

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

OFFICE USE ONLY **107957**  
Log No. \_\_\_\_\_  
Permit No. \_\_\_\_\_  
Basin **866**

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. 61074

1 OWNER Newmont Mining Corp. ADDRESS AT WELL LOCATION Twin Creeks Mine  
MAILING ADDRESS PO Box 388 Hole #TDW-00065  
Valmy, NV 89438 Subdivision Name: \_\_\_\_\_ County: Humboldt

2 LOCATION SE 1/4 SE 1/4 Sec 30 T 39N N/S R 43 E Latitude 41.226606 UTM E 486032.9217  NAD 27  
PERMIT/WAIVER No. 60019/73074 175758T Longitude 117.166642 N 4563714.0607  NAD 83/WGS 84  
Issued by Water Resources Parcel No. \_\_\_\_\_

3 TYPE OF WELL  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
Is this well being plugged because a replacement well was drilled? No  
If yes, what is replacement well NOI? \_\_\_\_\_  
Is there an existing well log? Yes  
If yes, what is NDWR well log #? 99678

4 EXISTING WELL CONSTRUCTION  
Depth Drilled 720 Feet Depth Cased 720 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>3.78</u>		<u>0.250</u>	<u>0</u>	<u>720</u>

Existing Perforations:

Type of perforation	Slotted
Size of perforation	1/4"
From <u>406</u> feet to <u>699</u> feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

5 WATER LEVEL  
Static water level 399 feet below land surface  
Artesian flow No G.P.M. N/A P.S.I.  
Water temperature N/A °F Quality Good

6 Additional Notes or Comments  
Pumped Super plug from bottom to surface. Poured medium hole plug to 10'. Neat cement to surface.

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: \_\_\_\_\_

Was the well contaminated?  yes  no  
Was the casing pulled?  yes  no  
Was the casing over drilled?  yes  no  
If casing was left in place, please show where additional perforations were made:  
Additional Perforations: \_\_\_\_\_

Type of perforator used: Star Perforator Slot

From	feet to	feet	Number of perfs per linear foot
<u>60</u>	<u>715</u>	<u>feet</u>	<u>20</u>
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 _____

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<u>720</u>	<u>30</u>	<u>feet</u>	<u>Super Plug</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>30</u>	<u>10</u>	<u>feet</u>	<u>Med. Hole Plug</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>10</u>	<u>0</u>	<u>feet</u>	<u>Neat Cement</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight 15.8 lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started 1/20/2009  
Date Completed 1/21/2009

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 Eklund Drilling Company, Inc. Contractor  
Address PO 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, the on-site driller 1777  
Signed Dennis White By driller performing actual drilling on site or contractor

Date 1/21/2009