

Log No. 65892  
 Permit No. \_\_\_\_\_  
 Basin OSI

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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.200

NOTICE OF INTENT NO. 34008

1. OWNER Newmont Gold Co. ADDRESS AT WELL LOCATION GOLD QUARRY PIT  
 MAILING ADDRESS P.O. Box 669  
CARLIN NV. 89822  
 2. LOCATION SW 1/4 SE 1/4 Sec. 35 T. 34 N. S. R. 51 E. EUREKA County  
 PERMIT NO. MD/155-D 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
<u>Sandy clay sand</u>	<u>Dry</u>	<u>0</u>	<u>200</u>	
<u>Sandy clay sand</u>	<u>Wet</u>	<u>200</u>	<u>260</u>	
<u>Sandy sand</u>	<u>8 gpm</u>	<u>260</u>	<u>320</u>	
<u>White clay</u>	<u>Dry</u>	<u>320</u>	<u>330</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 330 Feet Depth Cased 320 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
1 1/2 Inches 0 Feet 20 Feet  
7 7/8 Inches 20 Feet 330 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 3/4</u>	<u>22.76</u>	<u>250°</u>	<u>+1</u>	<u>19</u>
<u>2 3/8</u>	<u>7.73</u>		<u>+1</u>	<u>280</u>
<u>1 1/2</u>	<u>3.66</u>	<u>Sch 80</u>	<u>280</u>	<u>320</u>

Perforations: Steel Pipe  
 Type perforation Well screen steel  
 Size perforation HORIZONTAL SLOTS  
 From 280 feet to 320 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 60  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No 3% rockite  
 From 260 feet to 330 feet

9. WATER LEVEL  
 Static water level 200 feet below land surface  
 Artesian flow 7 to 8 G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature 45 °F Quality \_\_\_\_\_

Date started 4-16- 1997  
 Date completed 4-18 1997

7. WELL TEST DATA

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	<u>8 gpm</u>	<u>320</u>	<u>8 hrs.</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name D. Keefe DRILLING Contractor  
 Address Box 3810 Butte Mt. 89702 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board C-13-00-30581  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1703  
 Signed Frank Crick  
 By driller performing actual drilling on site or contractor  
 Date 5/2/97