

TIF 6100-4

Log No. 89559
Permit No. _____
Basin 137-B

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. 51131

1. OWNER Round Mountain Gold Corp. ADDRESS AT WELL LOCATION Round Mountain Gold Corp Tailings Dam
MAILING ADDRESS P.O. Box 489
Round Mountain Nevada 89045

2. LOCATION SW 1/4 NE 1/4 Sec. 35 T. 10 S R. 43 E Nye County
PERMIT NO. _____ 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	Thickness
<u>Tailings Dam, Dump Material Boulders and Rock and Pebels</u>		<u>0</u>	<u>80</u>	<u>80</u>
<u>Put 1" PVC in Hole Through Center Tube of Drill Pipe. Holes wouldn't stay open to open Hole Complete.</u>				
<u>Neat Cement 2 1/2 Hole Plug Gravel Pack</u>		<u>0</u>	<u>10</u>	<u>10'</u>
		<u>10</u>	<u>62</u>	<u>52'</u>
		<u>62</u>	<u>79</u>	<u>17'</u>
<u>Hole was Dry</u>				

8. WELL CONSTRUCTION
Depth Drilled 80' Feet Depth Cased 79' Feet
HOLE DIAMETER (BIT SIZE)
From To
10" Inches 0 Feet 10' Feet
5 1/4" Inches 10' Feet 80' Feet
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8"</u>		<u>3/8 Wall</u>	<u>+1.6</u>	<u>10'</u>
<u>1"</u>		<u>SCH 80</u>	<u>+1.5</u>	<u>79</u>

Perforations:
Type perforation Horizontal Slots
Size perforation 0.20
From 62 feet to 79 feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal 10' Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From 62 feet to 79 feet

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

Date started 1/15/03
Date completed 1/15/03

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Eklund Drilling Co. Contractor
Address P.O. Box 2748 Contractor
Elko Nevada 89803
Nevada contractor's license number issued by the State Contractor's Board 0030823
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1786
Signed Craig Diner
By driller performing actual drilling on site or contractor
Date 1-15-03