

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

OFFICE USE ONLY
Log No. 114598
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

NOTICE OF INTENT NO. N/A

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, NV
Subdivision Name: _____ County: ME

2. LOCATION SE 1/4 SE 1/4 Sec 19 T 10 S R 44 E
PERMIT/WAIVER No. MD 1700
Issued by Water Resources Parcel No. _____

Latitude _____ UTM E 110 679 965 NAD 27
Longitude _____ N 110 997 440 NAD 83/WGS 84

3. D-506 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	Thick-ness
Gray Intermediate dike		0	21	21
Gray Brown Black Phyllite		21	117	96
Paleozoic metasediments				
Light Gray Intermediate dike		117	122	5
Black/Gray Interbedded Phyllite and laminated Phyllite Paleozoic		122	238.4	116.4
Light Gray Intermediate dike		238.4	248.7	10.3
Gray/Black/Brown Interbedded Phyllite Paleozoic Metasediments		248.7	300	51.3
Gray/Black/Brown Phyllite Paleozoic metasediments		300	405	105
Light Gray/Gray Intermediate dike		405	460.7	55.7
Black/Gray Phyllite Paleozoic metasediments		460.7	482.6	21.9
Black/Gray Intermediate dike		482.6	485.4	2.8
Brown/Gray/Black/white Phyllite Paleozoic Metasediment		485.4	612.2	126.8
Gray/white Cretaceous Granite		612.2	679	66.8

9. WELL CONSTRUCTION

Depth Drilled 679 Feet Depth Cased NONE Feet

HOLE DIAMETER (BIT SIZE)

	From	To	
<u>3.895</u> Inches	0	679	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 679 Pumped Poured

Gravel Pack: Yes No _____ to _____ Pumped Poured

Type: _____
Bentonite Chips: Yes No 0 to 50 Pumped Poured
Type: 3/8 Hole Plug - Bentonite Chips

Date started: 5-8, 20 11
Date completed: 5-12, 20 11

7. Water Level
Static water level: 20 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)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

STATE ENGINEERS REC'D
2011 SEP 15 AM 11:33
RECEIVED

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
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 Fox
By driller performing actual drilling on-site or contractor
Date 8/31/11