

FORM 4024

IN THE OFFICE OF THE STATE ENGINEER OF THE STATE OF NEVADA REQUEST FOR A WAIVER FOR TEMPORARY USE OF GROUND WATER FOR MINERAL EXPLORATION

This Space for Office Use Only

1.	<p>The applicant and/or person or company responsible for drilling and plugging the temporary well:</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">Name</td> <td style="text-align: center;">Title</td> <td style="text-align: center;">Company</td> </tr> <tr> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">Street Address or PO Box</td> <td style="text-align: center;">City or Town</td> <td style="text-align: center;">State and ZIP Code</td> </tr> </table>	_____	_____	_____	Name	Title	Company	_____	_____	_____	Street Address or PO Box	City or Town	State and ZIP Code
_____	_____	_____											
Name	Title	Company											
_____	_____	_____											
Street Address or PO Box	City or Town	State and ZIP Code											
2.	<p>The owner of the land, if different than the applicant:</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">Name</td> <td style="text-align: center;">Title</td> <td style="text-align: center;">Company</td> </tr> <tr> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> <td style="width: 33%; text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;">Street Address or PO Box</td> <td style="text-align: center;">City or Town</td> <td style="text-align: center;">State and ZIP Code</td> </tr> </table>	_____	_____	_____	Name	Title	Company	_____	_____	_____	Street Address or PO Box	City or Town	State and ZIP Code
_____	_____	_____											
Name	Title	Company											
_____	_____	_____											
Street Address or PO Box	City or Town	State and ZIP Code											
3.	Telephone number of responsible party: _____												
4.	Estimated project dates: Start Date _____ Completion Date _____												
5.	Length of time waiver is being requested: _____ Not to exceed 1 year												
6.	<p>Location of the well: PLSS, GPS Coordinates and Map Datum are required. _____^{1/4} _____^{1/4} Section _____ T _____ N/S R _____ E, M.D.B. & M.</p> <p> { Latitude (N): _____ } or { UTM (m) E: _____ } Datum { Longitude (W): _____ } { UTM (m) N: _____ } _____</p> <p>County Assessor Parcel Number (APN): _____</p> <p>Street Address (if any): _____</p>												
7.	Is this an existing well? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the NDWR well log number? _____												
8.	Location of mineral exploration and plan of operations: <i>(Attach additional sheets as necessary)</i>												
9.	A detailed description of how water is to be used: <i>(Attach additional sheets as necessary)</i>												

10.	<p>Estimated amount of water to be used:</p> <p>Number of days _____ x Gallons per day _____ = Total Gallons _____</p>
11.	<p>If this waiver is an amendment or change to an original waiver, or if the property has other wells installed, please give the original waiver number. MM- _____</p>
12.	<p>The following items must be submitted with the waiver request:</p> <ul style="list-style-type: none"> • If this is an existing well, submit a copy of the agreement between you and the owner • If the well is or will be located on public land, an Affidavit of Intent to Plug a Well is required • Location Map (i.e., Large Scale, inch = miles) • Site Detail Map (i.e., Small Scale, inch = feet) • A Schematic Drawing of the Well Construction
13.	<p>Signatory Contact Information:</p> <p>_____ Telephone Number _____ Printed Name _____ Email Address _____</p> <p>_____ Mailing Address _____ City, State, ZIP Code _____</p> <p>_____ Signature _____ Date _____</p>

Nevada Division of Water Resources 901 S. Stewart Street, Suite 2002, Carson City, Nevada 89701