

SDW-7  
 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. 44758

1. OWNER Round Mountain Gold Corp. ADDRESS AT WELL LOCATION Round Mountain  
 MAILING ADDRESS P.O. Box 480 Gold Corporation Pit  
Round Mountain Nevada 89045

2. LOCATION SE 1/4 NE 1/4 Sec. 30 T. 10 S R. 44 E Nye County

PERMIT NO. \_\_\_\_\_ 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	Thick-ness
<u>Tuff</u>		<u>0</u>	<u>300'</u>	<u>300'</u>
<u>Cement</u>		<u>0</u>	<u>10'</u>	<u>10'</u>
<u>3/8 Hole Plug</u>		<u>10'</u>	<u>11'</u>	<u>1'</u>
<u>#8 Sand Pack</u>		<u>11'</u>	<u>157'4"</u>	<u>156'4"</u>
<u>3/8" Hole Plug</u>		<u>157'4"</u>	<u>237'</u>	<u>80'</u>
<u>Abandonite</u>		<u>237'</u>	<u>300'</u>	<u>63'</u>

8. WELL CONSTRUCTION  
 Depth Drilled 300' Feet Depth Cased 157'4" Feet

HOLE DIAMETER (BIT SIZE)  
 From 14" Inches To 10 Feet  
8.750 Inches 10 Feet 300 Feet  
 Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10 5/8</u>		<u>3/8 Wall</u>	<u>0</u>	<u>10</u>
<u>4"</u>		<u>SCH 40</u>	<u>+1</u>	<u>157'4"</u>

Perforations:  
 Type perforation Hot 2 Slot  
 Size perforation 0.020  
 From 19'4" feet to 157'4" feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 10'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From 10' feet to 157'4" feet

9. WATER LEVEL  
 Static water level 70.1 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality Clean

Date started 6-6-2000  
 Date completed 6-7-2000

7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>100'</u>	<u>Less than 1 GPM</u>		
<u>157'</u>	<u>Less than 1 GPM</u>		

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Ekland 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 6-7-2000