

OFFICE USE ONLY
 Log No. 98269
 Permit No. _____
 Basin 051

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. 55181

1. OWNER Newmont Mining Corp. ADDRESS AT WELL LOCATION Coh Quarry
 MAILING ADDRESS Po Box 388
Valmy, NV 89438
 2. LOCATION NW 1/4 NE 1/4 Sec 2 T 33 N R 51 E Eureka County
 PERMIT NO. 55181 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>Hole # QCP-52</u>				
<u>CLAY</u>		<u>0</u>	<u>50</u>	<u>50</u>
<u>Alluvium</u>		<u>50</u>	<u>70</u>	<u>20</u>
<u>Siltstone</u>		<u>70</u>	<u>125</u>	<u>55</u>
<u>Cement</u>		<u>0</u>	<u>50</u>	<u>50</u>
<u>Bentonite</u>		<u>50</u>	<u>98</u>	<u>48</u>
<u>Gravel pack</u>		<u>98</u>	<u>123</u>	<u>25</u>

8. WELL CONSTRUCTION
 Depth Drilled 125 Feet Depth Cased 123 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 18 Feet
6 1/4 Inches 18 Feet 125 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2 3/8</u>		<u>Sch 40</u>	<u>+ 3</u>	<u>123</u>
<u>6 5/8</u>		<u>156wml</u>	<u>+ 2</u>	<u>18</u>

Perforations:
 Type perforation vertical slot
 Size perforation 1/8"
 From Screen 123 feet to 103 feet
 From Blank 103 feet to + 2 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 50 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 123 feet to 98 feet

Date started 6-26 2005
 Date completed 6-26 2005

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>0</u>		<u>1/2</u>
		<u>Not enough water to air lift</u>

9. WATER LEVEL
 Static water level N/A 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 EKLUND Drilling Co., 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 to the on-site driller 1942
 Signed William Riley
 By driller performing actual drilling on site or contractor
 Date 6-30-05

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 JUN -5 11:52
 DIVISION OF WATER RESOURCES OFFICE