

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
_____ 1/4 _____ 1/4 _____ 1/4
Lat: : : Long: : :

1. WELL TAG NO. D 28984
 DRILLING PERMIT NO. 807685
 Other IDWR No. _____

2. OWNER:

Name SHANE CAMPBELL
Address 2336 POIRIER RD
City BLANCHARD State SD Zip 57304

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
 W E S
 Twp. 54 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 30 $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$
 Gov't Lot _____ County BONNER $\frac{10}{10}$ acres $\frac{10}{10}$ acres $\frac{160}{160}$ acres
 Lat. : : Long. : :
 Address of Well Site 2336
POIRIER RD City BLANCHARD
 (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/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Barrels	
BENTONITE	0	18	500	TEMP CASING

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 22
Was drive shoe seal tested? ☐ Y ☒ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1	22	250	STEEL	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

Perforations _____ Method _____
Screens _____ Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

87 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices: WELL CAP

54 N 5-W 30

11. WELL TESTS:

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
20+	20'	225'	1 HR

Water Temp. COLD Bottom hole temp. _____

Water Quality test or comments: Good

Depth first Water Encounter 169'

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

[illegible]

RECEIVED
NOV 12 1963
IDW:North

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed. JA

Company Name HUGHES WATER WELLS Firm No. 604

Firm Official Daniel Hughes Date 10-15-03

Driller or Operator James Hall Date 10-15-03

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES