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Form 238-7
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OCT 2 3 1997

NORTHERN REGION
IDWR

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IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

097913

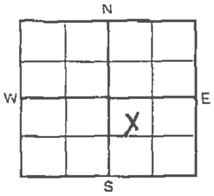
Office Use Only
Inspected by ____________
Twp ____ Rge ____ Sec ____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. D-0000-3209-
Other IDWR No. 92-97-N-18

2. OWNER:
Name Jason Short
Address Box 245
City Santa State Id Zip 83866

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 44 North ☒ or South ☐
Rge. 1 East ☐ or West ☒
Sec. 14 ____1/4 NW 1/4 SE 1/4
10 acres 40 acres 160 acres
Gov't Lot ____ County Benewah
Lat: : : Long: : :
Address of Well Site Renfro Creek and John Rd 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/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	25	12 sks	Pour

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 77
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+3	77	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:
75 ft. below ground Artesian pressure ____ lb.
Depth flow encountered 375 ft. Describe access port or control devices: Welded Cap

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

Yield gal./min	Drawdown	Pumping Level	Time
8			2 hrs

Water Temp. ______ Bottom hole temp. ______
Water Quality test or comments: Muddy and 200' Clay
Depth first Water Encountered 375

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	74	Brown Clay		
	74	77	Gray shale		
6	77	93	Gray Shale		
	93	162	Brown Clay		
	162	264	White Silty Clay		
	264	375	Gray Shale	y	
	375	395	Light Gray Shale		
			unable To clear		
			water flow		
			Not a usable well		

Completed Depth 395 (Measurable)
Date: Started 9/13/97 Completed 9/24/97

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 All-Ways Drilling Inc Firm No. 510
Firm Official Stanley K Wolfe Date 9/26/97
and
Supervisor or Operator R. Dezit Date 9/26/97
(Sign once if Firm Official & Operator)

NWSE 14 44N 1W

[illegible] WHITE [illegible] WATER RESOURCES

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WELL DRILLER'S REPORT

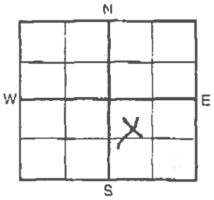
Use Typewriter or Ballpoint Pen 097914

Office Use Only
Inspected by ______
Twp ____ Rge ____ Sec ____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. D000- -3210 -
Other IDWR No. 92-97-N-19

2. OWNER:
Name Jason Short
Address Box 245
City Santa State Id Zip 83866

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



Twp. 44 North ☒ or South ☐
Rge. 1 East ☐ or West ☒
Sec. 14, ____ 1/4 NW 1/4 SE 1/4
10 acres 40 acres 160 acres
Gov't Lot ____ County Benewah
Lat: : : Long: : :
Address of Well Site Renfro Creed
2nd Joan Rd 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/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BentoniTe	0	26	14sks	Poor

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	78	250	Steel	☒	☐	☒	☐
4	-70	330	160	Pvc	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
☐ Perforations Method ____
☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
290	310		20	7/16	Pvc	☐	☒
250	270		20	7/16	Pvc	☐	☒
210	230		20	7/16	Pvc	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
80 ft. below ground Artesian pressure ____ lb.
Depth flow encountered 305 ft. Describe access port or control devices: well Cap

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

Yield gal./min.	Drawdown	Pumping Level	Time
5			1hr

Water Temp. Cold Bottom hole temp. ____
Water Quality test or comments: Cloudy
Depth first Water Encountered ____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	70	BrowN Clay		
	70	78	Grey Shale		
6	78	330	Grey Shale (Med)	Y	

Completed Depth 330 (Measurable)
Date: Started 9/26/97 Completed 9/28/97

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 All-ways Drilling Inc Firm No. 510
Firm Official Stanley K Walf Date 10/1/97
and
Supervisor or Operator R. Degitz Date 10/1/97
(Sign once if Firm Official & Operator)

NWSE 14 44N 1W

FORWARD WHITE COPY TO WATER RESOURCES