

P-12

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

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. **44817**
Permit No. _____
Basin **051**

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **21220**

1. OWNER **Newmont Gold Co** ADDRESS AT WELL LOCATION **Gold Quarry**
 MAILING ADDRESS **P.O. Box 669** **PIT**
Cookin. NV. 89822

2. LOCATION **SW 1/4 NW 1/4 Sec. 2 T 33 N 51 E Eureka** County
 PERMIT NO. **56834** **Waiver R-210** Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ALLUVIUM		0	25	25
WHITE CLAY		25	40	15
Grey Gravel's	✓	40	200	160
Grey Gravel's Clay	✓	200	235	35
Brown Clay		235	260	45

WELL CASED WITH PLASTIC CASING

94 JUN -9 P 1:52 STATE ENGINEERS OFF

8. WELL CONSTRUCTION
 Depth Drilled **260** Feet Depth Cased **260** Feet

HOLE DIAMETER (BIT SIZE)
 From **8** Inches To **0** Feet **260** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
9.500	26	.237	0	260

Perforations:
 Type perforation **Factory Slot**
 Size perforation **5.040**
 From **80** feet to **240** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50** Neat Cement
 Cement Grout
 Placement Method: Pumped Poured
 Concrete Grout

Gravel Packed: Yes No
 From **260** feet to **50** feet

Date started **June 1**, 19**94**
 Date completed **June 3**, 19**94**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. WATER LEVEL
 Static water level **592.1** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality **Good**

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **O'Keefe Drilling** Contractor
 Address **P.O. Box 3810 Butte** Contractor
Montana 59702
 Nevada contractor's license number issued by the State Contractor's Board **27434**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1700**
 Signed **Herb Bowen**
 By driller performing actual drilling on site or contractor
 Date **June 4 1994**