

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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. 51824 RC  
51832

1. OWNER Newmont Mining ADDRESS AT WELL LOCATION Twain Creeks Mine  
 MAILING ADDRESS P.O. Box 388  
Walsley, NV 89438 Elko County

2. LOCATION NW 1/4 SE 1/4 Sec. 13 T. 39 S R. 43 E Elko County

PERMIT NO. M/O 918 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
<u>Hole # M/O 394313-18</u>				
<u>ALLUVIUM</u>		<u>0</u>	<u>20</u>	<u>20</u>
<u>CLAY SHALE</u>		<u>20</u>	<u>60</u>	<u>40</u>
<u>CLAY</u>		<u>60</u>	<u>150</u>	<u>90</u>
<u>SANDSTONE</u>		<u>150</u>	<u>225</u>	<u>75</u>
<u>LIMESTONE</u>		<u>225</u>	<u>250</u>	<u>25</u>
<u>BLACK LIMESTONE</u>		<u>250</u>	<u>485</u>	<u>235</u>
		<u>485</u>	<u>545</u>	<u>60</u>

8. WELL CONSTRUCTION  
 Depth Drilled 545 Feet Depth Cased 538 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>10</u>	<u>0</u>	<u>20</u>	<u>20</u>
<u>6</u>	<u>20</u>	<u>545</u>	<u>545</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6"</u>		<u>156 wall</u>	<u>+2</u>	<u>18</u>
<u>2"</u>		<u>Sch. 40</u>	<u>+2</u>	<u>538</u>

Perforations:  
 Type perforation: Horizontal  
 Size perforation: 020  
 From 538 feet to 518 BLANK feet  
 From 518 feet to 438 SCREEN feet  
 From 438 feet to +2 BLANK feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal: 50

Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From 545 feet to 418 feet

9. WATER LEVEL  
 Static water level: 413.4 feet below land surface  
 Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature: \_\_\_\_\_ °F Quality: \_\_\_\_\_

Date started: 12-4 2003  
 Date completed: 12-5 2003

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 checked="" type="checkbox"/> Air Lift	<u>6</u>	<u>N/A</u>	<u>30 MIN</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name: Ekland Drilling Co., Inc. Contractor  
 Address: P.O. Box 2748 Contractor  
Elko, NV 89803  
 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: 1942  
 Signed: William Kelly  
 By driller performing actual drilling on site or contractor  
 Date: 12-6-03