

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

OFFICE USE ONLY
 Log No. 83136
 Permit No. _____
 Basin 61

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **38339**

1. OWNER Barrick Goldstrike Mines #PZ93-7 ADDRESS AT WELL LOCATION Barrick Goldstrike
 MAILING ADDRESS P.O. Box 29 minesite, north of Carlin, NV.
Elko, NV 89803

2. LOCATION NE 1/4 NE 1/4 Sec. 25 T 36N N/S R 49E E Eureka County
 PERMIT NO. M/O-441 Issued by Water Resources Parcel No. N/A Subdivision Name N/A

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
Abandoned by pumping neat cement T.D. to surface, both tubes				
Quantities of Neat Cement Used:				
1: 10 cu. ft.				
2: 4 cu. ft.				
Original Construction Detail:				
Cement		0	50	50
Hole plug		0	140	140
Gravel pack		140	257	117
Hole plug		257	579	322
Gravel pack		579	800	221

8. WELL CONSTRUCTION
 Depth Drilled 800 Feet Depth Cased 790 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>14</u>	<u>0</u>	<u>20</u>		
<u>6.75</u>	<u>20</u>	<u>790</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>33</u>	<u>0.375</u>	<u>0</u>	<u>20</u>
<u>1:1.25</u>	<u>2.273</u>	<u>Sch. 40</u>	<u>0</u>	<u>250</u>
<u>2:1.25</u>	<u>2.273</u>	<u>Sch. 40</u>	<u>0</u>	<u>790</u>

Perforations:
 Type perforation Slot
 Size perforation 0.025"

From	feet to	feet
<u>1: 150</u>	<u>1: 250</u>	<u>feet</u>
<u>2: 590</u>	<u>2: 790</u>	<u>feet</u>

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

Gravel Packed: Yes No
 From 1: 140-257 feet to 2: 579-800 feet

9. WATER LEVEL
 Static water level 1: 733.6' 2: Dry feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 2/2/2001 .19
 Date completed 2/2/2001 .19

7. WELL TEST DATA

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

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

Name Lang Exploratory Drilling Contractor
 Address P.O. Box 5279 Contractor
Elko, NV 89802-5279
 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 2039
 Signed Dennis Robblee
 By driller performing actual drilling on-site or contractor
 Date 2/6/01

B.S.T.L