

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

OFFICE USE ONLY
Log No. 114594
Permit No. _____
Basin 137B

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

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

ADDRESS AT WELL LOCATION Round Mountain Gold Mine
Round Mountain, Nevada
Subdivision Name: _____ County: Nye

2. LOCATION NE 1/4 NE 1/4 Sec 30 T 10 N SR 44 E
PERMIT/WAIVER No. MO 1698
Issued by Water Resources _____ Parcel No. _____

Latitude UTM E 11704.872 NAD 27
Longitude N 110129.480 NAD 83/WGS 84

3. 0-500 WORKED 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 CORE

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
TAN FILL (HAWI ROAD)		0	7.5	7.5
BLACK PHYLLITE		7.5	13.8	6.3
Light Gray Intermediate DIKE		13.8	39	25.2
Gray/Black/White welded TUFF		39	145	106
WHITE/Gray Intermediate DIKE		145	157	12
Gray/Brown Phyllite		157	161.5	4.5
WHITE/Gray Intermediate DIKE		161.5	169	7.5
DARK Gray/Gray/Brown Phyllite		169	208.7	59.7
Crystalline Granite		208.7	229	20.3

9. WELL CONSTRUCTION
Depth Drilled 229 Feet Depth Cased NONE Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
3.895 Inches 0 Feet 229 Feet
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:
Type of perforation _____
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout 0 to 229 Pumped Poured
Gravel Pack: Yes No _____ to _____ Pumped Poured
Type: _____
Bentonite Chips: Yes No 0 to 50 Pumped Poured
Type: 3/8 Bentonite CHIPS

Date started: 5-21, 20 11
Date completed: 5-22, 20 11

7. Water Level
Static water level: 16 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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 Company Contractor
Address 2745 W. California Ave Contractor
SALT Lake City, Utah 84104
Nevada contractor's license number _____
issued by the State Contractor's Board 21976
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2088-MG
Signed Robert Ser
By driller performing actual drilling on-site or contractor
Date 8/31/11