

COPIES TO
 - DIVISION OF WATER RESOURCES
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 - WELL DRILLER'S COPY

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

OFFICE USE ONLY
 Log No. 97962
 Permit No. _____
 Basin 066

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 56375

1. OWNER Newmont Twin Creeks DW-60 Page 1 of 2 ADDRESS AT WELL LOCATION Twin Creeks Mine Site
 MAILING ADDRESS P.O. Box 669
Carlin, NV. 89822 25 Miles N.E. of Golconda, NV

2. LOCATION NE 1/4 SW 1/4 Sec 30 T 39 N R 43 E Humboldt County
 PERMIT NO. 60048 N/A N/A
 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
Rust Colored Alluvium		0	515	515
Tan & Brown Rock & Clay		515	920	405
Dark Green Rock & Clay		920	1000	80
Black Rock w/ Calcite		1000	1524	524
Steel Bullnose				
Cement Grout between 16" + 24" 0-100'				

8. WELL CONSTRUCTION
 Depth Drilled 1524 Feet Depth Cased 1524 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
38 Inches 0 Feet 30 Feet
31 Inches 30 Feet 301 Feet
22 Inches 301 Feet 1524 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
34"	178.9	0.500	0	30
24	94.6	0.375	0	301
16	62.6	0.375	+2	1524

Perforations:
 Type perforation Louvered
 Size perforation 0.125
 From 359 feet to 379 feet
 From 539 feet to 1505 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 301" Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 100 feet to 1524 feet

9. WATER LEVEL
 Static water level 631 feet below land surface
 Artesian flow No G.P.M. P.S.I.
 Water temperature 73 °F Quality Good

Date started October 4, 20 05
 Date completed October 28, 20 05

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
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1366
 Signed _____
 By driller performing actual drilling on site or contractor
 Date November 9, 2005

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Draw Down (Feet Below Static)		Time (Hours)
G.P.M.	<u>312</u>	<u>61</u>	<u>12</u>

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