

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

OFFICE USE ONLY
Log No. 116755
Permit No. _____
Basin Φ166

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK TMU-60001

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

NOTICE OF INTENT NO. 67396

1. OWNER Newmont Mining Corp ADDRESS AT WELL LOCATION Twin Creeks Mine
MAILING ADDRESS P.O. Box 69
Galena Nevada 89414 Subdivision Name: _____ County: Humboldt

2. LOCATION SE 1/4 SE 1/4 Sec 6 T. 39 S. R. 43 E Latitude _____ UTM E 4186295 NAD 27
PERMIT/WAIVER No. NE 1753 Longitude _____ N 4570411 NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition
 Deepen Other

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

5. WELL TYPE Rotary RVC
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Fill</u>		<u>0</u>	<u>20</u>	<u>20</u>
<u>Beel Rock</u>		<u>20</u>	<u>620</u>	<u>600</u>
<u>clay</u>		<u>620</u>	<u>660</u>	<u>40</u>
<u>Beel Rock</u>		<u>660</u>	<u>980</u>	<u>280</u>

Transducer is out 980'
dumped cement grout from 980 to 360' through 1 1/2" PVC that was left in hole

9. WELL CONSTRUCTION

Depth Drilled 980 Feet Depth Cased 980 Feet

HOLE DIAMETER (BIT SIZE)

	From	To	
<u>7 5/8</u> Inches	<u>0</u>	<u>20</u>	Feet
<u>6"</u> Inches	<u>20</u>	<u>980</u>	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1 1/2"</u>		<u>sch. 30 P.V.C.</u>	<u>0</u>	<u>980</u>

Perforations:

Type of perforation No
Size of perforation No

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

Annular Seal: Yes No

Neat Cement 10 to 0 Pumped Poured
 Cement Grout 980 to 360 Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 230% Bentonite Grout 360 to 10 Pumped Poured

Gravel Pack: Yes No _____ to _____ Pumped Poured

Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Paured
Type: _____

7. Water Level

Static water level: 0 feet below land surface
Artesian Flow: _____ G.P.M. 0 P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION

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

Name Boart Hongyeen Contractor
Address P.O. Box 2748 Contractor
Elko Nevada 89803
Nevada contractor's license number
issued by the State Contractor's Board 0073086
Nevada driller's license number issued by the
Division of Water Resources, the on-site driller 24372447

Signed Don Schick
By driller performing actual drilling on-site or contractor
Date 12-14-11