

Form 238-7
6/02IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT1. WELL TAG NO. D 00054524
DRILLING PERMIT NO. _____
Water Right or Injection Well No. _____

2. OWNER:

Name LAWRENCE JOSEPH Phillips
Address 4426 S. 2350 W.
City ROY State UT Zip 84067

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. 24 1/4 N/E 1/4 S/W 1/4
Gov't Lot _____ County BENEFANLat: _____ Long: _____
Address of Well Site 3230 ELKHORN MEADOWS
City FERNWOOD(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>Benotite</u>	<u>0</u>	<u>60</u>	<u>12 SX</u>	<u>Pour Around Pipe</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 90'Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>-90</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☒ Y ☐ N Type Formation Packer @ 60'
on 6" casing

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method none

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
	<u>none</u>					☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
<u>none</u>				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

no water ft. below ground Artesian pressure _____ lb.

Depth flow encountered none ft. Describe access port or control devices: _____well cap

Office Use Only

Well ID No. _____
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 _____ 1/4 _____ 1/4 _____
Lat: _____ Long: _____

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min	Drawdown	Pumping Level	Time
<u>0</u>	<u>3 pm</u>		

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: no water

Depth first Water Encounter _____

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>45</u>	<u>Clay Tan</u>		
	<u>45</u>	<u>90</u>	<u>Clay + Gravel</u>		
<u>6</u>	<u>90</u>	<u>120</u>	<u>Clay - Grey</u>		
	<u>120</u>	<u>132</u>	<u>Orange - Clay</u>		
	<u>132</u>	<u>150</u>	<u>Tan Clay w/ Granite</u>		
	<u>150</u>	<u>190</u>	<u>pink Granite</u>		
	<u>190</u>	<u>203</u>	<u>Granite - Yellow - Broken</u>		
	<u>203</u>	<u>212</u>	<u>Granite - Pink</u>		
	<u>212</u>	<u>224</u>	<u>Granite - Black + white</u>		
	<u>224</u>	<u>240</u>	<u>Granite - pink</u>		
			<u>Wants to Deepen</u>		
			<u>Later</u>		

Completed Depth 240 (Measurable)Date: Started 5-29-08 Completed 5-30-08

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 ACTION DRILLING INC Firm No. 618Principal Driller ALVIN CARRIS Date 6-3-08and Driller or Operator II Alvin Carris Date 6-3-08

Operator I _____ Date _____

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.