

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

OFFICE USE ONLY
 Log No. 91992
 Permit No. _____
 Basis 137B

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. 48596

1. OWNER Round Mountain Gold Corp. DW-39 ADDRESS AT WELL LOCATION Round Mountain Gold minesite, southwest of Round Mountain, NV.
 MAILING ADDRESS P.O. Box 480 Round Mountain, NV 89045

2. LOCATION NW 1/4 NE 1/4 Sec. 25 T 10N N/S R 43E E Nye County
 PERMIT NO. 69668-T 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 Monitor Stock Municipal/Industrial

5. WELL TYPE
 Cable Rotary RVC Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown, gray and white alluvial gravel		0	275	275
Brownish rock with clay		275	280	5
Brown, gray and white alluvial gravel		280	400	120
Brown clay and gravel		400	560	160
Multi-colored gravel		560	675	115
Brown clay and gravel		675	685	10
Multi-colored gravel		685	705	20
Brown clay and gravel		705	940	235
Red clay		940	950	10
Bluish-gray clay		950	970	20
Cement		0	50	
Hole plug		50	456	
Gravel pack		456	938	
Hole caved in		938	970	

8. WELL CONSTRUCTION
 Depth Drilled 970 Feet Depth Cased 937.59 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
26	0	25
19	25	970

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
22	86.61	0.375	0	25
12.75	33.38	0.250	+2	937.59

Perforations:
 Type perforation Wire Wrap
 Size perforation 0.080"

From	To
<u>477.29</u> feet to	<u>937.59</u> feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ 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 456 feet to 970 feet

9. WATER LEVEL
 Static water level 453.8 feet below land surface
 Artesian flow N/A G.P.M. _____ P.S.I. _____
 Water temperature 110 °F Quality Fair

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 2143
 Signed Brant Bowen
 By driller performing actual drilling on-site or contractor
 Date 7/1/03

Date started 6/5/2003, 19____
 Date completed 6/15/2003, 19____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>273.6</u>	<u>0</u>	<u>0.25</u>

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 STATE ENGINEERS OFFICE

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