

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

OFFICE USE ONLY
Log No. 115867
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 Co. ADDRESS AT WELL LOCATION Round Mountain Mine Site
MAILING ADDRESS PO Box 480 Near Round Mountain NV
Round Mountain NV 89045 Subdivision Name: N/A County: NYE
2. LOCATION SW 1/4 SE 1/4 Sec 24 T 10 N R 43 E Latitude _____ UTM E 491491.7 NAD 27
PERMIT/WAIVER No. MV01803 Longitude _____ N 4283987 NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Stock
 Municipal/Industrial Monitor

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Alluvium		0	1170	1170
Densely welded Tuff		1170	1934	764
Moderately welded Tuff		1934	1998	64
Poorly welded Tuff		1998	2187	189
Older Volcanics		2187	2452	265
Phyllite		2452	2628.5	176.5

Date started: 1-2, 20 12
Date completed: 2-14, 20 12

9. WELL CONSTRUCTION

Depth Drilled 2628.5 Feet Depth Cased 2628.5 Feet

HOLE DIAMETER (BIT SIZE)

	From	To	Feet
<u>5 7/8 RC</u> Inches	0	1420	1420
<u>3.380 HQ</u> Inches	1420	2628.5	1208.5

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>10.5</u>	<u>.250</u>	0	1420
<u>0.800</u>	<u>0.114</u>	<u>0.472</u>	0	2628.5

Perforations:

Type of perforation _____
Size of perforation _____

From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 10 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout 10 to 2628.5 Pumped Poured

Gravel Pack: Yes No _____ to _____ Pumped Poured
Type: _____

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

7. Water Level

Static water level: 920 feet below land surface
Artesian Flow: 35 G.P.M. P.S.I.
Water Temperature: 90 °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 type="checkbox"/> Air Lift			

STATE ENGINEERS OFFICE
2012 APR 13 AM 11:03
RECEIVED

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name National EWP Contractor
Address 530 West Silver Street Contractor
EKO NV 89801

Nevada contractor's license number _____
issued by the State Contractor's Board 0075355
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2440

Signed _____
By driller performing actual drilling on-site or contractor
Date 3-25-2012

(Rev. 05-06) 38.706341
117.097852 NAD 27

USE ADDITIONAL SHEETS IF NECESSARY