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Form 238-7
3/96

POSTED

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

097923

Office Use Only
Inspected by _____
Twp____ Rge____ Sec____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. 92-96-N-37
Other IDWR No. _____

2. OWNER:
Name Ed & Pat LAWSON
Address PO Box 1116
City SANTA Id State Id Zip 83866

3. LOCATION OF WELL by legal description:
Sketch map location must agree with written location.

N / W / E / S

Twp. 44 North ☒ or South ☐
Rge. 1 East ☐ or West ☒
Sec. 27, E 10 acres ½ SW 40 acres 1/4 NW 160 acres 1/4
Gov't Lot ____ County BENEWAH
Lat: : : Long: : :
Address of Well Site TAKE Sheep Ck RD up about 1m to Y TAKE City SANTA
(Give distance, Direction & Road to Town or Landmark)
TAKE Tyson Ck 1/8 m 1st DR ON R.
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 Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	0	175	600 pnds.	pour

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 175
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	175	.25	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
☒ Perforations Method Slotted
☒ Screens Screen Type Plastic

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
175	245	5/16	80	4"	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
80 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

SWNW 27 44N 1W

11. WELL TESTS:
☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
Est. 50 gal.	Air Lift		

Water Temp. Cold Bottom hole temp. Cold
Water Quality test or comments: good
Depth first Water Encountered 240

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	3	Top Soil		X
8	3	80	gray clay		X
8	80	105	orange clay		X
8	105	130	brown clay		X
8	130	165	gray clay		X
8	165	175	Broken Shale rock		X
6	175	235	hard Shale		X
6	235	240	Fractured Shale	X	
6	240	245	hard Shale		X

Completed Depth 245 (Measurable)
Date: Started 11-7-96 Completed 11-8-96

13. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name PRECISION DRILLING Firm No. 558
Firm Official _____ Date 11-11-96
and
Supervisor or Operator _____ Date 11-11-96
(Sign once if Firm Official & Operator)

FOR YOUR WHITE COPY TO WATER RESOURCES