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

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 74797
Permit No.
Basin 66

NOTICE OF INTENT NO. 39815

1. OWNER Newmont Gold Co
MAILING ADDRESS PO Box 69 Golconda NV
ADDRESS AT WELL LOCATION 35 mi NE OF Golconda NV

2. LOCATION NW ¼ NE ¼ Sec. 18 T. 39 N/S R. 43 E. Humboldt County
PERMIT NO. M/D-473-A (Issued by Water Resources) | 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	Thickness
Ran well sounder, area has been dewatered, Dry monitor				
Poured Granulated bentonite down pvc pipe to 50', poured Neat Cement to surface				

RECEIVED
99 JAN 22 AM 10:18
STATE ENGINEER'S OFFICE

Date started 11-6, 1998
Date completed 11-6, 1998

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased 450 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
____ Inches	____ Feet	____ Feet
____ Inches	____ Feet	____ Feet
____ Inches	____ Feet	____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
1" Sched 40 PVC			0	450'

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

Surface Seal: ☒ Yes ☐ No
Depth of Seal 50
Placement Method: ☐ Pumped ☒ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level Dry hole feet below land surface
Artesian 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 Rockwell Drilling LLC (Contractor)
Address PO Box 6000 Elko NV. (Contractor)

Nevada contractor's license number issued by the State Contractor's Board 46949
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 11-10-98

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627