

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

OFFICE USE ONLY **109275**

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

Log No. _____
Permit No. _____
Basin **453**

NOTICE OF INTENT NO. **64529**

1. OWNER **U.S. Gold Corp.** **1990-08** ADDRESS AT WELL LOCATION **Tonkin Springs Mine, west of Eureka, NV**
MAILING ADDRESS **1595 Meadowood Lane** **Reno, NV 89502** Subdivision Name: _____ County: **Eureka**

2. LOCATION **NE 1/4 NE 1/4 Sec 3 T23.5N R49E** Latitude **39.908998° N** UTM E **547831** NAD 27
PERMIT/WAIVER NO. _____ Longitude **116.440413° W** **4417597** NAD 83/WGS 84
Issued by Water Resources Parcel No. **NAD 27 (A)**

3. TYPE OF WELL Is this well being plugged because a replacement well was drilled? Yes No Is there an existing well log? Yes No
 Domestic Irrigation Test Stock
 Municipal/Industrial Monitor Stock If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? **78292**

4. EXISTING WELL CONSTRUCTION
Depth Drilled **100** Feet Depth Cased **50** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.00	16.94	.188	+2	20
2.00	.698	.154	+2	47
(2) 2.00	.698	.154	+2	38

Existing Perforations:
Type of perforation **Slotted**
Size of perforation **0.020**
From **37** feet to **47** feet
From **10** feet to **30** feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

5. WATER LEVEL
Static water level: **NA** feet below land surface
Artesian flow: _____ G.P.M. _____ P.S.I.

Water Temperature: _____ °F Quality _____

6. Additional Notes or Comments

Pumped through BQ @ 100'
Pumped 33 - 94# bags of cement
297 gallons total

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: **NA**
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____

8. WELL PLUGGING MATERIALS

Material Used			
From 0 feet to 100 feet	Neat Cement	<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 **15.5** lbs/gal
Bentonite Grout _____ % bentonite

Date Started **13-Nov-2009**
Date Completed **14-Nov-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 **Boart Longyear Drilling Services** (CONTRACTOR)

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

Eiko, NV 89802
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 **2243**

Signed _____
By driller performing actual drilling on site or contractor

Date **18-Nov-09**