

OFFICE USE ONLY
 Log No. 74458
 Permit No. _____
 Basin. 066

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. 53853

1. OWNER Newmont Mining Co. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 388 _____
Valley, NV 89438 _____
 2. LOCATION S42 1/4 SE 1/4 Sec. 29 T. 39 N. 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 - Gravel</u>		<u>0</u>	<u>400</u>	<u>400</u>
<u>Sands Brown + Black</u>				
<u>5-250# Bags Sand</u>		<u>78</u>	<u>400</u>	<u>322</u>
<u>30-50# Bags 7/8 Hole Peg</u>		<u>78</u>	<u>50</u>	<u>28</u>
<u>15-90# Bags Cement</u>		<u>+2</u>	<u>50</u>	<u>52</u>

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 400 Feet
 HOLE DIAMETER (BIT SIZE)
 From 14 1/2 inches To 40 Feet
3/4 inches 40 Feet 400 Feet
 _____ inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10</u>		<u>1/4</u>	<u>+2</u>	<u>45</u>
<u>4"</u>	<u>Blank</u>	<u>1/4</u>	<u>380</u>	<u>400</u>
<u>4"</u>	<u>Blank</u>	<u>1/4</u>	<u>+2</u>	<u>80</u>

Perforations:
 Type perforation vertical mill slot
 Size perforation 1/16
 From 80 feet to 380 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 70 feet to 400 feet

9. WATER LEVEL
 Static water level 85 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 9-11-2004
 Date completed 9-15-2004

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 type="checkbox"/> Air Lift	<u>50</u>	<u>N/A</u>	<u>8 hrs</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 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 1879
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 9-15-04

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 SEP 27 11:11 08
 DIVISION OF WATER RESOURCES OFFICE