

Log No. 96999
 Permit No. _____
 Basin 137B

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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. 55158

1. OWNER ROUND MOUNTAIN GOLD CORP ADDRESS AT WELL LOCATION R.M.G.C.
 MAILING ADDRESS P.O. BOX 480 ROUND MTH. NV.
ROUND MTH. NV. 89045
 2. LOCATION NW 1/4 SW 1/4 Sec 19 T. 10 N/S R. 44 E NVE County
 PERMIT NO. 72257-T 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>WELL # SDM-28</u>				
<u>ALLUV.</u>		<u>0'</u>	<u>75'</u>	<u>75'</u>
<u>VOLCANIC</u>		<u>75'</u>	<u>120'</u>	<u>45'</u>
<u>SUPER PLUG</u>		<u>75'</u>	<u>120'</u>	<u>45'</u>
<u>TRANS SAND (60)</u>		<u>70'</u>	<u>75'</u>	<u>5'</u>
<u>1/4" SAND</u>		<u>30'</u>	<u>70'</u>	<u>40'</u>
<u>MED. BENTONITE CHIP</u>		<u>10'</u>	<u>30'</u>	<u>20'</u>
<u>HEAT CEMENT</u>		<u>0'</u>	<u>10'</u>	<u>10'</u>

8. WELL CONSTRUCTION
 Depth Drilled 120' Feet Depth Cased 120' Feet
 HOLE DIAMETER (BIT SIZE)
 From 10" Inches To 120' Feet
 _____ Inches _____ Feet _____ 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>SCH 80</u>	<u>+2.5'</u>	<u>120'</u>

 Perforations:
 Type perforation HORIZ. SLOT
 Size perforation 1.020
 From _____ feet to _____ feet
 From 30' feet to 70' feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 10' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 30' feet to 70' feet

Date started 4-12, 2005
 Date completed 4-12, 2005

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>LESS THAN ONE G.P.M.</u>		

9. WATER LEVEL
 Static water level 63.43' feet below land surface
 Artesian flow N/A 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 EKLHO DRILLING Contractor
 Address P.O. BOX 2748 Contractor
ELKO NV. 89803
 Nevada contractor's license number issued by the State Contractor's Board 30823
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1698
 Signed Gay Jay Harris
 By driller performing actual drilling on site or contractor
 Date 5-04-05