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. 3151
Permit No.
Basin 4-51

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 8893

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

ADDRESS AT WELL LOCATION
29WW 29-7?

2. LOCATION SE ¼ SW ¼ Sec. 29 T. 34 N/S R. 52 E Eureka County
PERMIT NO. M/O 184-H (Issued by Water Resources) | Parcel No. | Subdivision Name

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

4. PROPOSED USE
Domestic ☐ Irrigation ☐ Test ☒
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| Topsoil | | 0 | 2 | 2 |
| Gravel | | 2 | 12 | 10 |
| Sandy clay | | 12 | 95 | 83 |
| Sandy clay & gravel | x | 95 | 106 | 11 |
| Siltstone | | 106 | 240 | 134 |
| Sandy clay | x | 240 | 280 | 40 |
| Brown siltstone | | 280 | 405 | 125 |

91 DEC -2 PM 2:10
RECEIVED
STATE ENGINEER'S OFFICE

Date started 11-13, 19 91
Date completed 11-14, 19 91

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 6 inches Total depth 405 feet
..... inches
..... inches
Casing record Steel
Weight per foot .250 17# Thickness

| Diameter | From | To |
|---|---|---|
| 6 inches | +2 feet | 405 feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |

Surface seal: Yes ☒ No ☐ Type Cement
Depth of seal 55 feet
Gravel packed: Yes ☐ No ☒
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation Factory
Size perforation 1/8 x 3/16
From 55 feet to 405 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 100 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 83303-0919 (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 Arnold Elsing
By driller performing actual drilling on site or contractor
Date November 26, 1991

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