

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

OFFICE USE ONLY
Log No. 115880
Permit No. _____
Basin 184

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. 68008

1. OWNER SNWA ADDRESS AT WELL LOCATION 23 Miles North of
MAILING ADDRESS 1001 S. Valley View U.S. 50 on Hwy 893
Las Vegas, NV 89153 Subdivision Name: McCoy Creek Ramon County: White Pine

2. LOCATION SW 1/4 NE 1/4 Sec 1 T 17 R 01S R 01E Latitude N 39° 22.19 UTM E NAD 27
PERMIT (WAIVER No.) R3D-2012-17 Parcel No. 010-380-02 Longitude W 114° 29.08 N NAD 83/WGS 84

3. 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Topsoil		0	1	1
Sand	X	1	2.5	1.5
3/8"-4" Rock, Gravel	X	2.5	40	37.5
Clay		40	50	10
Gravel and Cobbles	X	50	120	70
Clay		120	145	25
3/4" Gravel		145	151	6
Clay		151	200	49
Gravel		200	206	6
Clay		206	230	24
Sand		230	235	5
Clay		235	278	43
Gravel		278	282	4
Clay		282	300	18

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9. WELL CONSTRUCTION

Depth Drilled 300 Feet Depth Cased 300 Feet

HOLE DIAMETER (BIT SIZE)

	From	To		
	<u>12 1/4</u> Inches	<u>0</u> Feet	<u>50</u> Feet	
	<u>9 7/8</u> Inches	<u>50</u> Feet	<u>300</u> Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10</u>	<u>28.04</u>	<u>.250</u>	<u>0</u>	<u>50</u>
<u>6.625</u>	<u>17.02</u>	<u>.250</u>	<u>+2</u>	<u>100</u>
<u>6.625</u>	<u>5.006</u>	<u>.390 (SDR17)</u>	<u>100</u>	<u>200</u>

Perforations:

Type of perforation Mill

Size of perforation 1/8 x 2 1/2

From	feet to		feet
<u>140</u>	<u>160</u>		
<u>180</u>	<u>200</u>		
<u>240</u>	<u>260</u>		
<u>280</u>	<u>300</u>		

Annular Seal: Yes No

Neat Cement 0 to 100 Pumped Poured
 Cement Grout to to Pumped Poured
 Concrete Grout to to Pumped Poured
 ≥30% Bentonite Grout to to Pumped Poured

Gravel Pack: Yes No 100 to 300 Pumped Poured
Type: 3/8"

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

7. Water Level
Static water level: _____ feet below land surface
Artesian Flow: 2.0 G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump 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 Gardner Brothers Drilling, Inc. Contractor
Address PO Box 965 Contractor
Enterprise, UT 84125
Nevada contractor's license number _____
issued by the State Contractor's Board 0068459
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2458

Signed Chris Gardner By driller performing actual drilling on-site or contractor
Date 21 Aug 2012

DUPLICATE
RETAIN THIS COPY

GRPZ-12

NOTICE OF INTENT

No. 69360

Today's Date: 8/30/12

Intended Start Date: ~~9/3~~ 9/2/12

Type of Work to be Done: Drilling: Deepening: Reconditioning: Plugging:

Is this a replacement well? Yes No If there is an existing well, what is the well log number? n/a

Proposed use of well: Monitor Diameter of well: 2 inches Number of wells: 1

If this well is a domestic well, is it located within a water purveyors service area? Yes No If yes, what is the DOM waiver: _____

If this is a monitor well required by another government agency, what is the facility ID number? n/a

If this well is being completed under a waiver please provide the corresponding waiver number: MJO-1779

If a water right is associated with this well, what is the permit number? n/a

Location of the well by Public Land Survey: NESE 1/4 NWSE 1/4 Sec. 11 T 26 N R 48 E

Latitude: _____ UTM E 539760.75 NAD 27

Longitude: _____ or UTM N 4441944.58 NAD 83/WGS 84

Address at well location: Cortez

Assessor Parcel Number: _____

County: Eureka Subdivision Name: _____

Name of Client: Barrick Goldstrike

Address of Client: HCLC Box 1750

Contractor's License Number: 00730816 On-Site Drillers License Number: 2383

Company Name and Address: Boatlongyear PO Box 2748 Ellik, NV 89803

Need Log Forms Need Intent Cards Driller's Signature: Joel Nalley

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Hansen, Sheena

From: Todd Margulies <tmargulies@itascadenver.com>
Sent: Thursday, August 30, 2012 5:32 AM
To: Sturgell, Stephanie; sheena.hanson@boartlongyear.com; Nalley, Joel
Cc: Steve Axen; Sean MacDonnell; Bill Schieb
Subject: GRPZ-12

Joel requested that I pass along the information for GRPZ-12 so that you could submit it today for the NOI. He was not sure which of you would be doing it so he asked that I send it to both of you. If you have any questions or need any additional information please contact me. Thank you.

NAD 27 coords: E: 539760.75 N: 4441944.58
1/4: ~~SE~~, 1/4: ~~SW~~, SEC: 11, TNSHP: 26, RNG: 48
MO #: 1779
County: Eureka
Monitor well, 2"

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Todd Margulies
Associate Senior Hydrogeologist
ItascaDenver, Inc.
143 Union Blvd., Suite 525
Ft. Lakewood, CO 80228
303 969-8033 (office)
303 521-0937 (cell)
tmargulies@itascadenver.com

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2012 SEP 27 PM 12:23
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**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF WATER RESOURCES**

901 South Stewart Street, Suite 2002
Carson City, Nevada 89701-5250
(775) 684-2800 · Fax (775) 684-2811
<http://water.nv.gov>

**NOTICE OF INTENT CARD
APPROVAL FORM**

To: Boart Longyear - Sheena Date: 08/30/2012

Facsimile No.: 775-753-5278 or E-mail Address: sheena.hansen@boartlongyear.com

This document was: E-mailed Faxed

NOI Card Number: 69360 Approved Rejected (See reasons below)

Work performed	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Proposed use of well	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Intended start date	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver/Permit number if applicable	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Well location (legal description, GPS coordinates)	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Parcel number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address at well location	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Permit number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver number or NDEP Facility ID Number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address of Client	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Name of client/owner	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Contractor's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Onsite well driller's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Drilling company name/address	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Driller's signature	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Replacement well	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

**If yes, existing well must be plugged at time the replacement well is drilled,
pursuant to NAC 534.300 Replacement Well.**

Instructions: Coordinates plot: NE 1/4, NW 1/4, Sec. 14, T26N, R48E. Please correct your copy of the NOI.
Please reference M/O-17779 and the well ID (GRPZ-12) on the well log. Thanks!

Person reviewing NOI Card: Lynette Johnson (775) 684-2845

Date reviewed: 08/30/2012

STATE ENGINEERS OF NEVADA
2012 SEP 07 PM 12:30
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