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. 85458
Permit No.
Basin 660

NOTICE OF INTENT NO. 42203

1. OWNER Newmont Gold Co
MAILING ADDRESS P.O. Box 69 Golconda NV
ADDRESS AT WELL LOCATION Twin Creeks Mine

2. LOCATION NW ¼ SW ¼ Sec. 19 T. 39 ☒S R. 43 E Humboldt 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	Thickness
Raw Trimmy Line to bottom				
pumped Abentonite slurry to				
20' cemented top				

8. WELL CONSTRUCTION
Depth Drilled 1000 Feet Depth Cased 960' 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)
2½	sch 80	PVC	0	960'

Perforations:
Type perforation 2½ sch 80 PVC Screen
Size perforation 0.020
From 900 feet to 940 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal
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 HARD ROCK Exploration (Contractor)
Address 1000 Barrington Ave (Contractor)
Elko NV 89801
Nevada contractor's license number issued by the State Contractor's Board 0048915
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1670
Signed (By driller performing actual drilling on site or contractor)
Date 12-10-01

Date started 12-10 2001
Date completed 12-10 2001

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 3-91) (O)-627