

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

OFFICE USE ONLY
Log No. 111387
Permit No. _____
Basin 061

PRINT OR TYPE ONLY
Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Joe Giraudo
Barrick Goldstrike Mines
MAILING ADDRESS P.O. Box 29
Elko, NV 89803
ADDRESS AT WELL LOCATION 27 mi N of
Carton, NV
Subdivision Name: _____ County: Elko

NOTICE OF INTENT NO. 63826

2. LOCATION SW, NW 1/4 Sec 20 T 36 N S R 50 E
PERMIT/WAIVER No. NA NA
Latitude 40.52664 UTM E NAD 27
Longitude 116.20809 N NAD 83/WGS 84

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
fill		0	5	5
GRAVEL		5	52	47
silt		52	55	3
clayey GRAVEL		55	79	25
silt/clay		79	90	11
GRAVEL		90	107	17
silt/clay		107	152	45
silty SAND		152	167	15
CLAY		167	190	23
clay/ GRAVEL		190	201	11
GRAVEL		201	203	2
clayey GRAVEL		203	212	9
GRAVEL		212	219	7
CLAY		219	224	5
clayey GRAVEL		224	225	1

9. WELL CONSTRUCTION
Depth Drilled 225 Feet Depth Cased 225 Feet
HOLE DIAMETER (BIT SIZE)
8" From 0 To 225
Inches Feet Feet 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)
4	S&W 40		0	155

Perforations:
Type of perforation factory slotted
Size of perforation .020
From 155 feet to 215 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement to _____ Pumped Poured
 Cement Grout 0 to 11 Pumped Poured
 Concrete Grout to _____ Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 215 to 153 Pumped Poured
Type: #3 SAND
Bentonite Chips: Yes No 11 to 153 Pumped Poured
Type: 3/8 chips

Date started: 7/30/10 20 10
Date completed: 7/12 20 10

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

8. WELL TEST DATA

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

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 Co
Address 3894 Railroad Ave
Yuba City, CA 95991
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 M-2198
Signed Rob Hatcher
Date 7/30/10
By driller performing actual drilling on-site or contractor