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. 64998
Permit No.
Basin 0351

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 14719

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

ADDRESS AT WELL LOCATION Newmont Gold Quarry
LK 15-1

2. LOCATION NW ¼ NE ¼ Sec. 2 T. 33 N/S R. 51 E. Eureka County
PERMIT NO. 61859T (Issued by Water Resources) Parcel No. Subdivision Name

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

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

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| Alluvium | | 0 | 5 | 5 |
| Carlin Formation | | 5 | 30 | 25 |
| Brn Clays | | 30 | 80 | 50 |
| Tan Brn Silts | | 80 | 180 | 100 |
| Tertiary brn | | 180 | 310 | 130 |
| Brn Faults | 25 | 310 | 318 | 8 |
| Brn Carlin | | 318 | 400 | 82 |

Date started ....., 19....
Date completed ....., 19....

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 12 1/4 inches Total depth 400' feet
..... inches
..... inches
Casing record 8 5/8
Weight per foot 22.36 Thickness 250

| Diameter | From | To |
|---|---|---|
| 14 inches | 0 feet | 50 feet |
| 8 inches | 400 feet | 0 feet |
| ..... inches | ..... feet | ..... feet |
| ..... inches | ..... feet | ..... feet |
| ..... inches | ..... feet | ..... feet |
| ..... inches | ..... feet | ..... feet |

Surface seal: Yes ☒ No ☐ Type Neat Cement
Depth of seal 50' feet
Gravel packed: Yes ☒ No ☐
Gravel packed from 400 feet to 50 feet

Perforations:
Type perforation Slots
Size perforation 3/16
From 400 feet to 100 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 320 feet below land surface
Flow 25 G.P.M. 8 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 Staco Well Services (Contractor)
Address 220 Academy St Mt Angel OR (Contractor)
Nevada contractor's license number issued by the State Contractor's Board 0038169
Nevada contractor's driller's number issued by the Division of Water Resources .....
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1670
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 11-1-96

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