

OFFICE USE ONLY
 Log No. 92945
 Permit No. _____
 Basin 66



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. 12519

1. OWNER Newmont Gold Corp. ADDRESS AT WELL LOCATION TWIN CREEKS Mine
 MAILING ADDRESS PO Box 388
Valmy, NV. 89438

2. LOCATION NE 1/4 SE 1/4 Sec 30 T 39 N 43 E Humboldt County
 PERMIT NO. M10-30-26A 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	Thick-ness
<u>Brn Clay / Aluvium</u>		<u>0</u>	<u>710</u>	<u>710</u>
<u>Red/Brn Clay</u>		<u>710</u>	<u>750</u>	<u>40</u>
<u>Green Bedrock</u>		<u>750</u>	<u>760</u>	<u>10</u>
<u>Green/Brn Rock</u>		<u>760</u>	<u>800</u>	<u>40</u>

Materials:
10" Gen Sp. Yls. Gr
110" 50lb. Bag Kwik Plug Me
5.3" 94lb. Bags Cement
6" 50lb. Bag W-60

Dual Completion

8. WELL CONSTRUCTION
 Depth Drilled 800 Feet Depth Cased 800 Feet

HOLE DIAMETER (BIT SIZE)
 From To
14 3/4 Inches 0 Feet 40 Feet
10 Inches 40 Feet 800 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1 1/2</u>	<u>Nominal</u>	<u>5-80</u>	<u>0</u>	<u>800</u>
<u>4"</u>	<u>Nominal</u>	<u>5-80</u>	<u>0</u>	<u>800</u>

Perforations:
 Type perforation slot
 Size perforation 0.020
 From (1 1/2") 520 feet to 780 feet
 From (4") 300 feet to 620 feet
 From (4") 720 feet to 780 feet

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

Depth of Seal 50ft

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 210 feet to 800 feet

9. WATER LEVEL
 Static water level 180ft feet below land surface
 Artesian flow N/A G.P.M. P.S.I.
 Water temperature _____ °F Quality _____

Date started Feb. 23, 2004, 20
 Date completed MARCH 06, 2004, 20

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>TD.</u>	<u>140</u>		

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

Name Eklund Drilling Contractor
 Address PO Box 89823 2748 Contractor
ETKO, 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 M-2260

Signed [Signature] By driller performing actual drilling on site or contractor
 Date 3-6-04