

PRINT OR TYPE ONLY
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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. 56877

1. OWNER Newmont mining Corp ADDRESS AT WELL LOCATION Twin Creeks mine
 MAILING ADDRESS P.O. Box 388 Section 8 - North of Golconda, NV
Calmy, NV 89438
 2. LOCATION SW 1/4 NW 1/4 Sec 8 T. 39 N. R. 43 E Humboldt County
 PERMIT NO. M/O-1394 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other PLUG
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. M/O 8-3B LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Alluvium</u>		<u>0</u>	<u>405</u>	<u>405</u>
<u>Consistent rock</u>			<u>405</u>	<u>640</u>
<u>First H2O</u>			<u>640</u>	
<u>Fractured ground</u>			<u>700</u>	<u>720</u>
<u>Hard rock</u>			<u>720</u>	<u>900</u>
<u>H2O encounters, 640' 209pm</u>				
<u>680 - 309pm, 700' - 409pm</u>				
<u>860 - 609pm 890 - 809pm</u>				
<u>900 TO H2O @ 809pm</u>				
<u>Trimmy in 57.5 Ft3 gravel in hole from bottom of hole to 644'</u>				
<u>Place hole Plug in hole from 644' to 50'</u>				
<u>Pour in 150 gal Cement from 50' to ground level weld monument on well.</u>				

8. WELL CONSTRUCTION
 Depth Drilled 900 Feet Depth Cased 897 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 1/8 Inches To 9 Feet
6 Inches 520 Feet 900 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2" Nominal</u>		<u>1/8</u>	<u>0</u>	<u>897</u>
			<u>+3</u>	<u>897</u>

Perforations:
 Type perforation slot
 Size perforation 1/8
 From 657 feet to 857 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 50 Cement Grout
 Placement Method: Pumped Poured Concrete Grout
 Gravel Packed: Yes No
 From 644 feet to 900 feet

9. WATER LEVEL
 Static water level 459' feet below land surface
 Artesian flow NO G.P.M. _____ P.S.I. _____
 Water temperature _____ °F Quality good

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, NV 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 2089
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 4/19/06

Date started April - 8 2006
 Date completed April - 15 2006

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 checked="" type="checkbox"/> Air Lift		<u>N/A</u>	