

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D D0033903
DRILLING PERMIT NO. 817575
Water Right or Injection Well No. _____

2. OWNER:
Name Gretchen Teufen
Address 184 Tyson Rd.
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. 22 1/4 N/W 1/4 N/W 1/4
Gov't Lot _____ County Benedict
Lat: _____ Long: _____
Address of Well Site 184 Tyson Rd
City Santa

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	45	1.55x	Pour Around Pipe

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 222

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	12	222	250	Steel	☒	☐	☒	☐
4"	-10	245	160	PVC	☐	☒	☐	☐

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
-165	-245	3/4	48	4"	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

136 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 240 ft. Describe access port or control devices: _____

Well Cap

44N 1W 22

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

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
75 gpm	Airlift from	245'	

Water Temp. 50° Bottom hole temp. _____

Water Quality test or comments: Clear

Depth first Water Encounter 240

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8"	0	22	Clay Tan		
	22	55	Basalt Gray		
	55	62	Clay Tan		
	62	90	Clay Brown		
	90	105	Clay - Tan - Sandy		
	105	110	Clay - Brown - Hard		
	110	127	Basalt - Gray		
	127	140	Clay - Gray - Hard		
	140	152	Clay - Gray - Soft		
	152	160	Clay - Dark Gray - Hard		
	160	220	Clay - Gray - med		
6"	220	240	Basalt - Gray		
	240	245	Basalt - Gray - Broken w/water 75 gpm		

RECEIVED

JUL 21

IDWR North

RECEIVED

JUL 21 2004

IDWR North

Completed Depth 245 (Measurable)

Date: Started 6-22-04 Completed 6-24-04

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 Firm No. 618

Principal Driller Alvin Carr Date 7-17-04

and Driller or Operator II _____ Date _____

Operator I Alvin Carr Date 7-17-04

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