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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. 55217

1. OWNER Newmont mining Corp ADDRESS AT WELL LOCATION Trailor Park
 MAILING ADDRESS P.O. Box 388 Valmy, NV 89438 Trailor Park
 2. LOCATION SE 1/4 SE 1/4 Sec. 18 T. 32 N. 45 E. Lander County
 PERMIT NO. 13603 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. BM-1 LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Static Test - H2O @ 32 1/2'</u>				
<u>Clean well - Rip well - 4 Row Perforation and Absolute well with 80 SKS Super Plug 3360 gal Slurry from bottom of well to top through Drill Pipe</u>				
<u>Pour Cement Seal in top 20' of well 32 32 SKS of Cement 166 gal Slurry.</u>				
<u>Well Perforations were from 20' to 100' 80' Total Bottom 232' of well was Screened.</u>				

8. WELL CONSTRUCTION
 Depth Drilled 332 Feet Depth Cased 332 Feet
 HOLE DIAMETER (BIT SIZE)
 From 18 1/2 Inches To 0 Feet 332 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>14 3/4</u>		<u>3/8</u>	<u>0</u>	<u>332</u>

Perforations:
 Type perforation Leaved
 Size perforation 1/4
 From 100 feet to 332 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 20' Neat Cement
 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 100 feet to 332 feet

Date started 7/24, 1905
 Date completed 7/24, 1905

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 32 1/2' 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 Eklund Drilling Co Contractor
 Address P.O. Box 2748 Contractor
EKO, NV 89803
 Nevada contractor's license number issued by the State Contractor's Board 0030 823
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2089
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 7/24/05

RECEIVED
 05 AUG 26 AM 11:33
 STATE ENGINEERS OFFICE