



Log No. 96590
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. 53885

1. OWNER Newmont Twin Creeks mine ADDRESS AT WELL LOCATION MO 30-31-AB
MAILING ADDRESS _____
2. LOCATION NW 1/4 SE 1/4 Sec. 30 T. 32S R. 43 E Humboldt County
PERMIT NO. 60047 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</u>		<u>0</u>	<u>280</u>	<u>280</u>
<u>bed rock</u>		<u>280</u>	<u>500</u>	<u>220</u>
<u>bed clay</u>		<u>500</u>	<u>620</u>	<u>120</u>
<u>gray bed rock</u>		<u>620</u>	<u>1240</u>	<u>620</u>
<u>3/8 bentonite chips</u>		<u>840</u>	<u>60</u>	

8. WELL CONSTRUCTION
Depth Drilled 1240 Feet Depth Cased 1240 Feet
HOLE DIAMETER (BIT SIZE)
From 8" To 0"
Inches 0 Feet 1240 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>		<u>1/8</u>	<u>0</u>	<u>1240</u>

Perforations:
Type perforation vertical
Size perforation _____
From 380 feet to 1240 feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal 60 Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From 840 feet to 1240 feet

9. WATER LEVEL
Static water level 250 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started 12-1, 2004
Date completed 1-27, 2005

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name E Klund Drilling Co. Contractor
Address PO Box 2784 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 1776-T1
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 12-1-04

RECEIVED
05 APR 25 AM 11:47
STATE ENGINEERS OFFICE