

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

OFFICE USE ONLY

Log No. 106129
 Permit No. _____
 Basin 966 pg 1

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 61698

1. OWNER **Newmont Mining Co.** **TDW72** ADDRESS AT WELL LOCATION **Twin Creeks Minesite**
 MAILING ADDRESS **P.O. Box 669** **North of Golconda, NV**
Carlin, NV 89822 **Subdivision Name: NA** **County: Humboldt**

2. LOCATION **SW¼NE¼ Sec 18 T39N/ R43E** Latitude **41°15.729N** UTM E NAD 27
 PERMIT/WAIVER NO. **60055** **NA** Longitude **117°10.103W** N NAD 83/WGS 84
Issued by Water Resources *Parcel No.*

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Other _____

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

5. WELL TYPE
 Cable Rotary RVC
 Air Other **Fllooded Reverse**

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thick-ness
Sand-Gravel		0'	180'	180'
Light Brown Rock & Sand		180'	225'	45'
Light Brown Rock		225'	350'	125'
Light Gray Rock		350'	560'	210'
Fracture		435"	560'	125'
Black Rock & Clay		560'	580'	20'
Black Rock		580'	600'	20'
Light Gray Clay		600'	630'	30'
Clay		630'	660'	30'
Gray Rock & Clay		660'	695'	35'
Gray Rock		695'	700'	5'
Fracture		700'	740'	40'
Gray Clay		740'	755'	15'
Fracture		755'	765'	10'
Clay		765'	780'	15'
Black Rock		780'	810'	30'
Clay		810'	830'	20'
Light Black Rock		830'	900'	70'
Black Rock		900'	960'	60'
Hard Light Gray & Black Rock		960'	970'	10'
Fracture		970'	1000'	30'
Black Rock/Fractured		1000'	1030'	30'
Hard		1030'	1045'	15'
Black Rock		1045'	1095'	50'
Fracture		1095'	1100'	5'
Black Rock		1100'	1125'	25'
Black Clay		1125'	1150'	25'
Black Rock/Fractures		1150'	1195'	45'

Date started: **10-Feb**, 20 **08**
 Date completed: **11-Mar**, 20 **08**

9. WELL CONSTRUCTION
 Depth Drilled **1820** Feet Depth Cased **1802** Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
31.0 Inches **0** Feet **35** Feet
22.0 Inches **35** Feet **1820** Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
24.0	94.60	.375	0	75 35
16.0	62.50	.375	+2	1802

Perforations:
 Type of perforation **Louvered**
 Size of perforation **.100"**
 From **1220** feet to **1782** feet
 From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0' to 1149' Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No 1149' to 1820' Pumped Poured
 Type: **5/8" SRI**
 Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

7. Water Level
 Static water level: **1226** feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F
 Quality: _____

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer <input type="checkbox"/> Pump Draw Down (Feet Below Static)		<input checked="" type="checkbox"/> Air Lift Time (Hours)
	G.P.M.		
	156.0	16.0	1.0

10. DRILLER'S CERTIFICATION
 This well was drilled 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
 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 **1410**
 Signed _____
 By driller performing actual drilling on site or contractor
 Date **17-Mar-08**

