

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

OFFICE USE ONLY
 Log No. 88670
 Permit No. _____
 Basin 137-B

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. 50845

1. OWNER Round Mountain Gold Corp. DW-35 ADDRESS AT WELL LOCATION Round Mountain Gold minesite, Round Mountain, NV.
 MAILING ADDRESS P.O. Box 480 Round Mountain, NV 89045

2. LOCATION SW 1/4 NW 1/4 Sec. 29 T 10N N/S R 44E E Nye County
 PERMIT NO. 68466-T 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
Hole was drilled as a pilot hole for an 8" well. Insufficient water was found to warrant constructing a well, so the hole was abandoned.				
Tuff		0	100	100
Granite		100	800	700
Abandoned by pumping abantonite through rods, and then poured plug. 8" face casing was pulled at the end.				
Quantities Used:				
Hole plug: 85 cu.ft.				
Abantonite: 110 cu.ft.				

8. WELL CONSTRUCTION

Depth Drilled 800 Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>12.25</u>	<u>0</u>	<u>20</u>	<u>0</u>	<u>20</u>
<u>6.5</u>	<u>20</u>	<u>800</u>	<u>20</u>	<u>800</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type perforation _____
 Size perforation _____

From	feet to	feet

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

Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 5/11/2002, 19____
 Date completed 5/12/2002, 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 type="checkbox"/> Air Lift			

9. WATER LEVEL

Static water level 400 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 1995
 Signed Guadalupe Jacobo
 By driller performing actual drilling on-site or contractor
 Date 5/15/02

B.S.T.C