

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

OFFICE USE ONLY
 Log No. 84786
 Permit No. _____
 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. 47557

1. OWNER **Barrick Goldstrike Mines PZ01-02**
 MAILING ADDRESS **P.O. Box 29**
Elko, NV 89803

ADDRESS AT WELL LOCATION **Barrick Goldstrike**
minesite, north of Carlin, NV.

2. LOCATION **NW 1/4 SE 1/4 Sec. 19 T 36N**
 PERMIT NO. **N/A** Issued by Water Resources
N/A Parcel No.

N/S R **50E** E **Eureka** County
N/A Subdivision Name

3. WORK PERFORMED
 New Well
 Replace
 Recondition
 Deepen
 Abandon
 Other

4. PROPOSED USE
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Test
 Stock

5. WELL TYPE
 Cable
 Rotary
 RVC
 Air
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Abandoned by pumping both tubes full of neat cement from T.D. to surface:				
Neat Cement Used:				
#1: 27.7 cu.ft.				
#2: 14.8 cu.ft.				
Construction Detail:				
Cement		0	50	50
Hole plug		50	405	355
Cement		405	425	20
Hole plug		425	435	10
Gravel pack		435	485	50
Hole plug		485	651	166
Cement		651	664	13
Hole plug		664	675	11
Gravel pack		675	720	45
Cement		720	800	80

8. WELL CONSTRUCTION

Depth Drilled **800** Feet Depth Cased **719** Feet

HOLE DIAMETER (BIT SIZE)

From		To	
19 Inches	0 Feet	70 Feet	
7.875 Inches	70 Feet	740 Feet	
6.375 Inches	740 Feet	800 Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
13.375	68.75	0.500	0	70
1: 2.383	5.02	Sch. 80	+1	719
2: 2.383	5.02	Sch. 80	+1	479

Perforations:
 Type perforation **Slot**
 Size perforation **0.125"**

From	To	feet to	feet
1: 679	719		
2: 439	479		

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 **See Detail** feet to _____ feet

9. WATER LEVEL
 Static water level **1: no reading 2: 470** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **10/9/2001**, 19
 Date completed **10/9/2001**, 19

7. WELL TEST DATA

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

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
 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 **2084**
 Signed **Vince Hardie**
 By driller performing actual drilling on-site or contractor
 Date **10/16/01**

BSTC