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

NOTICE OF INTENT NO. 43268

OWNER Barrick Goldstrike Mines PZ-99-9
 MAILING ADDRESS P.O. Box 29
Elko, NV 89803

ADDRESS AT WELL LOCATION Barrick Goldstrike minesite, north of Carlin, NV.

2. LOCATION NE 1/4 NE 1/4 Sec. 30 T 36N N/S R 50E E Eureka County
 PERMIT NO. N/A 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
Both tubes abandoned by pumping neat cement from T.D. to surface.				
Used 35.4 cu. ft. of cement.				
Original Construction Detail:				
Cement		0	50	50
Hole plug		50	272	222
Gravel pack		272	320	48
Hole plug		320	499	179
Gravel pack		499	560	61

Date started 4/24/2002, 19
 Date completed 4/24/2002, 19

7. WELL TEST DATA

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

8. WELL CONSTRUCTION

Depth Drilled 560 Feet Depth Cased 558 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>14.75</u>	<u>0</u>	<u>37</u>	<u>0</u>	<u>37</u>
<u>8.9</u>	<u>37</u>	<u>560</u>	<u>37</u>	<u>560</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10.75</u>	<u>28.04</u>	<u>0.250</u>	<u>+1</u>	<u>37</u>
<u>1: 2.375</u>	<u>3.65</u>	<u>0.154</u>	<u>+2</u>	<u>558</u>
<u>2: 2.375</u>	<u>3.65</u>	<u>0.154</u>	<u>+2</u>	<u>318</u>

Perforations:
 Type perforation Slotted
 Size perforation 0.020"
 From 1: 518 feet to 558 feet
 From 2: 278 feet to 318 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

9. WATER LEVEL

Static water level 1: 461 2: Dry feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

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 5/3/02

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 02 MAY -6 PM 1:56
 STATE ENGINEERS OFFICE

B.S.T.L