

Log No. 95943
Permit No. _____
Basin 066

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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.325

NOTICE OF INTENT NO. 5336

1. OWNER NEWMONT MINING CORP ADDRESS AT WELL LOCATION TWINCREEK'S MINE
MAILING ADDRESS PO BOX 69 GOLCONDA NV 89414

2. LOCATION SE 1/4 SE 1/4 Sec 30 T 39 N/S R 43 E Humboldt County
PERMIT NO. 60049 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
ALLUVIAL		0	320	320
GRAVEL SOME CLAY		80	450	130
CLAY - BLACK ROCK		10	560	110
BLACK ROCK		120	680	120

8. WELL CONSTRUCTION
Depth Drilled 680 Feet Depth Cased 665 Feet

HOLE DIAMETER (BIT SIZE)
From _____ To _____
30 Inches 0 Feet 55 Feet
19 Inches 55 Feet 680 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12</u>		<u>0.250</u>	<u>0</u>	<u>20</u>

Perforations:
Type perforation Lowered
Size perforation 1 1/2
From 200 feet to 600 feet
From 0 feet to 200 BLANK feet
From 600 feet to 665 BLANK feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal 55 Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
From 180 feet to 650 feet

9. WATER LEVEL
Static water level 195 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name WDE Exploration + Wells Contractor
Address 580 W. Silver St Contractor
Elko, Nv. 89801
Nevada contractor's license number issued by the State Contractor's Board 0012852
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2111-T1
Signed [Signature]
By driller performing actual drilling on site or contractor
Date Sept 30, 04

Date started 9-13, 2004
Date completed 9-30, 2004

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>50</u>	<u>200</u>	<u>8</u>

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05/20/09
STATE BUSINESS OFFICE