

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 83802
 Permit No. _____
 Basin _____

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. 38317

1. OWNER Newmont Mining Corp. QC-43
 MAILING ADDRESS P.O. Box 669
Carlin, NV 89822

ADDRESS AT WELL LOCATION Gold Quarry minesite,
seven miles NW of Carlin, NV.

2. LOCATION NW 1/4 SW 1/4 Sec. 2 T 33N N/S R 51E E Eureka County
 PERMIT NO. 67302 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 Municipal/Industrial Irrigation Monitor Test Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Red clay		0	10	10
Light brown clay with some grey rock		10	95	85
Gray clay with some gray rock		95	145	50
Light brown clay		145	170	25
Gray clay		170	215	45
White and gray clay some black and gray rock		215	345	130
Dark gray clay and gray rock		345	420	75
Gray clay		420	445	25
White clay		445	455	10

8. WELL CONSTRUCTION
 Depth Drilled 455 Feet Depth Cased 455 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
17.5	0	20	Feet	Feet
12.25	20	455	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
13.375	52.065	0.375	0	20
8.625	22.36	0.250	+1	455

Perforations:
 Type perforation Wire wrap
 Size perforation 0.050"
 From 55 feet to 455 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 50'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 455 feet

9. WATER LEVEL
 Static water level 194.1 feet below land surface
 Artesian flow N/A G.P.M. _____ P.S.I. _____
 Water temperature 56 °F Quality _____

Date started 5/2/2001, 19____
 Date completed 5/4/2001, 19____

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>100</u>	<u>75.3</u>	<u>1 Hour</u>

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 2142
 Signed Alan Boudon
 By driller performing actual drilling on-site or contractor
 Date 5/9/01

3851