PZ 92-6

WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 43891
Permit No.
Basin 4-61

1. OWNER Barrick Goldstrike ADDRESS Goldstrike mine
Box 29
Elko NV 89801

2. LOCATION NE ¼ NE ¼ Sec. 25 T. 36 N/S R. 49 E. Elko County
PERMIT NO. MO 441

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☒

4. PROPOSED USE
Domestic ☐ Irrigation ☐ Test ☒
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Bent Pellets				
50' - Cement				
to Surface				
PZ 92-6				
69 Berg				
Built.				

Date started 12-21, 1993
Date completed 12-21, 1993

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours

8. WELL CONSTRUCTION
Diameter hole ..... inches Total depth ..... feet
Casing record .....
Weight per foot ..... Thickness .....

Diameter	From	To
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type .....
Depth of seal ..... feet
Gravel packed: Yes ☒ No ☐
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation .....
Size perforation .....
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level ..... Feet below land surface .....
Flow ..... G.P.M. .....
Water temperature ..... ° F. Quality .....

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

Name C.C.A. Drilling
Address 131-14 - Bullion Rd
Nevada contractor's license number 20684
Nevada driller's license number 1799
Signed [signature]
Date 1-28-94

FEB 18 '94 AM 10 STATE ENGR

USE ADDITIONAL SHEETS IF NECESSARY

5471