

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 11912

1. OWNER Newmont Gold Co ADDRESS AT WELL LOCATION Same
 MAILING ADDRESS P.O. Box 669 PB-20
Carlin, NV 89822
 2. LOCATION NE 1/4 SW 1/4 Sec. 36 T 34 R 51 E Eureka County
 PERMIT NO. MO-246 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Industrial
 Municipal Stock
 5. TYPE WELL
 Monitor Test Cable Rotary
 Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-------------------------------------|--------------|------|----|------------|
| Fill | | 0 | 50 | 50 |
| Colluvium | | 50 | 70 | 20 |
| Siltstone | X | 70 | 85 | 15 |
| Odex through dump material | | | | |
| Bentonite from 68.4 to 62.7 | | | | |
| Bentonite on bottom from 85' - 79.5 | | | | |

91 JUN 17 AM 1:30
STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Diameter 12 1/4 inches Total depth 54 feet
7 1/2 inches 85 feet
 Casing record 8" Steel + 4" PVC
 Weight per foot 2.07 Thickness .232

| Diameter | From | To |
|--------------|-------|-------|
| 8 inches | 0 | 54 |
| 4 inches | 0 | 79 |
| _____ inches | _____ | _____ |

 Surface seal: Yes No Type Cement
 Depth of seal 62.7 - 48 feet
 Gravel packed: Yes No
 Gravel packed from 79.5 feet to 68.4 feet
 Perforations:
 Type perforation SLOTS
 Size perforation .020
 From 79 feet to 69 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Date started 10/16 1990
 Date completed 10/21 1990

7. WELL TEST DATA

| Pump RPM | G.P.M. | Draw Down | After Hours Pump |
|------------|--------|-----------|------------------|
| <u>N/A</u> | | | |
| | | | |
| | | | |

BAILER TEST
 G.P.M. N/A Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours

9. WATER LEVEL
 Static water level 6.9 feet below land surface
 Flow N/A G.P.M. _____ P.S.I.
 Water temperature Cool °F Quality Clear

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Gustin Ceip Contractor
 Address Box 894 Elko, NV 89822 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0022193
 Nevada contractor's driller's number issued by the Division of Water Resources _____
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 1671
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 10/29/90