WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 37178
Permit No.
Basin 4-51

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 13588

1. OWNER Newmont Gold Company
MAILING ADDRESS P.O. Box 669
Carlin, NV 89822

ADDRESS AT WELL LOCATION
CBN-1 Abandoned

2. LOCATION NW ¼ NE ¼ Sec. 22 T 34 N/S R. 51 E Eureka County
PERMIT NO. M/O-184 (Issued by Water Resources) | Parcel No. | Subdivision Name

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☐

4. PROPOSED USE (Monitor)
Domestic ☐ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Well was previously drilling in April, 1991				
Date.C = 4-16-91				
ABANDONMENT CBN-1				
Caved		500	492	8
19 yards cement				
pumped		492	0	492

JUL 25 '91 A10:48 STATE ENGINEER

Date started Abandonment 7-13, 1991
Date completed 7-16, 1991

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After 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

8. WELL CONSTRUCTION
Diameter 8 inches Total depth 500 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
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 95 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 Elsing Drilling & Pump Co., Inc. (Contractor)
Address P.O. Box 919 Twin Falls, ID 83303 (Contractor)
Nevada contractor's license number issued by the State Contractor's Board 0017177
Nevada contractor's driller's number issued by the Division of Water Resources 1295
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 945
Signed [signature] (By driller performing actual drilling on site or contractor)
Date July 23, 1991

(Rev. 11-85) USE ADDITIONAL SHEETS IF NECESSARY (O)-627