

Idaho Department of Water Resources

Listing of Driller Reports

Contact	Use	TWP	RNG	SEC	Tract	Gov. Lot	WellAddress	Sub	Bl	L	Gallons Per Minute	Static Water Level	Total Depth	Casing Depth	CSG. DIA.	Construction Date	Permit Number	Tag Number
TURNER, RICK, TURNER, JUDY	Domestic-Single Residence	44N	02W	33	NWSW		1/2 MI WEST OF EMIDA				5	40	500	-55	6	5/28/2003	808693	D0028846
Related Documents																		

• Well Seal

From Depth	To Depth	Material	Amount	Method
0	54	BENTONITE	650#	TOP POUR

• Well Screen

Type	From Depth	To Depth	Slot Size	# of Slots	Diameter	Perforation Method	Screen Type	Material	Installed Flag
Perforation	-460	-500	.125	72	4.5	Saw Cut		PVC	Y

• Well Casing

From Depth	To Depth	Diameter	Type	Gauge	Join Type	Material
-40	-500	4.5	Liner	0.16		PVC
2	-55	6	Casing	0.25	Welded	STEEL

• Well Lithologic Layer

Bore Diameter	From Depth	To Depth	Water	Color	Material	Texture	Descriptor
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• Construction Details

Drilling Company	License Number	Metal Tag Number
TWO U DRILLING LLC	125	D0028846

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 00 28846
DRILLING PERMIT NO. 808693
Water Right or Injection Well No. _____

2. OWNER:

Name Rick & Judy Turner
Address 291 ~~625~~ Water Tower Rd.
City St. Maries State ID Zip 83861

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. 2 East ☐ or West ☒
Sec. 33 1/4 NW 1/4 SW 1/4
Gov't Lot _____ County BENEFIT
Lat: _____ Long: _____
Address of Well Site 1.5 miles E of EMMA
285 Water Tower Rd City EMMA
(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>54'</u>	<u>650#</u>	<u>Top Pour</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 54 ft.
Was drive shoe seal tested? ☒ Y ☐ N How? Air Pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>-55</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4.5"</u>	<u>-40</u>	<u>-500</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

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

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method SAV
Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>-460</u>	<u>-500</u>	<u>1/2" x 4"</u>	<u>72</u>	<u>4.5"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

40 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices:
Tip of casing
44N 2W 33

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>5</u>			<u>1.5</u>

Water Temp. 55.0 Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encounter 745'

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>56'</u>	<u>Soft Granite</u>	☒	☐
<u>6</u>	<u>56</u>	<u>320</u>	<u>Med. Hd Brown Granite</u>	☒	☐
<u>6</u>	<u>320</u>	<u>360</u>	<u>Softer White Granite</u>	☒	☐
<u>6</u>	<u>360</u>	<u>445</u>	<u>Hard Granite</u>	☒	☐
<u>6</u>	<u>445</u>	<u>500</u>	<u>Soft White Green Granite</u>	☒	☐

RECEIVED

NOV 21 2003

IDWR North

Completed Depth 500' (Measurable)

Date: Started 5-27-03 Completed 5-28-03

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 Uhlenkot Drilling Firm No. 126

Principal Driller William Uhlenkot Date 11-14-03

and Driller or Operator II _____ Date _____

Operator I _____ Date _____

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

FORWARD WHITE COPY TO WATER RESOURCES