



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

OFFICE USE ONLY  
Log No. 103561  
Permit No. \_\_\_\_\_  
Basin 051

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. 59583

1. OWNER **Newmont Gold Co.** **GQP-39** ADDRESS AT WELL LOCATION **Newmont Gold Quarry**  
MAILING ADDRESS **P.O. Box 669** **North of Carlin, NV**  
**Carlin, NV 89822** **Subdivision Name: N/A** **County: Eureka**

2. LOCATION **NE 1/4 NE 1/4 Sec 35 T34N R51 E** Latitude **40° 47.814N** UTM E  NAD 27  
PERMIT/WAIVER NO. **M/O-155C** **N/A** Longitude **116° 12.170W** N  NAD 83/WGS 84  
*Issued by Water Resources* Parcel No. \_\_\_\_\_

3. TYPE OF WELL  
 Domestic  Irrigation  Test  Municipal/Industrial  Monitor  Stock  
Is this well being plugged because a replacement well was drilled?  Yes  No  
If yes, what is replacement well NOI? \_\_\_\_\_  
Is there an existing well log?  Yes  No  
If yes, what is NDWR well log #? **40613**

4. EXISTING WELL CONSTRUCTION  
Depth Drilled **495** Feet Depth Cased **405** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
7.625	19	.1875	+3.13	20
1.25	1.278	.191	+1.80	405

Existing Perforations:  
Type of perforation **SLOTTED**  
Size of perforation **1" X 0.025**

From <b>385</b>	feet to	<b>405</b>	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet

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 perfs per linear foot _____
From _____	feet to	_____	feet	Number of perfs per linear foot _____
From _____	feet to	_____	feet	Number of perfs per linear foot _____
From _____	feet to	_____	feet	Number of perfs per linear foot _____
From _____	feet to	_____	feet	Number of perfs per linear foot _____
From _____	feet to	_____	feet	Number of perfs per linear foot _____

5. WATER LEVEL  
Static water level: **0** dry? feet below land surface  
Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F Quality \_\_\_\_\_

8. WELL PLUGGING MATERIALS

Material Used		Neat Cement	
From <b>0</b>	feet to <b>405</b>	feet	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____	feet to _____	feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Neat Cement Fluid Weight **15.6** lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite

Date Started **07/28/07**  
Date Completed **07/28/07**

6. Additional Notes or Comments  
**Material Used: 11.8 cf Neat Cement**

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 **Boart Longyear Drilling Services**  
(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 **2047**

Signed \_\_\_\_\_  
By driller performing actual drilling on site or contractor

Date **08/01/07**

N 40.796900  
W 116.202833 NAD27

STATE ENGINEERS OFFICE  
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