

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

OFFICE USE ONLY
 Log No. 121501
 Permit No. _____
 Basin OS1

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. 71779

1. OWNER **Newmont Mining Corporation** **QLK-00084** ADDRESS AT WELL LOCATION **Gold Quarry Mine, North of Carlin, NV.**
 MAILING ADDRESS **1655 Mountain City Hwy**
Elko, NV. 89801 **Subdivision Name:** _____ **County:** **Eureka**

2. LOCATION **NW¼NW¼ Sec01T33N/ R51E** Latitude _____ UTM E **567576** NAD 27
 PERMIT/WAIVER NO. **Well Spacing** Order **1055** Longitude _____ N **4514607** 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 _____

6. **LITHOLOGIC LOG**

Material	Water Strata	From	To	Thick-ness
Lined pre-existing well with new casing and gravel				
Original well log 116311				
NAD 27				
40.781573°N				
116.199158°W				

Date started: **December 2, 20 14**
 Date completed: **December 8, 20 14**

9. **WELL CONSTRUCTION**

Depth Drilled 611 Feet Depth Cased 611 Feet

HOLE DIAMETER (BIT SIZE)

From	To	Inches	Feet	Inches	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	22.36	.250	+2	311
8.625	22.36	.250	311	611

Perforations:
 Type of perforation **Wire Wrap**
 Size of perforation **.030 Slot**

From	To	feet to	feet
	311	feet to	611 feet
		feet to	feet
		feet to	feet
		feet to	feet
		feet to	feet

Annular Seal: Yes No

Material	From	To	Pumped	Poured
<input checked="" type="checkbox"/> Neat Cement	0	to 192	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout		to	<input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	197	to 611	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type:				
Bentonite Chips: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	192	to 197	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type:	3/8 Hole Plug			

7. **Water Level**

Static water level: **311.7** feet below land surface
 Artesian Flow: **N/A** G.P.M. _____ P.S.I. _____
 Water Temperature: **Cool** °F
 Quality: **Good**

8. **WELL TEST DATA**

TEST METHOD:	TEST METHOD:		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	611	68	70

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 **2487**

Signed _____
 By driller performing actual drilling on site or contractor
 Date **December 9, 2014**