

ORIGINAL

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

OFFICE USE ONLY
Log No. 116046
Permit No. _____
Basin 028

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. 69935 ✓

1. OWNER HYCROFT RESOURCES & DEVELOPMENT INC.
MAILING ADDRESS PO BOX 3030
WINNEMUCCA, NV 89445

ADDRESS AT WELL LOCATION HYCROFT MINE
SWTP - TEST HOLE #3 - 4503
Subdivision Name: _____ County: Pershing

2. LOCATION NE 1/4 NE 1/4 Sec 5 T 34N N/S R 29 E
PERMIT/WAIVER No. _____
Issued by Water Resources _____ Parcel No. _____

Latitude 40° 51.140 N UTM E NAD 27
Longitude 118° 44.697 W N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other Plugged

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 |
|---|--------------|------|------|------------|
| SURFACE CLAY | | 0' | 300' | 300' |
| SAND AND GRAVEL | | 300' | 303' | 3' |
| CLAY WITH SMALL GRAVEL LAYERS | | 303' | 400' | 97' |
| <i>Plugged as a borehole</i> | | | | |
| THIS BOREHOLE DID NOT LOOK TO HAVE WATER SO IT WAS PLUGGED TO STATE REGS AND A 20' NEAT CEMENT CAP WAS PUT ON IT. | | | | |

9. WELL CONSTRUCTION

| | | | | | |
|--------------------------|---------------|--------|-------------|-----------|-------------|
| Depth Drilled | <u>400'</u> | Feet | Depth Cased | <u>0'</u> | Feet |
| HOLE DIAMETER (BIT SIZE) | | | | | |
| | <u>5 1/4"</u> | Inches | <u>0'</u> | Feet | <u>400'</u> |
| | | 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
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 to _____ Pumped Poured

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

Date started: 8-Nov 20 12
Date completed: 9-Nov 20 12

7. Water Level
Static water level: _____ 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"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--|--------|-------------------------------|--------------|
| | | <u>714027</u> | |
| | | <u>40.852432 PN</u> | |
| | | <u>118.743952 PW</u> | |

10. DRILLER'S CERTIFICATION

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

Name Hydro Resources-West, Inc.
Contractor
Address 4975 W. Winnemucca Blvd.
Contractor
Winnemucca NV, 89445

Nevada contractor's license number _____
issued by the State Contractor's Board 56797
Nevada driller's license number issued by the Division of Water Resources, the on-site driller # 1713

Signed Michelle Strother
By driller performing actual drilling on site or contractor
Date 11/14/2012

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY