

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

OFFICE USE ONLY
 Log No. 116.052
 Permit No. 79534T
 Basin 179

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. **70030**

1. OWNER **KGHM Robinson Mine** AGT-7P ADDRESS AT WELL LOCATION **Robinson Mine**
 MAILING ADDRESS **4232 West White Pine County Rd. 44** **Ruth, NV.**
Ruth, NV. 89319 Subdivision Name: _____ County: **White Pine**

2. LOCATION **NW¼NW¼ Sec14T16N/ R62E** Latitude _____ UTM E **675437** NAD 27
 PERMIT/WAIVER NO. **79534T** Longitude _____ N **4347003** NAD 83/WGS 84
 Issued by Water Resources Parcel No. _____

3. *Dewater* TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No Is there an existing well log? Yes No
 Domestic Irrigation Test Monitor Stock If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? UNKNOWN
 Municipal/Industrial

4. **EXISTING WELL CONSTRUCTION**
 Depth Drilled **470** Feet Depth Cased **470** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12.75	49.56	.375	0	20
10.5	34.24	.250	0	470

7. **WELL PLUGGING PROCEDURE**
 Was well cleaned out to total depth? Yes No
 If well was not cleaned out to total depth, please explain why: _____
 Was the well contaminated? Yes No
 Was the casing pulled? Yes No
 Was the casing over drilled? Yes No
 If casing was left in place, please show where additional perforations were made:
 Additional Perforations:
 Type of perforator used: **N/A**
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____

Existing Perforations:
 Type of perforation Knife
 Size of perforation .125
 From **0** feet to **470** feet
 From _____ feet to _____ feet

5. **WATER LEVEL**
 Static water level: **140** feet below land surface
 Artesian flow: **N/A** G.P.M. **N/A** P.S.I.
 Water Temperature: **N/A** °F Quality **N/A**

6. Additional Notes or Comments
There was no existing well report. I videoed the well, it was perforated top to bottom. No gravel pack.

Material used
Neat Cement 480 Cu. Ft.

8. **WELL PLUGGING MATERIALS**
 Material Used
 From **0** feet to **470** feet Pumped Poured
 From _____ feet to _____ feet Pumped Poured
 Neat Cement Fluid Weight **15.6** lbs/gal
 Bentonite Grout _____ % bentonite

Date Started **January 10, 2013**
 Date Completed **January 10, 2013**

9. **DRILLER'S CERTIFICATION**
 This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.
 Name **Boart Longyear** (CONTRACTOR)
 Address **2745 California Ave.** (CONTRACTOR)
SLC., UT. 84104
 Nevada contractor's license number issued by the State Contractor's Board **0021976**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2339**
 Signed _____
 By driller performing actual drilling on site or contractor
 Date **January 16, 2013**

RECEIVED
 2013 JAN 22 PM 1:17
 STATE ENGINEERS OFFICE

NAD 27
39.256500° N
114.966752° W