

**USE TYPEWRITER OR
BALLPOINT PEN**

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

1. WELL OWNER

Name Gordon Sanders

Address 730 meadowbrook CDA IDAHO 83814

Owner's Permit No. 95-87-N-58

2. NATURE OF WORK

☒ New well
☐ Deepened
☐ Replacement

☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE

☒ Domestic
☐ Irrigation
☐ Test
☐ Municipal

☐ Industrial
☐ Stock
☐ Waste Disposal or Injection

☐ Other _____ (specify type)

4. METHOD DRILLED

☒ Rotary
☒ Air
☐ Hydraulic
☐ Reverse rotary

☐ Cable
☐ Dug
☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other

Thickness	Diameter	From	To
<u>.250</u> inches	<u>6</u> inches	<u>I</u> feet	<u>209</u> feet
<u>.165</u> inches	<u>4</u> inches	<u>180</u> feet	<u>800</u> feet

Was casing drive shoe used? ☒ Yes ☐ No
 Was a packer or seal used? ☒ Yes ☐ No
 Perforated? ☒ Yes ☐ No Drill
 How perforated? ☐ Factory ☐ Knife ☐ Torch
 Size of perforation 1/16 inches by 1/16 inches
 Number _____ From _____ To _____
500 perforations 700 feet 725 feet
500 perforations 750 feet 785 feet
500 perforations 500 feet 600 feet
 Well screen installed? ☐ Yes ☒ No
 Manufacturer's name _____
 Type _____ Model No. _____
 Diameter _____ Slot size _____ Set from _____ feet to _____ feet
 Diameter _____ Slot size _____ Set from _____ feet to _____ feet
 Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
 Placed from _____ feet to _____ feet
 Surface seal depth 20 Material used in seal: ☐ Cement grout
☒ Bentonite ☐ Puddling clay ☐ _____
 Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing
☒ Overbore to seal depth
 Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent
☐ Cemented between strata
 Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location

N

W

E

S

Subdiv

Lot No.

Block No.

County footenat

1/4 Sec. 30

T. 50

N. 3

R. 4

1/4 W.

7. WATER LEVEL

Static water level 40 feet below land surface.

Flowing? ☐ Yes ☒ No G.P.M. flow _____

Artesian closed-in pressure _____ p.s.i.

Controlled by: ☐ Valve ☐ Cap ☐ Plug

Temperature _____ °F. Quality good

Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump
☐ Baller
☒ Air
☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>50</u>	<u>800</u>	<u>1</u> hour

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
<u>8</u>	<u>0</u>	<u>110</u>	<u>Brown clay</u>		☒
<u>8</u>	<u>110</u>	<u>189</u>	<u>sand clay</u>		☒
<u>8</u>	<u>189</u>	<u>207</u>	<u>sand/clay/basalt, chips</u>		☒
<u>6</u>	<u>207</u>	<u>214</u>	<u>blak, whit granet</u>		☒
<u>6</u>	<u>214</u>	<u>225</u>	<u>green hard clay</u>		☒
<u>6</u>	<u>225</u>	<u>800</u>	<u>blak whit granet</u>	☒	☒

50 gpm at 779
pvc packer placed at 240

10.

Work started 4/2/87 finished 4/4/87

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name United drilling Firm No. 414

inc

Address P.O.B. 2499 Date 4/20/87

Signed by (Firm Official) Charles R. Valley Pres

and

(Operator) Tim R. Valley

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT