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. 85008
Permit No.
Basin 165

NOTICE OF INTENT NO. 47337

1. OWNER Newmont Gold Co
MAILING ADDRESS P. O. Box 669 Carlin, NV 89822
ADDRESS AT WELL LOCATION Lone Tree mine

2. LOCATION SE ¼ NW ¼ Sec. 15 T. 34 N/S R. 42 E Humboldt County
PERMIT NO. (Issued by Water Resources) m/o 15-4 (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 |
|---|---|---|---|---|
| | | | | |

Date started 7-10-01, 2001
Date completed 7-10, 2001

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 800' Feet

HOLE DIAMETER (BIT SIZE)

| | From | To |
|---|---|---|
| Inches | +1 Feet | 800' Feet |
| Inches | Feet | Feet |
| Inches | Feet | Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 2 1/2 | | Sch 80 | +1 | 800' |
| | | | | |
| | | | | |

Perforations:
Type perforation .020 slot
Size perforation .020
From 780 feet to 800 Slot feet
From 780 feet to +1 Blank feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 800'
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 ____ 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 Eklund drilling Co (Contractor)
Address 605 Union Pacific way (Contractor)
Elko, NV 89801
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 M-1971
Signed Dave Johnson (By driller performing actual drilling on site or contractor)
Date 7-10-01

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