

2. LOCATION SE 1/4 SE 1/4 Sec 32 T 38N N/S R 44 E Latitude 41.12236 UTM E NAD 27
PERMIT/WAIVER No. _____ Longitude 117.02916 N NAD 83/WGS 84
Issued by Water Resources _____ Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Irrigation Test Monitor Municipal/Industrial Stock
5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Top Soil		0	15	15
Gravel/Clay		15	30	15
Sand/Clay		30	50	20
Sand/Fine Gravel		50	62	12
Clay		62	75	13
Sand/Fine Gravel		75	80	5
Gravel/Clay		80	110	30
Gravel/Clay		110	115	5
Clay/Gravel		115	153	38
Rock/Clay		153	155	2
Rock/Sand		155	160	5
Rock		160	200	40

9. WELL CONSTRUCTION
Depth Drilled 200 Feet Depth Cased 148 Feet
HOLE DIAMETER (BIT SIZE)
12 1/4 Inches From 0 Feet To 200 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+2	148

Perforations:
Type of perforation _____ Mill Slot _____
Size of perforation _____
From 78 feet to 138 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 75 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 75 to 200 Pumped Poured
Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

7. Water Level
Static water level: 115 feet below land surface
Artesian Flow: NA G.P.M. _____ P.S.I. _____
Water Temperature: Cool °F
Quality: Good

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	<u>10</u>	<u>NA</u>	<u>1 Hr</u>

2006 SEP 29 AM 10:44

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Hydro Resources Nevada, Inc. dba Humboldt Drilling & Pump Contractor
Address 4975 W. Winnemucca Blvd. Winnemucca, NV 89445 Contractor

WELL CONSTRUCTION
Nevada contractor's license number _____
issued by the State Contractor's Board 56797
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 1713
Signed Cheryl Jaynes
By driller performing actual drilling on site or contractor
Date 8/2/2006