

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 846661
 DRILLING PERMIT NO. D0051922
 Water Right or Injection Well No. _____



2. OWNER:
 Name DENNIS H. & LYNNE B. HEITMAN
 Address 623 S ADAMS
 City MOSCOW State ID Zip 83843

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. 4 East ☐ or West ☒
 Sec. 35 1/4 SW 1/4 NW 1/4
 Gov't Lot _____ County BENEFIT
 Lat: _____ Long: _____
 Address of Well Site 575 TOLAND RD.
 City TENSED
 (Give in total 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>80</u>	<u>22.5X</u>	<u>Pour Around Pipe</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 298

Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>-298</u>	<u>.250</u>	<u>Steel</u>	☒ X	☐	☒ X	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☒ Y ☐ N Type formation pecker @ 80'

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method torch

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>140</u>	<u>200</u>	<u>Y&H</u>	<u>28</u>	<u>6</u>	<u>Steel</u>	☒ X	☐

10. FILTER PACK

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

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

69 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 160 ft. Describe access port or control devices: _____

Well Cap

44 N 4W 35

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping level	Time
<u>20 gpm</u>	<u>Air lift from</u>	<u>298</u>	

Water Temp. 50° Bottom hole temp. _____

Water Quality test or comments: cloudy w/some silt

Depth first Water Encounter 160

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>70</u>	<u>Clay - Tan</u>		
	<u>70</u>	<u>160</u>	<u>Clay - Gray</u>		
	<u>160</u>	<u>200</u>	<u>Clay - Gray w/shale + water 20 gpm</u>	☒	
	<u>200</u>	<u>300</u>	<u>Clay - Gray</u>		

RECEIVED

JUN 15 2007

IDWR/North

Completed Depth 300 (Measurable)

Date: Started 5-11-07 Completed 5-15-07

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 ACTION DRILLING inc Firm No. 618

Principal Driller ALVIN CARRIS Date 6-6-07

Driller or Operator II _____ Date _____

Operator I Alvin Carris Date 6-6-07

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