

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

OFFICE USE ONLY
Log No. 111-559
Permit No. _____
Basin 187

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. 65757

1. OWNER **Fronteer Delevopment** LCMW-06 ADDRESS AT WELL LOCATION **Long Canyon**
MAILING ADDRESS **1031 Railroad St. Suite 110** **Oasis, NV.**
Eiko, NV. 89801 Subdivision Name: _____ County: **Eiko**

2. LOCATION **SE 1/4 SE 1/4 S33 T36N R66E** Latitude 41.025653 N UTM E **710899E** NAD 27
PERMIT/WAIVER NO. **M/O-1611** Longitude 114.491859 W **454440N** NAD 83/WGS 84
Issued by Water Resources Parcel No. NAD-27 6PS

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No Is there an existing well log? Yes No
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? **109992**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **245** Feet Depth Cased **243** Feet
EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.50	2.86	.337	+2	243

Existing Perforations:
Type of perforation **Slotted**
Size of perforation **.020**

From	feet to	feet
From 196	feet to 236	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

5. WATER LEVEL
Static water level: **237.6** feet below land surface
Artesian flow: **No** G.P.M. **N/A** P.S.I.
Water Temperature: **N/A** °F Quality **N/A**

6. Additional Notes or Comments

Materials Used

Neat Cement 31 cu. ft.

Plugging of Well Log 109992

STATE DIVISION OF WATER RESOURCES
2010 AUG 23 AM 11:28

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: **None**

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

8. WELL PLUGGING MATERIALS

Material Used

From	feet to	feet	Material	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From 0	feet to 243	feet	Neat Cement	<input type="checkbox"/> Pumped	<input checked="" 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 **August 10, 2010**
Date Completed **August 10, 2010**

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** (CONTRACTOR)

Address **2745 California Ave** (CONTRACTOR)

SLC., UT. 84104

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 **2039**

Signed _____
By driller performing actual drilling on site or contractor

Date **August 11, 2010**