STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 120119
Permit No.
Basin 176

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **70654**

1. OWNER **Barrick Bald Mountain Mine** **HD-2**
MAILING ADDRESS **P.O Box 2706**
Elko, NV. 89803

ADDRESS AT WELL LOCATION **Bald Mountain Mine, Bald Mountain, NV**
Subdivision Name: *County:* **White Pine**

2. LOCATION **SE¼SW¼** Sec**22**T**24**N/ R**57**E
PERMIT/WAIVER NO. **DW-103** (*Issued by Water Resources*) **R3D-14-07** (Parcel. No.)

Latitude
Longitude
UTM E **624315** ☒ NAD 27
N **4421436** ☐ NAD 83/WGS 84

3. WORK 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
Gray and Black Rock		0	200	200
Black Rock		200	300	100
Nad 27				
39.933987°N				
115.544185°W				
Hit Water @ 140'				

Date started: **April 24**, 20 **14**
Date completed: **April 26**, 20 **14**

9. *WELL CONSTRUCTION*
Depth Drilled **300** Feet Depth Cased **300** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
8.875 Inches	**0** Feet	**20** Feet
5.5 Inches	**20** Feet	**300** Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
1.900	.69	.200	+1	300

Perforations:
Type of perforation **Slotted**
Size of perforation **.020**
From **20** feet to **300** feet
From feet to 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 to ☐ Pumped ☐ Poured
Type:
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. *Water Level*
Static water level: **N/A** feet below land surface
Artesian Flow: **N/A** G.P.M. **N/A** P.S.I
Water Temperature: °F
Quality: **N/A**

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☒ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
7.5	N/A	N/A

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** (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* **2142**
Signed
By driller performing actual drilling on site or contractor
Date **May 1, 2014**

Forms Provided by Forms-On-A-Disk · (214) 340-9429 · FormsOnADisk.com