

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

OFFICE USE ONLY
 Log No. 114076
 Permit No. 65418
 Basin 131

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. 65810

1. OWNER **Newmont Gold Corporation** **PPW-3** ADDRESS AT WELL LOCATION **Newmont Phoenix Mine**
 MAILING ADDRESS **1655 Mountain City Hwy** **South of Battle Mtn, NV**
Elko, NV. 89801 **Subdivision Name:** **County: Lander**

2. LOCATION **NW¼SE¼ Sec21T31N/ R43E** Latitude _____ UTM E **488511** NAD 27
 PERMIT/WAIVER NO. **65418** Longitude _____ N **4488090** 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 Air Rotary RVC
 Municipal/Industrial Monitor Stock Other **Flooded Reverse**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Dump Material		0	40	40
Grey Rock		40	80	40
Grey Rock with Tan Clay		80	105	25
Green / Brown Rock		105	285	180
Light Grey Rock		285	330	45
Light Black Rock with Pyrite		330	375	45
Light Grey Rock		375	450	75
Grey Clay		450	460	10
Grey Rock		460	490	30
Grey Clay		490	510	20
Dark Grey Rock		510	540	30
Light Grey Rock		540	855	315
Grey Clay		855	865	10
Grey Rock		865	1100	235
Grey Clay		1100	1145	45
Brown Clay		1145	1150	5
Grey Clay		1150	1180	30
Grey Rock		1180	1210	30
Grey Clay		1210	1225	15
Grey Rock		1225	1405	180

9. WELL CONSTRUCTION
 Depth Drilled **1405** Feet Depth Cased **1400** Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
26 Inches **0** Feet **60** Feet
17.5 Inches **60** Feet **1405** Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
20	52.73	.250	0	60
12.75	33.38	.250	+2	1400

Perforations:
 Type of perforation **Louvered**
 Size of perforation **.125**
 From **400** feet to **1400** feet
 From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 50 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No 350 to 1405 Pumped Poured
 Type: **3/4' Silica**
 Bentonite Chips: Yes No 50 to 350 Pumped Poured
 Type: **3/8 Quick Plug**

7. Water Level
 Static water level: **326.41** feet below land surface
 Artesian Flow: **N/A** G.P.M. **N/A** P.S.I
 Water Temperature: **Cool** °F
 Quality: **Fair**

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	404	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 Longear** (CONTRACTOR)
 Address **3745 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 **2376**
 Signed _____
 By driller performing actual drilling on site or contractor
 Date **June 28, 2011**