

STATE OF NEVADA  
DIVISION OF WATER RESOURCES  
**WELL DRILLER'S PLUGGING REPORT**



OFFICE USE ONLY  
Log No. 100926  
Permit No. 044  
Basin 044

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **58490**

1. OWNER **Queenstake Resources TW-14A**  
MAILING ADDRESS **HC 31, Box 78, Elko, NV 89801**

ADDRESS AT WELL LOCATION **Jerritt Canyon minesite, north of Elko, NV.**  
Subdivision Name: **N/A** County: **Elko**

2. LOCATION **NE 1/4 NE 1/4 Sec 4 T40N R54E**  
NDEP # **NEV 00000200**  
PERMIT/WAIVER NO. **00000200** Parcel No. **N/A**  
*Issued by Water Resources*

Latitude **41 23.799 N** UTM E \_\_\_\_\_  NAD 27  
Longitude **115 53.454 W** N \_\_\_\_\_  NAD 83/WGS 84

3. TYPE OF WELL  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

Is this well being plugged because a replacement well was drilled?  Yes  No  
If yes, what is replacement well NOI? \_\_\_\_\_  
Is there an existing well log?  Yes  No  
If yes, what is NDWR well log #? \_\_\_\_\_

4. EXISTING WELL CONSTRUCTION  
Depth Drilled **66** Feet Depth Cased **66** Feet

7. WELL PLUGGING PROCEDURE  
Was well cleaned out to total depth?  Yes  No  
If well was not cleaned out to total depth, please explain why: \_\_\_\_\_

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375	0.698	0.154	+1	66

Was the well contaminated?  Yes  No  
Was the casing pulled?  Yes  No  
Was the casing over drilled?  Yes  No

Existing Perforations:  
Type of perforation **Slotted**  
Size of perforation **0.025"**  
From **36** feet to **56** feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

If casing was left in place, please show where additional perforations were made:  
Additional Perforations:  
Type of perforator used: **N/A**  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perfs per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perfs per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perfs per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perfs per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perfs per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perfs per linear foot \_\_\_\_\_

5. WATER LEVEL  
Static water level: **39** feet below land surface  
Artesian flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F Quality \_\_\_\_\_

8. WELL PLUGGING MATERIALS

6. Additional Notes or Comments  
Materials Used:

**Neat Cement: 8.4 cu.ft.**

Material Used			
Neat Cement			
From <b>+1</b> feet to <b>66</b> feet	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured		
From _____ feet to _____ feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured		
From _____ feet to _____ feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured		
From _____ feet to _____ feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured		
From _____ feet to _____ feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured		
From _____ feet to _____ feet	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured		

Neat Cement Fluid Weight **15.6** lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite

Date Started **09/09/06**  
Date Completed **09/09/06**

9. DRILLER'S CERTIFICATION

This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.

Name **Lang Exploratory Drilling** (CONTRACTOR)

Address **P.O. Box 5279** (CONTRACTOR)

**Elko, NV 89802-5279** (CONTRACTOR)

Nevada contractor's license number issued by the State Contractor's Board **0021976**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2258**

Signed \_\_\_\_\_  
By driller performing actual drilling on site or contractor

Date **09/13/06**

STATE ENGINEERS OFFICE  
2006 SEP 18 AM 11:46  
RECEIVED

*dw*