

Log No. 77231  
 Permit No. \_\_\_\_\_  
 Basin G1

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

NOTICE OF INTENT NO. 30189  
Genesis Pit

1. OWNER Newmont Gold Co ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS P.O. Box 669 \_\_\_\_\_  
Carlin Nevada 89822 \_\_\_\_\_  
 2. LOCATION SE 1/4 SE 1/4 Sec. 31 T. 36 N S R. 50 E Eureka County \_\_\_\_\_  
 PERMIT NO. No active permit this location Issued by Water Resources Parcel No. \_\_\_\_\_  
 Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE  
 Domestic  Municipal  Industrial  Irrigation  Test  Monitor  Stock

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Pumped Cement in between 16" casing and 12" casing</u>				
<u>Started cleaning out 12" casing at 20' to 120'</u>				
<u>Had open hole from 120' to 620' cleaned out to 680' pumped cement at 682 to 680'</u>				
<u>Developed well as tripped RC pipe out <del>to 680'</del></u>				
<u>Reconditioning of log #</u>				

8. WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased 680' 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)
<u>16"</u>		<u>1/2" wall</u>	<u>+2</u>	<u>20'</u>
<u>12"</u>		<u>1/2" wall</u>	<u>+2</u>	<u>680'</u>

Perforations:  
 Type perforation Louverd  
 Size perforation 1/8" X 2-1/2"  
 From 242' feet to 680' feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 20'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 130' feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cool °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 Eklund Drilling Co. Contractor  
 Address P.O. Box 2748 Contractor  
Elko Nevada 89803  
 Nevada contractor's license number issued by the State Contractor's Board 0030823  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1786  
 Signed Craig Dines  
 By Driller performing actual drilling on site or contractor  
 Date 4-29-99

Date started 4-29-99 19 99  
 Date completed 4-29-99 19 99

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input checked="" type="checkbox"/> Air Lift			
	<u>140</u>	<u>5</u>	<u>5 min.</u>
	<u>200</u>	<u>10</u>	<u>5 min.</u>
	<u>300</u>	<u>20</u>	<u>5 min.</u>
	<u>400</u>	<u>35</u>	<u>5 min.</u>
	<u>500</u>	<u>50</u>	<u>5 min.</u>
	<u>600</u>	<u>70</u>	<u>5 min.</u>
	<u>680</u>	<u>70</u>	<u>5 min.</u>