

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

**OFFICE USE ONLY**  
Log No. 113993  
Permit No. \_\_\_\_\_  
Basin 064

**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. 60547

1 OWNER GOLD CORP ADDRESS AT WELL LOCATION MARIGOLD MINE  
MAILING ADDRESS PO BOX 160 VALMY NV 89438  
Subdivision Name: \_\_\_\_\_ County: \_\_\_\_\_  
2 LOCATION NE 1/4 SE 1/4 Sec T 8 33 N/S R 43 E Latitude UTM E 4873950  NAD 27  
PERMIT/WAIVER No. \_\_\_\_\_ Longitude N 451028.00  NAD 83/WGS 84  
Issued by Water Resources Parcel No. \_\_\_\_\_

3 TYPE OF WELL:  Domestic,  Irrigation,  Test,  Municipal/Industrial,  Monitor,  Stock  
Is this well being plugged because a replacement well was drilled? NO  
If yes, what is replacement well NOI? \_\_\_\_\_  
Is there an existing well log? NO  
If yes, what is NDWR well log #? \_\_\_\_\_

4 EXISTING WELL CONSTRUCTION  
Depth Drilled 156 Feet Depth Cased 156 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>		<u>Sch 80</u>	<u>0'</u>	<u>156</u>

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: Not Required  
Type of perforator used: \_\_\_\_\_  
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 \_\_\_\_\_

Existing Perforations:  
Type of perforation NA  
Size of perforation \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

5 WATER LEVEL  
Static water level NA feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

8 WELL PLUGGING MATERIALS

Material Used		Pumped	Poured
From <u>156'</u> feet to <u>0'</u> feet		<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____ feet to _____ feet		<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments  
Used 8 BAGS of 94# NEVADA CEMENT

Neat Cement Fluid Weight 18 lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 6-4-11  
Date Completed 6-4-11

(original well log unknown)  
NO WELL LOG, NOI, OR WAIVER NO

RECEIVED  
2011 JUL 15 PM 11:30  
STATE ENGINEERS OF FLORIDA

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 Nevada Contractor  
Address PO Box 2748 Contractor  
Elko, NV 89803  
Nevada contractor's license number \_\_\_\_\_ issued by the State Contractor's Board 0073086  
Nevada driller's license number issued by the Division of Water Resources 11-1820  
Signed [Signature] By driller performing actual drilling on site or contractor  
Date 6-4-11