



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

OFFICE USE ONLY
Log No. 102156
Permit No.
Basin 666

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 58823

1. OWNER Newmont Mining Corporation DW-64
MAILING ADDRESS P.O. Box 669, Carlin, NV 89822

ADDRESS AT WELL LOCATION Twin Creeks minesite, 25 miles NE of Golconda, Nevada.
Subdivision Name: N/A County: Eureka

2. LOCATION SE 1/4 NW 1/4 Sec 18 T 39 N R 43 E
PERMIT/WAIVER NO. 60054 N/A
Issued by Water Resources Parcel No.

Latitude 41 15.50 N UTM E NAD 27
Longitude 117 10.23 W N NAD 83/WGS 84

3. WORK PERFORMED
New Well Replace Recondition
Deepen Other

4. PROPOSED USE
Domestic Irrigation Test Monitor Stock
Municipal/Industrial

5. WELL TYPE
Cable Rotary RVC
Air Other Flooded

6. LITHOLOGIC LOG table with columns: Material, Water Strata, From, To, Thickness. Rows include Tan alluvium, Gray rock, Red tan rock, Tan clay, Gray rock, Tan rock & clay, Gray rock, Gray clay, Gray rock & clay mix, Gray rock, Gray rock & clay mix, Gray rock, Gray clay and fines, Gray clay, Gray-black rock and white.

9. WELL CONSTRUCTION
Depth Drilled 1955 Feet Depth Cased 1940 Feet
HOLE DIAMETER (BIT SIZE)
31 Inches 0 Feet 42 Feet
22 Inches 42 Feet 1955 Feet

CASING SCHEDULE table with columns: Size O.D. (Inches), Weight/Ft. (Pounds), Wall Thickness (Inches), From (Feet), To (Feet). Rows for 24, 16, 16 inch casings.

Perforations:
Type of perforation Louvered Ful-Flo
Size of perforation 0.080"
From 1320 feet to 1920 feet

Annular Seal: Yes No
Neat Cement 100 to 0 Pumped Poured
Cement Grout to to Pumped Poured
Concrete Grout to to Pumped Poured
30% Bentonite Grout to to Pumped Poured
Gravel Pack: Yes No to to Pumped Poured
Type: See Notes
Bentonite Chips: Yes No 105 to 100 Pumped Poured
Type: 3/8"

Notes:
Native Rock 105 1000
3/8" SRI 1000 1955
41.263889N
117.173056W NAD83
Date started: 09/07, 20 06
Date completed: 10/19, 20 06

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Lang Exploratory Drilling (CONTRACTOR)

7. Water Level
Static water level: 106.2 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: F
Quality:

Address P.O. Box 5279 (CONTRACTOR)
Elko, NV 89802-5279
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 2308
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 10/30/06

8. WELL TEST DATA table with columns: TEST METHOD, G.P.M., Draw Down (Feet Below Static), Time (Hours). Row: Air Lift, 250 G.P.M., 6 feet, 24 hours.

Handwritten initials 'AW' in bottom right corner.

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1. OWNER Newmont Mining Corp. DW-64 Page Two
MAILING ADDRESS P.O. Box 669, Carlin, NV 89822

ADDRESS AT WELL LOCATION Twin Creeks minesite, 25 miles NE of Golconda, Nevada.

Subdivision Name: N/A County: Eureka

2. LOCATION SE 1/4 NW 1/4 Sec 18 T39N R43E

Latitude 41 15.50 N UTM E NAD 27

PERMIT/WAIVER NO. 60054

N/A

Longitude 117 10.23W N

NAD 83/WGS 84

Issued by Water Resources

Parcel No.

3. WORK PERFORMED
New Well Replace Recondition
Deepen Other

4. PROPOSED USE
Domestic Irrigation Test Monitor Stock
Municipal/Industrial

5. WELL TYPE
Cable Rotary RVC
Air Other Flooded

6. LITHOLOGIC LOG

Table with columns: Material, Water Strata, From, To, Thickness

Date started: 20
Date completed: 20

7. Water Level
Static water level: feet below land surface
Artesian Flow: G.P.M. P.S.I
Water Temperature: F
Quality:

8. WELL TEST DATA

Table with columns: TEST METHOD, G.P.M., Draw Down (Feet Below Static), Time (Hours)

9. WELL CONSTRUCTION

Depth Drilled Feet Depth Cased Feet

HOLE DIAMETER (BIT SIZE)

Table with columns: From, To, Inches, Feet

CASING SCHEDULE

Table with columns: Size O.D. (Inches), Weight/Ft. (Pounds), Wall Thickness (Inches), From (Feet), To (Feet)

Perforations:

Type of perforation Standard Flo Louvered
Size of perforation 0.080"
From 900 feet to 920 feet
From 420 feet to 440 feet

Annular Seal: Yes No

Neat Cement to Pumped Poured
Cement Grout to Pumped Poured
Concrete Grout to Pumped Poured
30% Bentonite Grout to Pumped Poured
Gravel Pack: Yes No to Pumped Poured
Type:
Bentonite Chips: Yes No to Pumped Poured
Type:

10. DRILLER'S CERTIFICATION

This well was drilled 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)

Eiko, NV 89802-5279

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 2308

Signed By driller performing actual drilling on site or contractor

Date 10/30/06

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Subdivision Name: N/A County: Eureka

2. LOCATION SE 1/4 NW 1/4 Sec 18 T39N R43E
Latitude 41 15.50 N UTM E NAD 27
PERMIT/WAIVER NO. 60054 N/A Longitude 117 10.23 W N NAD 83/WGS 84

3. WORK PERFORMED
[X] New Well [] Replace [] Recondition
[] Deepen [] Other
4. PROPOSED USE
[] Domestic [] Irrigation [] Test [] Monitor [] Stock
[X] Municipal/Industrial [] Air [X] Other Flooded

6. LITHOLOGIC LOG table with columns: Material, Water Strata, From, To, Thickness

9. WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased _____ Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE table with columns: Size O.D. (Inches), Weight/Ft. (Pounds), Wall Thickness (Inches), From (Feet), To (Feet)

Perforations:
Type of perforation _____
Size of perforation _____
From _____ feet to _____ feet

Annular Seal: [] Yes [] No
[] Neat Cement _____ to _____ [] Pumped [] Poured
[] Cement Grout _____ to _____ [] Pumped [] Poured
[] Concrete Grout _____ to _____ [] Pumped [] Poured
[] >=30% Bentonite Grout _____ to _____ [] Pumped [] Poured
Gravel Pack: [] Yes [] No _____ to _____ [] Pumped [] Poured
Type: _____
Bentonite Chips: [] Yes [] No _____ to _____ [] Pumped [] Poured
Type: _____

Date started: _____, 20
Date completed: _____, 20

7. Water Level
Static water level: _____ feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA table with columns: TEST METHOD, 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 Lang Exploratory Drilling (CONTRACTOR)
Address P.O. Box 5279 (CONTRACTOR)
Elko, NV 89802-5279
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 2308
Signed _____
By driller performing actual drilling on site or contractor
Date 10/30/06