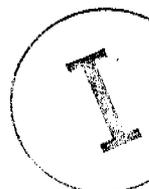


STATE OF NEVADA  
DIVISION OF WATER RESOURCES  
WELL DRILLER'S REPORT



OFFICE USE ONLY

Log No. 101575  
Permit No. \_\_\_\_\_  
Basin 066

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. 57668

1. OWNER Newmont Mining Corp  
MAILING ADDRESS P.O. Box 69 Colton, NV 89414 Hyd Dept

ADDRESS AT WELL LOCATION Twin Creeks mine 30 miles N of Colton, NV - Hyd Dept.  
Subdivision Name: \_\_\_\_\_ County: \_\_\_\_\_

2. LOCATION NE 1/4 NW 1/4 Sec 30 T 39 N R 43 E  
PERMIT/WAIVER No. \_\_\_\_\_ Parcel No. \_\_\_\_\_

Latitude \_\_\_\_\_ UTM E 1593945.77  NAD 27  
Longitude \_\_\_\_\_ N 14976759.67  NAD 83/WGS 84

3. WORKED PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other

4. PROPOSED USE  
 Domestic  Municipal/Industrial  
 Irrigation  Monitor  Test  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Dw 26</u>				
<u>Dry well in bottom of mega pit.</u>				
<u>well has been mined off and last 180' remains - mine will mine off 30 to 60 more feet of well.</u>				
<u>Fill well up with 3/8 hole plug.</u>				

9. WELL CONSTRUCTION  
Depth Drilled 180 Feet Depth Cased 180 Feet  
HOLE DIAMETER (BIT SIZE)  
22 Inches From 0 Feet To 180 Feet  
Inches Feet Feet Feet  
Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>16</u>		<u>1/4</u>	<u>0</u>	<u>180</u>

Perforations:  
Type of perforation Slot  
Size of perforation 1/4  
From 0 feet to 180 feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No  
 Neat Cement \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Cement Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_  
Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
Type: Abandon hole with 3/8 chips and way up

Date started: 7/25 , 20 06  
Date completed: 7/26 , 20 06

7. Water Level  
Static water level: none feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F  
Quality: none

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)

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name Eklund Drilling Contractor  
Address P.O. Box 2748 Eiko NV 89803 Contractor  
Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board 0030823  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller m 2089  
Signed [Signature]  
By driller performing actual drilling on site or contractor  
Date 7/26/06

(Rev 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

STATE ENGINEERS OFFICE

2006 AUG 31 AM 11:06

RECEIVED