

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 DOO 54716
DRILLING PERMIT NO. 853 852699
Water Right or Injection Well No. _____

2. OWNER:
Name Chris Schatz
Address 601 Ellis Lane
City St. Maries State ID Zip 83861

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 46 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 9 1/4 S/E 1/4 N/E 1/4
Gov't Lot _____
County Benevol
Lat: : : Long: : :
Address of Well Site 601 Ellis Lane
City St. Maries

(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	38	76X	Bar Around Pipe

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 38
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	-38	250	Steel	☐	☒	☒	☐
4	-20	-240	160	PVC	☐	☒	☐	☐

Length of Headpipe none Length of Tailpipe _____
Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill
Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-180	-242	3/4	66	4	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
none				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

151 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 218 ft. Describe access port or control devices: Well Cap

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
10 gpm	Air lift from	242	

Water Temp. 50° Bottom hole temp. _____
Water Quality test or comments: clear no odor

Depth first Water Encounter 218

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	3	Clay - Tan		
	3	25	Basalt - Broken		
	25	38	Basalt - Gray		
6	38	218	Basalt - Gray		
	218	220	Basalt - Gray w/ water		
			10 gpm		
	222	242	Basalt Gray		

RECEIVED

SEP 15 2008

IDWR/North

Completed Depth 242 (Measurable)

Date: Started 8-5-08 Completed 8-6-08

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. 618

Principal Driller Alvin Carrin Date 9-1-08
and
Driller or Operator II _____ Date _____

Operator I Alvin Carrin Date 9-1-08

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

46N 04W 09

FORWARD WHITE COPY TO WATER RESOURCES