

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

OFFICE USE ONLY
 Log No. 118001
 Permit No. _____
 Basin 051

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
(well name)

NOTICE OF INTENT NO. 69215

1. OWNER **Newmont Mining Corp**
 MAILING ADDRESS **1655 Mountain City Hwy. SE Elko, NV. 89801**
 ADDRESS AT WELL LOCATION **Newmont-Leeville North of Carlin, NV.**
 Subdivision Name: _____ County: **Eureka**

2. LOCATION **NE 1/4 NW 1/4 Sec 13 T35N R50E**
 PERMIT/WAIVER NO. **R3D-2012-15** M/O **790**
 Issued by Water Resources Parcel No. _____

Latitude **40 54.807N** UTM E NAD 27
 Longitude **116 18.395W** N NAD 83/WGS 84

3. TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

Is this well being plugged because a replacement well was drilled? Yes No
 If yes, what is replacement well NOI? _____

Is there an existing well log? Yes No
 If yes, what is NDWR well log #? **44826**

4. EXISTING WELL CONSTRUCTION

Depth Drilled **425** Feet Depth Cased **410** Feet

EXISTING CASING SCHEDULE

Size C.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
7	28	.375	0	20
1.25	2	.145	0	390

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

Existing Perforations:
 Type of perforation **Slotted**
 Size of perforation **0.125**

From	feet to	feet
From 390	feet to	410 feet
From _____	feet to	_____ feet
From _____	feet to	_____ feet
From _____	feet to	_____ feet
From _____	feet to	_____ feet

If casing was left in place, please show where additional perforations were made:
 Additional Perforations: _____

Type of perforator used: **N/A**

From	feet to	feet	Number of perfs per linear foot
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____
From _____	feet to	_____ feet	_____

5. WATER LEVEL

Static water level: **Dry** feet below land surface
 Artesian flow: **N/A** G.P.M. **N/A** P.S.I.
 Water Temperature: **N/A** °F Quality **n/a**

8. WELL PLUGGING MATERIALS

Material Used

From	feet to	feet	Material	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From 0	feet to	410 feet	Cement	<input checked="" 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"/>
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"/>

6. Additional Notes or Comments

Materials used
Neat Cement -30 Cu/Ft

Neat Cement Fluid Weight **15.6** lbs/gal
 Bentonite Grout _____ % bentonite

Date Started **July 17, 2012**
 Date Completed **July 17, 2012**

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** (CONTRACTOR)
 Address **2745 California Ave. SLC., UT. 84104** (CONTRACTOR)
 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 **2329**

Signed _____
 By driller performing actual drilling on site or contractor
 Date **July 18, 2012**

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 STATE ENGINEERS OFFICE

40.913450°N
 116.306583°W NAD27