

OFFICE USE ONLY
 Log No. 94461
 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. 51850

1. OWNER Newmont Mining Corp ADDRESS AT WELL LOCATION Twin Creeks mine
 MAILING ADDRESS P.O. Box 388
Valmy, NV 89438
 2. LOCATION SW 1/4 SW 1/4 Sec. 29 T. 39 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	Thickness
Alluvium Red + Brown sand + Gravel	70 GPM	0	500	500
Clay white Brown Grey			500	680
Grey + Brown sand + Gravel	60 GPM	620	740	740
Hole Caved in		700	740	40
1-2500 [#] Sack 1/4 gravel		618	700	82
15-94 [#] Bags Cement		500	618	118
5-2500 [#] Bags 1/4 gravel		158	500	342
50-50 [#] Bags 3/8 Hole Plug		50	158	108
15-94 [#] Bags Cement		72	50	52

8. WELL CONSTRUCTION
 Depth Drilled 740 Feet Depth Cased 700 Feet
 HOLE DIAMETER (BIT SIZE)
 From 14 3/4 Inches 0 Feet 60 Feet
8 3/4 Inches 60 Feet 740 Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
10		3/16	+2	60
4	11.3	1/4	+2	160
4	11.3	1/4	480	620
4	11.3	1/4	680	700

Perforations: 11-3
 Type perforation Vertical Fac. Slot
 Size perforation 3/32
 From 160 feet to 480 feet
 From 620 feet to 680 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 618 feet to 680 feet
 From 158 feet to 480-500 feet

9. WATER LEVEL
 Static water level 149 feet below land surface
 Artesian flow N/A G.P.M. _____ P.S.I. _____
 Water temperature _____ °F Quality N/A

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 Co Inc Contractor
 Address P.O. Box 2748 Contractor
Elko Nevada 89803
 Nevada contractor's license number issued by the State Contractor's Board 0030923
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1879
 Signed B. Chap
 By driller performing actual drilling on site or contractor
 Date 8-31-04

Date started Aug 23, 2004
 Date completed Aug 31, 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>30</u>	<u>N/A</u>	<u>15</u>

CLOSED - 3 AUG 31 2004
 DIVISION OF WATER RESOURCES OFFICE