

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

1. WELL TAG NO. D D 0040653
 DRILLING PERMIT NO. 835624
 Water Right or Injection Well No. _____

2. OWNER:

Name Bruce Kidder
 Address 251 Kidder Ln.
 City Plummer State ID Zip 83851

3. LOCATION OF WELL by legal description:

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

Twp. 46 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 1 1/4 NW 1/4 SW 1/4
 Gov't Lot _____
 Lat: _____ Long: _____
 Address of Well Site 251 Kidder Ln.
 City Plummer
 (Give at least name of road + Distance to Road or landmark)
 Lt. _____ Bk. _____ 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>40</u>	<u>10 SX</u>	<u>Pour Around Pipe</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 58'

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>-58</u>	<u>250</u>	<u>steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-12</u>	<u>-482</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>-182</u>	<u>-202</u>	<u>3/4</u>	<u>20</u>	<u>4"</u>	<u>PVC</u>	☐	☒
<u>-422</u>	<u>-462</u>	<u>3/4</u>	<u>44</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

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

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

44' ft. below ground Artesian pressure _____ lb.

Depth flow encountered 186 ft. Describe access port or control devices: _____

well cap
46N 5W 1

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

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>5 gpm</u>	<u>Air lift from 482'</u>		

Water Temp. 48° Bottom hole temp. _____

Water Quality test or comments: clear no odor

Depth first Water Encounter 186

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
<u>8"</u>	<u>0</u>	<u>22</u>	<u>Clay - Tan</u>			
	<u>22</u>	<u>50</u>	<u>Clay - Tan w/shale</u>			
	<u>50</u>	<u>58</u>	<u>Shale - Gray</u>			
<u>6"</u>	<u>58</u>	<u>186</u>	<u>Shale - Gray</u>			
	<u>186</u>	<u>187</u>	<u>Shale - Gray w/water</u>			
			<u>2 1/2 gpm</u>			
	<u>187</u>	<u>346</u>	<u>Shale Gray</u>			
	<u>346</u>	<u>348</u>	<u>Shale gray w/water</u>			
			<u>2 1/2 gpm</u>			
	<u>348</u>	<u>482</u>	<u>Shale - Gray</u>			
			<u>5 gpm Total</u>			

RECEIVED

OCT 11 2005

IDWR/North

Completed Depth 482' (Measurable)

Date: Started 8-30-05 Completed 9-1-05

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 9-25-05

Driller or Operator II _____ Date _____

Operator I Alvin Carris Date 9-25-05

Principal Driller and Rig Operator Required.

Operator-I must have signature of Driller/Operator II.