

ORIGINAL

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

OFFICE USE ONLY
Log No. 116250
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. 70213

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

ADDRESS AT WELL LOCATION **HYCROFT MINE**
H10HR-013
Subdivision Name: _____ County: **Humboldt**

2 LOCATION **NE 1/4 NE 1/4 Sec 35 T 35N N/S R 29 E**
PERMIT/WAIVER No. **M/O-1639B** **001-581-01**
Issued by Water Resources Parcel No.

Latitude **40° 52.1079 N** UTM E NAD 27
Longitude **118° 41.5789 W** N NAD 83/WGS 84

3 TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

Is this well being plugged because a replacement well was drilled? **NO**
If yes, what is replacement well NOI? **N/A**

Is there an existing well log? **YES**
112541
If yes, what is NDWR well log #? **412644**

4 EXISTING WELL CONSTRUCTION
Depth Drilled **740'** Feet Depth Cased **736'** Feet

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: _____

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2 3/8"		FIBERGLASS	0'	736'

Was the well contaminated? yes no
Was the casing pulled? yes no
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	SCREEN
Size of perforation	0.015"
From 621' feet to 736' feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

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 _____
From _____	feet to _____	feet	Number of perfs per linear foot _____

5 WATER LEVEL
Static water level **630'** feet below land surface
Artesian flow **NO** G.P.M. **0** P.S.I.
Water temperature **WARM** °F Quality _____

8 WELL PLUGGING MATERIALS

6 Additional Notes or Comments

2013 FEB 14 PM 1:00
STATE ENGINEERS OFFICE

Plugs well log # 112541

NAD 27
40.868564° N
118.691986° W

From	feet to	feet	Material Used	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From 0'	feet to 736'	feet	NEAT CEMENT	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to _____	feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight **15 LBS** lbs/gal
Bentonite Grout **N/A** % bentonite
Date Started **1/31/2013**
Date Completed **1/31/2013**

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 **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 **# 2483**
Signed **Michele Strother**
By driller performing actual drilling on site or contractor
Date **1/31/2013**

(Rev. 06-04)

USE ADDITIONAL SHEETS IF NECESSARY