

OFFICE USE ONLY
 Log No. 73746
 Permit No. _____
 Basin 66

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 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. 52074

1. OWNER Newmont Gold Mining Corp ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 389 Valley, NV 89438 Twin Creeks Mine
 2. LOCATION SE 1/4 SE 1/4 Sec. 30 T. 39 N. S. R. 43 E Humboldt County
 PERMIT NO. _____ 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>Alluvium - Sand</u>		<u>0</u>	<u>600</u>	<u>600</u>
<u>Gravel Clays</u>				
<u>Gravel Zones making</u>		<u>300</u>	<u>600</u>	
<u>Water</u>				
<u>216 - 50th Bags #8 Sand</u>		<u>217</u>	<u>600</u>	<u>383</u>
<u>53 - 50th Bags 3/8" Hds plug</u>		<u>50</u>	<u>217</u>	<u>167</u>
<u>18 - 94th Bags Cement</u>		<u>+2</u>	<u>50</u>	<u>52</u>

8. WELL CONSTRUCTION 600
 Depth Drilled 600 Feet Depth Cased 500 Feet
 HOLE DIAMETER (BIT SIZE)
 From 1 1/2 Inches To 40 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>		<u>1/4</u>	<u>+2</u>	<u>40</u>
<u>2" sch 80 pvc</u>			<u>560</u>	<u>600</u>
<u>2" sch 80 pvc</u>			<u>+2</u>	<u>200</u>

Perforations:
 Type perforation Half slot
 Size perforation 0.20
 From 220 feet to 560 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 217 feet to 600 feet

9. WATER LEVEL
 Static water level 208 feet below land surface
 Artesian flow N/A G.P.M. _____ P.S.I. _____
 Water temperature Cold °F Quality N/A

Date started July 15, 2004
 Date completed July 24, 2004

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>10</u>	<u>N/A</u>	<u>7</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
 Address P.O. Box 2748
Elko Nevada 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 1879
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 7-24-04

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