

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

OFFICE USE ONLY
 Log No. 90707
 Permit No. _____
 Basin 061

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. **48595**

1. OWNER **Barrick Goldstrike Mines PZM-94-17** ADDRESS AT WELL LOCATION **Barrick Goldstrike minesite, north of Carlin, NV.**
 MAILING ADDRESS **P.O. Box 29 Elko, NV 89803**

2. LOCATION **SW 1/4 SE 1/4 Sec. 12 T 36N N/S R 50E E Eureka** County
 PERMIT NO. **M/O-565** Parcel No. **N/A** Subdivision Name **N/A**
Issued by Water Resources

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
Abandoned by pumping both tubes full of cement.				
Quantities Used:				
1: 59.6 cu.ft.				
2: 46.6 cu.ft.				
Original Construction Detail:				
Cement		0	60	
Hole plug		60	1045	
Gravel pack		1045	1130	
Hole plug		1130	1315	
Gravel pack		1315	1425	

8. WELL CONSTRUCTION

Depth Drilled **1425** Feet Depth Cased **1406** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
12.25	0	18		
6.75	18	1425		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
7	28	0.375	0	18
1: 2	2.25	Sch. 80	0	1406
2: 2	2.25	Sch. 80	0	1109

Perforations:
 Type perforation **Slot**
 Size perforation **2" X 0.125"**

From	To	Feet	Feet
1: 1346	1406		
2: 1049	1109		

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal **59'** Cement Grout
 Placement Method: Pumped Poured Concrete Grout

Gravel Packed: Yes No
 From **1: 1315 - 1425** feet to **2: 1045 - 1130** feet

Date started **6/20/2003**, 19____
 Date completed **6/20/2003**, 19____

7. WELL TEST DATA

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

9. WATER LEVEL

Static water level **1: 859 2: 852** 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 **1410**
 Signed *John Viergutz*
 By driller performing actual drilling on-site or contractor
 Date **6/26/03**

B.S.T.L