

OFFICE USE ONLY
 Log No. 71693
 Permit No. 61
 Basin. 61
 NOTICE OF INTENT NO. 37518

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

1. OWNER Newmont Gold Co.
 MAILING ADDRESS P.O. Box 669
Carlin, NV 89822
 ADDRESS AT WELL LOCATION Newmont North Area NL-8B
 2. LOCATION NW 1/4 SW 1/4 Sec 33 T 36N N/S R 50 E Eureka County
 PERMIT NO. NE Tract of Land Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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	Thick-ness
Top Soil		0	5	5
Black Brown Rosk		5	30	25
Rock & Clay		30	45	15
Brown Clay		45	55	10
Rock Clay Mix		55	60	5
Black Rosk/Brown Clay		60	70	10
Black Rock		70	80	10
Black Rock/Clay Mix		80	175	95
Black Rock Some Gravel		175	220	45
Gravel	XX	220	260	40

N 40.954261
W 116.329806 NAD27

Drill to 260', set Sch. 80
 4 1/2 pvc. 5' blank on bottom
 20' of screen and the rest
 blank; sand in to 220'; put
 bucket of bentonite pellets
 down hole & pump bentonite
 slurry from 220' to 10' of
 surface; 10' cement seal with
 6" monument & 4 foot cement pad

8. WELL CONSTRUCTION
 Depth Drilled 260 Feet Depth Cased 260 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 1/2 Inches To 0 Feet 260 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4 1/2	pvc	Sch 80	+3	255
4 1/2	pvc	Screen	255	260

Perforations: Mill Slot
 Type perforation _____
 Size perforation .020
 From 255 feet to 255 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 10 Neat Cement
 Placement Method: Pumped Cement Grout
 Sand Poured Concrete Grout
 Gravel Packed: Yes No
 From 220 feet to 260 feet

9. WATER LEVEL
 Static water level 184 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started May 5, 1998
 Date completed May 6, 1998

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>8</u>	<u>3 1/2</u>

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. Contractor
 Address P. O. Box 850 Contractor
Elko, NV 89803
 Nevada contractor's license number 020582
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1395
 Division of Water Resources, the on-site driller
 Signed George M. Adkins
 By driller performing actual drilling on site or contractor
 Date 5/7/98