

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

OFFICE USE ONLY
Log No. 117915
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

1. OWNER Allied Gold Corp. ADDRESS AT WELL LOCATION Sulfur to Imlay NOTICE OF INTENT NO. 69783
MAILING ADDRESS 9790 Gateway Dr. Ste 200 Reno NV 89521 ISP-DH-05
Subdivision Name: _____ County: Pershing
2. LOCATION NE 1/4 NW 1/4 Sec 34 T 35 N R 29 E Latitude _____ UTM E 354638.25 NAD 27
PERMIT/WAIVER No. 1853 Longitude _____ N 4525599.20 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 Stock Monitor Municipal/Industrial
5. WELL TYPE Cable Rotary RVC Other Auger Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Sand, some clay</u>		<u>0</u>	<u>7</u>	<u>7</u>
<u>clay, some sand</u>		<u>7</u>	<u>13</u>	<u>6</u>
<u>clay, sandy hard</u>		<u>13</u>	<u>38</u>	<u>25</u>
<u>clay, some sand hard</u>		<u>38</u>	<u>47</u>	<u>9</u>
<u>clay, some sand hard</u>		<u>47</u>	<u>75</u>	<u>28</u>

9. WELL CONSTRUCTION
Depth Drilled 75 Feet Depth Cased 75 Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
8 Inches 0 Feet 7.5 Feet
Inches _____ Feet _____
Inches _____ Feet _____
CASING SCHEDULE
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)
2" _____ Sch 40 + 2 55

Perforations:
Type of perforation Factory mill slot
Size of perforation 0.10
From 55 feet to 75 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 20 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 53 to 75 Pumped Poured
Type: 8x16 Silica Sand
Bentonite Chips: Yes No 50 to 53 Pumped Poured
Type: 3/8 chips

Date started: 10-14, 20 12
Date completed: 10-24, 20 _____

7. Water Level
Static water level: 12.8 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"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name National EWP Contractor
Address 580 W. Silver St. Reno NV 89801 Contractor
Nevada contractor's license number _____
issued by the State Contractor's Board 0075355
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2111
Signed Jan Whitley
By driller performing actual drilling on-site or contractor
Date 10-28-12