

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

OFFICE USE ONLY
 Log No. 113064
 Permit No. _____
 Basin 137B

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. 65783

1. OWNER Round Mountain Gold **2010-4** ADDRESS AT WELL LOCATION Round Mountain Mine
 MAILING ADDRESS PO Box 480
Round Mountain, NV. 89045 Subdivision Name: _____ County: Nye

2. LOCATION SE 1/4 NW 1/4 Sec 19 T10N R44E Latitude _____ UTM E 492768 NAD 27
 PERMIT/WAIVER NO. M/O-1647 Longitude _____ N 4284499 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 Monitor

5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Tan Rock		0	280	280
Light Grey		280	320	40
Grey Tan		320	380	60
Grey		380	510	130
Black		510	550	40
Grey, Light Grey		550	1030	480
Grey/Brown		1030	1100	70

Installed a 2" sounder pipe with transducers at 102', 580, 360'. pumped cement through the 2" to surface. Then installed a tremmie pipe to create a 10' surface seal.
 Hole is abandoned

38.710967° N
117.083179° W
NAD 22 (FA)

Date started: January 27, 20 11
 Date completed: January 30, 20 11

9. WELL CONSTRUCTION

Depth Drilled 1120 Feet Depth Cased 1020 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>14.75</u> Inches	<u>0</u> Feet
<u>6.75</u> Inches	<u>20</u> Feet
<u>6.50</u> Inches	<u>980</u> Feet
	<u>1020</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>	<u>5.02</u>	<u>.218</u>	<u>+2</u>	<u>1100</u>

Perforations:
 Type of perforation: N/A
 Size of perforation: N/A

From	feet to	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

Annular Seal: Yes No

Material	0 to	to	to	to
<input checked="" type="checkbox"/> Neat Cement	0	to 10	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	10	to 1120	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____				
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____				

7. Water Level
 Static water level: 762.42 feet below land surface
 Artesian Flow: N/A G.P.M. N/A P.S.I.
 Water Temperature: Warm °F
 Quality: Fair

8. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M. <u>38</u>	<u>11.8</u>	<u>1</u>
	<u>11.8</u>	<u>1</u>
	<u>11.8</u>	<u>1</u>

RECEIVED

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Boart Longyear (CONTRACTOR)
 Address 2745 California Ave (CONTRACTOR)
SLC., UT. 84104
 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 2376
 Signed _____
 By driller performing actual drilling on site or contractor
 Date Feb 14, 2011

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MAILING ADDRESS **PO Box 480**
Round Mountain, NV. 89045 **Subdivision Name:** **County: Nye**

2. LOCATION **SE¼NW¼ Sec19T10N/ R44E** Latitude _____ UTM E **492768** NAD 27
PERMIT/WAIVER NO. **M/O-1647** Longitude _____ N **4284499** NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Other _____

4. PROPOSED USE
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5. WELL TYPE
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 Air Other _____

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Material	Water Strata	From	To	Thick-ness
Tan Rock		0	280	280
Light Grey		280	320	40
Grey Tan		320	380	60
Grey		380	510	130
Black		510	550	40
Grey, Light Grey		550	1030	480
Grey/Brown		1030	1120	90

Installed a 2" sounder pipe with transducers at 1020', 580', 380'. pumped cement through the 2" to surface. Then installed a tremmie pipe to create a 10' surface seal.
Hole is abandoned

9. WELL CONSTRUCTION

Depth Drilled **1120** Feet Depth Cased **1100** Feet

HOLE DIAMETER (BIT SIZE)

From	To
14.75 Inches	0 Feet 20 Feet
6.75 Inches	20 Feet 980 Feet
6.50 Inches	980 Feet 1120 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375	5.02	.218	+2	1100

Perforations:
Type of perforation **N/A**
Size of perforation **N/A**

From	To
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet

Annular Seal: Yes No

<input checked="" type="checkbox"/> Neat Cement	0 to 10	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	10 to 1120	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Gravel Pack: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Date started: **January 27, 20 11**
Date completed: **January 30, 20 11**

7. Water Level
Static water level: **762.42** feet below land surface
Artesian Flow: **N/A** G.P.M. **N/A** P.S.I.
Water Temperature: **Warm** °F
Quality: **Fair**

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
38	N/A	1	

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **Boart Longyear** (CONTRACTOR)
Address **2745 California Ave** (CONTRACTOR)
SLC., UT. 84104
Nevada contractor's license number issued by the State Contractor's Board **0021978**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **5376**

Signed _____
By driller performing actual drilling on site or contractor
Date **Feb 14, 2011**

RECEIVED
2011 FEB 22 AM 8:57
STATE ENGINEERS