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

OFFICE USE ONLY
Log No. 112576
Permit No. –
Basin 137-B

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. 66380

1. OWNER Round Mountain Gold
MAILING ADDRESS P.O. Box 480
Round Mountain, NV 89045

ADDRESS AT WELL LOCATION Smokey Valley RP-6
Round Mountain, NV 89045
Subdivision Name: 7 County: Nye

2. LOCATION ~~NW~~ NW ¼ ~~SW~~ NW ¼ Sec 22 T 10N N/S R 43 E
PERMIT/WAIVER No. WPCP NEV0091030
Issued by Water Resources Parcel No.

Latitude 38.718288°N
Longitude 117.144140°W
NAD-27 GPS
UTM E 48465.98 [X] NAD 27
N 4285317.98 [ ] NAD 83/WGS 84

3. WORKED PERFORMED
[X] New Well [ ] Replace [ ] Recondition
[ ] Deepen [ ] Other

4. PROPOSED USE
[ ] Domestic [ ] Irrigation [ ] Test
[ ] Municipal/Industrial [X] Monitor [ ] Stock

5. WELL TYPE
[ ] Cable [ ] Rotary [ ] RVC
[X] Air [ ] Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Clay w/s Sand		0	65	65

Date started: 28-Oct, 20 10
Date completed: 28-Oct, 20 10

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

8. WELL TEST DATA
TEST METHOD: [ ] Bailer [ ] Pump [ ] Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. *WELL CONSTRUCTION*
Depth Drilled 65 Feet Depth Cased 65 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
6	Inches	0	Feet	65	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
1.315	.41	.179	0	65

Perforations:
Type of perforation Well Screen
Size of perforation 0.02
From 40 feet to 65 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

Annular Seal: [X] Yes [ ] No
[X] Neat Cement 0 to 15 [X] Pumped [ ] Poured
[ ] Cement Grout ..... to ..... [ ] Pumped [ ] Poured
[ ] Concrete Grout ..... to ..... [ ] Pumped [ ] Poured
[X] ≥30% Bentonite Grout 15 to 40 [X] Pumped [ ] Poured

Gravel Pack: [X] Yes [ ] No 40 to 65 [ ] Pumped [X] Poured
Type: SRI #8
Bentonite Chips: [ ] Yes [X] No ..... to ..... [ ] Pumped [ ] Poured
Type: .....

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Parsons Drilling, Inc. (Contractor)
Address P.O. Box 1265 (Contractor)
Fallon, NV 89407
Nevada contractor's license number issued by the *State Contractor's Board* 29064
Nevada driller's license number issued by the Division of Water Resources, the *on-site driller* 2307
Signed ..... (By driller performing actual drilling on site or contractor)
Date 11/24/2010

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY