

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

OFFICE USE ONLY
 Log No. 120638
 Permit No. 55143
 Basin 061

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. 70665

1. OWNER **Barrick Goldstrike** **BW-45** ADDRESS AT WELL LOCATION **Barrick Goldstrike Mine, NW of Carlin, NV.**
 MAILING ADDRESS **P.O. Box 29**
Eiko, NV. 89803 Subdivision Name: _____ County: **Eureka**

2. LOCATION **NW¼SW¼ Sec 24T36N/ R49E** Latitude _____ UTM E **551147** NAD 27
 PERMIT/WAIVER NO. **55143** Order **1038** Longitude _____ N **4536561** 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 Other _____
 5. WELL TYPE Cable Rotary RVC Air Other **Flooded Rev**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Black Rock		0	150	150
Gray Clay and Rock		150	220	70
Gray Clay		220	270	50
Gray Clay and Rock		270	360	90
No Return		360	440	80
Gray Clay and Rock		440	510	70
Black Rock		510	820	310
No Return		820	860	40
Black Rock		860	1310	450
Black/Gray Fractured Rock		1310	1630	320
Brown Fractured Rock		1630	1690	60
Black/Gray Fractured Rock		1690	1890	200
White/Black Rock		1890	1910	20
Black Rock		1910	2000	90

9. WELL CONSTRUCTION

Depth Drilled **2000** Feet Depth Cased **1997.11** Feet

HOLE DIAMETER (BIT SIZE)

From	To
48 inches	0 Feet 75 Feet
31 inches	75 Feet 2000 Feet
_____ inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
40	210	.500	0	75
24	94.61	.375	+2	1997

Perforations:

Type of perforation **Louwer**

Size of perforation **.125**

From	To
From <u>Leaky</u> 417 feet to	457 feet
From <u>Leaky</u> 737 feet to	777 feet
From <u>Leaky</u> 1057 feet to	1097 feet
From <u>Full Flo</u> 1377 feet to	1977 feet
From _____ feet to	_____ feet

Annular Seal: Yes No

Neat Cement 0 to 146 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 151 to 2000 Pumped Poured
 Type: **3/4 X 1/2 SRI**

Bentonite Chips: Yes No 146 to 151 Pumped Poured
 Type: **3/8" Holeplug**

Date started: **July 16, 20 14**
 Date completed: **August 29, 20 14**

7. Water Level

Static water level: **1069** feet below land surface
 Artesian Flow: **N/A** G.P.M. **N/A** P.S.I
 Water Temperature: **130** °F
 Quality: **Poor**

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M./FEET (Feet Below Static)	430	N/A	2
Time (Hours)			

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 **1995**

Signed _____
 By driller performing actual drilling on site or contractor

Date **August 29, 2014**

Completes well log 120321/Corrected well log