

ORIGINAL

Plugging

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

OFFICE USE ONLY

Log No. 116249
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. 69940

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

ADDRESS AT WELL LOCATION HYCROFT MINE
H10HR-022 - 4464
Subdivision Name: _____ County: Humboldt

2. LOCATION SE 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° 50.747 N UTM E NAD 27
Longitude 118° 44.505 W N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other Plugging

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
BLOW SAND		0'	10'	10'
CLAY		10'	40'	30'
GRAVEL		40'	50'	10'
CLAY		50'	110'	60'
GRAVEL		110'	120'	10'
CLAY		120'	160'	40'
GRAVEL		160'	170'	10'
CLAY		170'	180'	10'
GRAVEL		180'	190'	10'
CLAY		190'	220'	30'
GRAVEL		220'	240'	20'
CLAY WITH SAND LAYERS		240'	600'	360'

THE CLIENT (HYCROFT) IS STILL UNDECIDED ON WHAT THEY WANT TO DO.

ON 1/30/13 WE PLUGGED THE BOREHOLE TO STATE REGS. AND PUT A NEAT CEMENT CAP FROM 0'-20'.

9. WELL CONSTRUCTION				
Depth Drilled	600'	Feet	Depth Cased	0'
HOLE DIAMETER (BIT SIZE)				
	From	To		
	5 1/4"	0'	600'	Feet
	Inches	Feet	Feet	Feet
	Inches	Feet	Feet	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

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: 13-Oct, 20 12
Date completed: 14-Oct, 20 12

7. Water Level
Static water level: 200' feet below land surface
Artesian Flow: NO G.P.M. 0 P.S.I.
Water Temperature: N/A °F
Quality: _____

8. WELL TEST DATA			
TEST METHOD	<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	Draw Down (Feet Below Static)	Time (Hours)
<u>13 FEB - 4</u>	<u>G.P.M.</u>		<u>7:40:27</u>
			<u>40.845882°N</u>
			<u>118.740753°W</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 1/31/2013