

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

OFFICE USE ONLY
Log No. 117818
Permit No. _____
Basin 048

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

RAN-01881

NOTICE OF INTENT NO. 68618 ✓

1. OWNER Newmont Mining Corp ADDRESS AT WELL LOCATION Emigrant
MAILING ADDRESS 1655 Mtn City Hwy
NE, NW Elko, Nevada 89801 Subdivision Name: _____ County: Elko

2. LOCATION 400 1/4 NW 1/4 Sec 35 T 32 N/S R 53 E Latitude _____ UTM E 526135 NAD 27
PERMIT/WAIVER No. 140-1857 Longitude _____ N 4196889 NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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	Thickness
<u>Mix Rock</u>		<u>0</u>	<u>20</u>	
<u>Black Rock</u>		<u>20</u>	<u>60</u>	
<u>Tan Rock</u>		<u>60</u>	<u>90</u>	
<u>Black Rock</u>		<u>90</u>	<u>100</u>	
<u>Fracture</u>		<u>110</u>	<u>120</u>	
<u>Black Rock</u>		<u>120</u>	<u>300</u>	
<u>Fracture</u>		<u>220</u>	<u>230</u>	
<u>Black Rock</u>		<u>230</u>	<u>390</u>	
<u>Fracture</u>		<u>300</u>	<u>305</u>	
<u>u u</u>		<u>300</u>	<u>305</u>	
<u>u u</u>		<u>370</u>	<u>390</u>	
<u>Pumped Cement Grout Bottoms up using 1/2 PVC 45 ft diam pipe</u>				

9. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)
From 6 Inches To 0 Feet 390 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1 1/2</u>			<u>0</u>	<u>390</u>

Perforations:
Type of perforation _____
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 10 to 0 Pumped Poured
 Cement Grout 390 to 30 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 30 to 10 Pumped Poured
Type: 3/8 clips

7. Water Level
Static water level: 161 feet below land surface
Artesian Flow: 0 G.P.M. 0 P.S.I.
Water Temperature: cool °F
Quality: muddy

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>390</u>	<u>15 min before well next day</u>	

10. DRILLER'S CERTIFICATION

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

Name Boart Longyear Nevada Contractor
Address PO Box 2748 Contractor
Elko, NV 89803

Nevada contractor's license number issued by the State Contractor's Board 0073086
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2400

Signed [Signature]
Date 4-8-12

RECEIVED
2012 APR 23 PM 1:28
STATE ENGINEERS OFFICE

NAD 27 40.620212° N, 115.978133° W