

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 83889  
 Permit No. 53715  
 Basin 61

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **38360**

1. OWNER Barrick Goldstrike Mines DW-6 ADDRESS AT WELL LOCATION Barrick Goldstrike  
 MAILING ADDRESS P.O. Box 29 Minesite, north of Carlin, NV.  
Elko, NV 89803  
 2. LOCATION SE 1/4 SW 1/4 Sec. 3 T 36N N/S R 49E E Eureka County  
 PERMIT NO. 53715 issued by Water Resources Parcel No. N/A Subdivision Name N/A

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
Well abandoned per procedure discussed with DWR.				
12" casing perforated from 460' to 580', eight passes with perforator. Pumped abantonite, then poured hole plug to 580', pumped neat cement 580'-478', poured hole plug to 9', neat cement to surface.				
Quantities Used: Cement: 41 cu.ft. Hole plug: 360 cu.ft. Cement: 124 cu.ft. Hole plug: 876 cu.ft. Abantonite: 356 cu.ft.				

8. WELL CONSTRUCTION

Depth Drilled 1739 Feet Depth Cased 1708 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
35 Inches	0 Feet	37 Feet
25 Inches	37 Feet	464 Feet
19 Inches	464 Feet	1739 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
26	103	0.375	0	37
20	79	0.375	0	464
12	33	0.250	0	1708

Perforations:

Type perforation Louvered  
 Size perforation 0.125

From	To
1308 feet	1708 feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 464'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From 30 feet to 1708 feet

9. WATER LEVEL

Static water level Dry 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 Lang Exploratory Drilling  
 Contractor \_\_\_\_\_

Date started 5/30/2001, 19  
 Date completed 6/1/2001, 19

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	

Address P.O. Box 5279 Contractor \_\_\_\_\_

Elko, NV 89802-5279

Nevada contractor's license number issued by the State Contractor's Board 0021976

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2095

Signed \_\_\_\_\_ By driller performing actual drilling on-site or contractor  
 Date 6/5/01

B.S.T.A