

OFFICE USE ONLY
 Log No. 31508-13
 Permit No. 4-61
 Basin 4-61
 NOTICE OF INTENT NO. 12402

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

1. OWNER NEWMONT MINING COMPANY ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 669
Carlin, NV 89822
 2. LOCATION SE 1/4 SE 1/4 Sec. 18 T 36 Q/S R. 50 E EUREKA County
 PERMIT NO. M/O-123 Issued by Water Resources Parcel No. _____ Subdivision Name _____
WAIVER

3. TYPE OF WORK
 New Well Recondition
 Deepen Other **Abandonment**

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock

5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
MW-6 (38')	# 31500			
Monitoring well had 38' of PVC casing in hole took out casing & filled hole with neat cement using grout pump & tremee pipe.				
B-20 (40')	# 31509			
Remove 1" PVC pipe from hole & fill with neat cement using grout pump & tremee pipe.				
TT-21 (2 holes (6' & 12'))	# 31510			
2" PVC pipe had cement seal around it. Filled holes with neat cement.				
MW-3 (81')	# 31511			
Remove 4" PVC casing from hole & fill with neat cement using grout pump & tremee pipe.				
MW-4 (58')	# 31512			
Remove the 4" PVC casing from hole & fill with neat cement using grout pump & tremee pipe.				
TB-18 (24')	# 31513			
Remove 2" PVC casing from hole & fill with neat cement using grout pump & tremee pipe.				

8. WELL CONSTRUCTION

Diameter _____ inches Total depth _____ feet
 _____ inches
 _____ inches

Casing record _____
 Weight per foot _____ Thickness _____

Diameter	From	To
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type _____
 Depth of seal _____ feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation _____
 Size perforation _____

From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level _____ feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name HACKWORTH DRILLING, INC.
 Address P.O. Box 850 Elko, NV 89801
 Nevada contractor's license number issued by the State Contractor's Board C2C582
 Nevada contractor's driller's number issued by the Division of Water Resources 1166
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 1166
 Signed Dale C. Vidler
 By driller performing actual drilling on site or contractor
 Date 4-3-89

Date started 3-20 19 89
 Date completed 3-20 19 89

7. WELL TEST DATA

Pump RPM	Draw Down	Flow	Hours Pump

BAILER TEST

G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours