

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

OFFICE USE ONLY **107663**
Log No.
Permit No.
Basin **961**

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. **63052**

1. OWNER **Barrick Goldstrike Mine** **BW-27** ADDRESS AT WELL LOCATION **Barrick Goldstrike Mine, North of Carlin, NV**
MAILING ADDRESS **P.O. Box 29**
Elko, NV 89803 **Subdivision Name: NA** **County: Eureka**

2. LOCATION **NW¼SW¼ Sec24T36N/ R49E** Latitude **46.981030** UTM E **551097** NAD 27
PERMIT/WAIVER NO. **55143** **NA** Longitude **116.392629** N **4536617** NAD 83/WGS 84
Issued by Water Resources Parcel No.

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No
 Domestic Irrigation Test Stock
 Municipal/Industrial Monitor Stock
If yes, what is replacement well NOI? _____
Is there an existing well log? Yes No
If yes, what is NDWR well log #? **39559**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **1816** Feet Depth Cased **1816** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
24.00	95.00	.375	0	1816

Existing Perforations:
Type of perforation **Roscoe Moss Full Flow**
Size of perforation **.125**

From 96	feet to 136	feet
From 416	feet to 456	feet
From 736	feet to 776	feet
From 1056	feet to 1096	feet
From 1376	feet to 1776	feet

5. WATER LEVEL
Static water level: **1738** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments
Note: Super Plug was pumped while pouring Hole Plug.

Materials Used:

Neat Cement: **391.0 cu./ft.**
3/8 Hole Plug: **3,634.0 cu./ft.**
Super Plug: **31,340.0 gallons**
Native Material: **952.0 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 perforater used: **NA**

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 _____

8. WELL PLUGGING MATERIALS

Material Used

From 0	feet to 20	feet	Cement	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 20	feet to 397	feet	Native	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 397	feet to 506	feet	Cement	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 506	feet to 1738	feet	HolePlug Super Plug	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 1738	feet to 1816	feet	Plug	<input checked="" 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 **21** % bentonite

Date Started **31-Oct-08**
Date Completed **02-Nov-08**

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

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 **2130**

Signed _____
By driller performing actual drilling on site or contractor

Date **01-Dec-08**

STATE ENGINEERS OFFICE
2008 DEC -8 AM 11:28
RECEIVED