

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0055688
DRILLING PERMIT NO. 853786
Water Right or Injection Well No. _____

2. OWNER:

Name Dick Haynes
Address Po Box 132
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. 14 1/4 NW 1/4 SE 1/4
Gov't Lot _____
County Beneva
Lat: 47 : 09 : 45 N Long: 116 : 25 : 42 W
Address of Well Site 210 Jones Rd. 1.5 miles up
Penfrew Creek City Santa
(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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>25</u>	<u>135K</u>	<u>Pour Around a Pipe</u>

Was drive shoe used? ☒ ☐ N Shoe Depth(s) 78
Was drive shoe seal tested? ☒ ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>78</u>	<u>25</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-28</u>	<u>278</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
Packer ☐ Y ☒ N type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Skill Suw
Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>198</u>	<u>258</u>	<u>1/4x5</u>	<u>150</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:

58 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 230 ft. Describe access port or control devices: _____

well cap

44N 01W 14

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
<u>6 6pm</u>	<u>Air Lift From</u>	<u>278 ft</u>	<u>1.5 hrs</u>

Water Temp. 49 Bottom hole temp. _____
Water Quality test or comments: Clear / No odor

Depth first Water Encounter 8

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>2</u>	<u>TOP Soil</u>		
	<u>2</u>	<u>35</u>	<u>Brown clay / w sand</u>		
<u>8</u>	<u>35</u>	<u>55</u>	<u>Light Gray clay</u>		
<u>6</u>	<u>55</u>	<u>118</u>	<u>Granite (white) 2 gpm</u>	☒	
	<u>118</u>	<u>126</u>	<u>Grey Granite</u>		
	<u>126</u>	<u>278</u>	<u>White Granite w/ water</u>	☒	
			<u>4 6pm</u>		

RECEIVED

OCT 01 2008

IDWR/North

Completed Depth 278 (Measurable)

Date: Started 9-25-08 Completed 9-29-08

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 Interstate Drilling LLC Firm No. 688

Principal Driller Ron Sanchez Date 9/30/08

and Driller or Operator II Dedrick Date 9/30/08

Operator I _____ Date _____

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

FORWARD WHITE COPY TO WATER RESOURCES