

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

OFFICE USE ONLY
 Log No. 113950
 Permit No. _____
 Basin Oldo

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. 65806

1. OWNER **Barrick Turquoise Ridge** SE 11-001 ADDRESS AT WELL LOCATION **Turquoise Ridge Mine**
 MAILING ADDRESS **HC 66 Box 220** **Kelly Creek**
Golconda, NV. 89414 Subdivision Name: _____ County: **Humbolt**

2. LOCATION **NW¼SE¼ Sec 01T38N/ R42E** Latitude _____ UTM E **484390** NAD 27
 PERMIT/WAIVER NO. **-M/O-1667 M/O-1677** Longitude _____ N **4560630** 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
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other **Flooded/Reverse**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Alluvium		0	415	415
Conglomerate		415	425	10
Basalt and Tuff		425	1275	850
Tuff and Mudstone		1275	1300	25
Mudstone		1300	1355	55
Basalt and Tuff		1355	1820	465
Mudstone, Tuffaceous, Mudstone and Minor Calcareous Mudstone		1820		
			3005	1185

41. 198.795° N NAD27
 117.186164° W

9. WELL CONSTRUCTION

Depth Drilled **3005** Feet Depth Cased **3000** Feet

HOLE DIAMETER (BIT SIZE)

From	To
20 Inches	0 Feet 40 Feet
14.75 Inches	40 Feet 450 Feet
9.875 Inches	450 Feet 3005 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
16	42.05	.250	0	40
10.75	21.21	.188	0	450
4.50	10.79	.237	+2	3000

Perforations:

Type of perforation **Slotted**
 Size of perforation **.40**

From **2880** feet to **2980** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 2870 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 2870 to 3005 Pumped Poured
 Type: **1/4" Washed**

Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

Date started: **April 21, 20 11**
 Date completed: **May 18, 20 11**

7. Water Level

Static water level: **591** feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: **warm** °F
 Quality: **Good**

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	33	N/A	1

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** (CONTRACTOR)

Address **2745 California Ave** (CONTRACTOR)
Salt Lake City, 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 **2350**

Signed _____
 By driller performing actual drilling on site or contractor

Date **May 23, 2011**

MW-10