

Log No. 90652  
 Permit No. \_\_\_\_\_  
 Basin 061

**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. 51524

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

1. OWNER Glamis Gold, Inc. TB-73 ADDRESS AT WELL LOCATION Dee Gold minesite, 35 miles north of Carlin, NV.  
 MAILING ADDRESS P.O. Box 160  
Valmy, NV 89438

2. LOCATION NE 1/4 SW 1/4 Sec. 10 T 36N N/S R 49 E Elko County  
 PERMIT NO. R-271 Issued by Water Resources  
N/A Parcel No.  
N/A 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
<b>No original well driller's report was available; construction data are from the client.</b>				
<b>Abandoned by pouring hole plug to 5' and capped with neat cement.</b>				
<b>Quantities Used:</b>				
<b>Cement: 0.11 cu.ft.</b>				
<b>Hole plug: 1.73 cu.ft.</b>				

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 OCT - 2 AM 11:40  
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased 70 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>			<u>0</u>	<u>70</u>

Perforations:  
 Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_

From	feet to	feet
_____	<u>60</u>	<u>70</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 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  
 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 2254  
 Signed Daryl Langman  
 By driller performing actual drilling on-site or contractor  
 Date 9/12/03

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			

B.S.T.L