

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0054683
DRILLING PERMIT NO. 852236
Water Right or Injection Well No. _____

2. OWNER:

Name Allan Whitney
Address PO Box 115
City Santa State ID Zip 83866

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 44 North ☒ or South ☐
Rge. 1 East ☐ or West ☒
Sec. 11 1/4 SW 1/4 NW 1/4
Gov't Lot _____ County Benedict
Lat: 47 : 10 : 46.3 N Long: 116 : 26 : 10.9 W
Address of Well Site 2122 Packer Creek
City Santa

Give at least name of road + Distance to Road or Landmark!
Lt. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>20</u>	<u>125x</u>	<u>Pour Around Pipe</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Lin	Wa
<u>6"</u>	<u>1</u>	<u>259</u>	<u>2.50</u>	<u>Steel</u>	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Air Perforator
Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>210</u>	<u>250</u>	<u>1/4x4</u>	<u>200</u>	<u>6"</u>	<u>Steel</u>	☒	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
<u>None</u>				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

205 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 245 ft. Describe access port or control devices:
Well Cap

44N 01W 11

Office Use Only		
Well ID No.	_____	
Inspected by	_____	
Twp	Rge	Sec
1/4	1/4	1/4
Lat:	:	Long:

12. WELL TESTS:

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>30 gpm</u>	<u>A</u>	<u>From 260 ft</u>	<u>2 hrs</u>

Water Temp. 49 Bottom hole temp. _____
Water Quality test or comments: Cold & clear - No odor
Depth first Water Encounter 245

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>5</u>	<u>Clay - Grey</u>		
<u>8</u>	<u>20</u>	<u>32</u>	<u>Clay - Tan</u>		
	<u>32</u>	<u>60</u>	<u>Clay - Grey</u>		
	<u>60</u>	<u>245</u>	<u>Clay - red</u>		
	<u>245</u>	<u>260</u>	<u>Sept Broken Basalt</u>		
			<u>Hard Basalt w/water</u>		
			<u>30 gpm</u>		

RECEIVED

JUL 16 2008

IDWR/North

Completed Depth 260 (Measurable)
Date: Started 7-9-08 Completed 7-10-08

14. DRILLER'S CERTIFICATION

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

Company Name Interstate Drilling LLC Firm No. 689
Principal Driller R. Smith Date 7-15-08
and
Driller or Operator II D. Smith Date 7-15-08
Operator I _____ Date _____

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

APPLICATION



- Legend**
- QQ
 - Taxlots
 - Application POD
 - Application POU
 - Township/Range
 - Sections

