

Form 238-7  
6/02

IDAHO DEPARTMENT OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

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

**1. WELL TAG NO. D D0054025**

DRILLING PERMIT NO. --

Water Right or Injection Well No. --

**2. OWNER**

Name **JAMES JURNES**

**CORRECTED REPORT**

Address **3760 EASTWAY ROAD**

City **SOUTH EUCLID**

State **OH**

Zip **44118**

**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. **2** East ☐ or West ☒

Sec. **28** 1/4 **NE** 1/4 **NE** 1/4

Gov't Lot \_\_\_\_\_ County **BENEWAH**

Lat: : : Long: : :

Address of Well Site **1/4 MILE NORTH ON JOHN CREEK ROAD**

City **EMIDA**

(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 |
|---------------|------|-----|-----------------|-----------------------|
| BENTONITE     | 0    | 130 | 880             | 880                   |
|               |      |     |                 | TOP POUR              |

Was drive shoe used? ☒ Y ☐ N

Shoe Depth(s) **-128**

Was drive shoe seal tested? ☒ Y ☐ N

How? **AIR PRESSURE**

**8. CASING/LINER:**

| Diameter | From | To  | Gauge | Material | Casing                              | Liner                               | Welded                              | Threaded                 |
|----------|------|-----|-------|----------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 6"       | +2   | 128 | .250  | Steel    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4.5      | 115  | 175 | 160   | PVC      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Length of Headpipe **N/A**

Length of Tailpipe **N/A**

Packer ☐ Y ☒ N Type \_\_\_\_\_

**9. PERFORATIONS/SCREENS PACKER TYPE**

Perforation Method **SAW**

Screen Type & Method of Installation **N/A**

| From | To  | Slot Size | Number | Diameter | Material | Casing                   | Liner                               |
|------|-----|-----------|--------|----------|----------|--------------------------|-------------------------------------|
| 137  | 177 | 1/8X4     | 42     | 4.5      | PVC      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**10. FILTER PACK**

| Filter Material | From | To | Weight/Volume | Placement Method |
|-----------------|------|----|---------------|------------------|
|                 |      |    |               |                  |

**11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:**

**62** ft. below ground

Artesian pressure -- lb.

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

**TOP OF CASING**

**12. WELL TESTS:**

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

| Yield gal./min. | Drawdown | Pumping Level | Time |
|-----------------|----------|---------------|------|
| 28              |          |               | 1.5  |

Water Temp. **55**

Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: **GOOD**

Depth first Water Encounter **127**

**13. LITHOLOGIC LOG: (Describe repairs or abandonment)**

Water

| Bore Dia. | From | To  | Remarks: Lithology, Water Quality & Temperature | Y | N |
|-----------|------|-----|-------------------------------------------------|---|---|
| 10        | 0    | 22  | BRN CLAY                                        |   | X |
| 10        | 22   | 30  | HD BLACK BASALT                                 |   | X |
| 10        | 30   | 77  | HD BLACK BASALT                                 |   | X |
| 10        | 77   | 100 | BROKEN BRN BASALT                               |   | X |
| 10        | 100  | 122 | STICKY GRY CLAY                                 |   | X |
| 6         | 122  | 138 | MED BLACK BASALT                                | X |   |
| 6         | 138  | 177 | HD BLACK BASALT                                 |   | X |

RECEIVED

OCT 30 2007

IDWR/North

Completed Depth **177**

(Measurable)

Date: Started **9/05/07**

Completed **9/05/07**

**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 **TWO D DRILLING, LLC**

Firm No. **125**

Principal Driller

Date **9/10/07**

and

Driller or Operator II

Date

Operator I

Date

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

FORWARD COPY TO WATER RESOURCES

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