Form 238-7
6/02

# IDAHO DEPARTMENT OF WATER RESOURCES
# WELL DRILLER'S REPORT

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

**1. WELL TAG NO. D** 0040005
DRILLING PERMIT NO. 833975
Water Right or Injection Well No.

**2. OWNER:**
Name Lancour, Kevin Lancour, Orval
Address PO Box 1697
City Hayden State Id. Zip 83835

**3. LOCATION OF WELL by legal description:**
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 49 North ☒ or South ☐
Rge. 2 East ☒ or SE West ☐ SE
Sec. 30, NW 1/4 (10 acres) NE 1/4 (40 acres) NE 1/4 (160 acres)
Gov't Lot ____ County Shoshone
Lat: : : Long: : :
Address of Well Site 261 Bear Creek Rd. Sturman Rd.
(Give at least name of road + Distance to Road or Landmark) City Enaville
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 |
|---|---|---|---|---|
| Bentonite | 0 | 21 | 200 lbs | overbore |
| | | | | |

Was drive shoe used? ☒Y ☐N Shoe Depth(s) 36'
Was drive shoe seal tested? ☒Y ☐N How? Air pressure

**8. CASING/LINER:**

| Diameter | From | To | Gauge | Material | Casing | Liner | Welded | Threaded |
|---|---|---|---|---|---|---|---|---|
| 6 | +1 | 36 | 250 | Steel | ☒ | ☐ | ☒ | ☐ |
| 4 | -8 | 398 | 220 | PVC. | ☐ | ☒ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |

Length of Headpipe ____ Length of Tailpipe ____
Packer ☐Y ☒N Type N/A

**9. PERFORATIONS/SCREENS PACKER TYPE**
Perforation Method Sawcut
Screen Type & Method of Installation NONE

| From | To | Slot Size | Number | Diameter | Material | Casing | Liner |
|---|---|---|---|---|---|---|---|
| 358 | 398 | 1/8x5 | 80 | 4 | PVC. | ☐ | ☒ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |

**10. FILTER PACK**

| Filter Material | From | To | Weight / Volume | Placement Method |
|---|---|---|---|---|
| | | | | |
| | | | | |

**11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:**
137 ft. below ground Artesian pressure ____ lb.
Depth flow encountered ____ ft. Describe access port or control devices:
Bolted Well Cap

49N 2E 30

**12. WELL TESTS:**
☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

| Yield gal./min. | Drawdown | Pumping Level | Time |
|---|---|---|---|
| 6 | | | |
| | | | |
| | | | |

Water Temp. Cool Bottom hole temp. Cool
Water Quality test or comments: Good
Depth first Water Encounter 240

**13. LITHOLOGIC LOG:** (Describe repairs or abandonment)

| Bore Dia. | From | To | Remarks: Lithology, Water Quality & Temperature | Water Y | Water N |
|---|---|---|---|---|---|
| 8 | 0 | 21 | | | |
| 6 | 21 | 398 | | | |
| | 0 | 4 | Brown Clay | | |
| | 4 | 125 | Soft Brown Shale | | |
| | 125 | 175 | Hard Blue Shale. | | |
| | 175 | 245 | Grey Shale. | X | |
| | 245 | 398 | (Hard) Grey Shale | X | |

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JUN 08 2005
IDWR/North

AQUA DRILLING
& EXPLORATION INC.
PO BOX 2850
HAYDEN, ID 83835-2850

Completed Depth 398' (Measurable)
Date: Started 5-13-05 Completed 5-17-05

**14. DRILLER'S CERTIFICATION**
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

AQUA DRILLING
& EXPLORATION INC.
Company Name Firm No. 163

Principal Driller Scott M. Beaudoin Date
and
Driller or Operator II Wayne Miller Date 5-18-05

Operator I ____ Date

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

FORWARD WHITE COPY TO WATER RESOURCES