

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 D0053813
DRILLING PERMIT NO. 848613
Water Right or Injection Well No. _____

2. OWNER:

Name CHAD & LONI HALL
Address PO Box 331
City PINEHURST State ID Zip 83850

3. LOCATION OF WELL by legal description:

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

Twp. 48 North ☒ or South ☐
Rge. 2 East ☒ or West ☐
Sec. 5 1/4 SW 1/4 SE 1/4
Gov't Lot _____ County SHOSHONE
Lat: : : Long: : :
Address of Well Site 100 CIRCLE DRIVE
City PINEHURST
(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>Bentonite</u>	<u>0</u>	<u>65</u>	<u>14 SX</u>	<u>Pour Around Pipe</u>

Was drive shoe used? ☒ Yes ☐ No Shoe Depth(s) 230

Was drive shoe seal tested? ☒ Yes ☐ No How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>-238</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-20</u>	<u>-362</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ 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
<u>-302</u>	<u>-362</u>	<u>3/4</u>	<u>60</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

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

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

180 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 238 ft. Describe access port or control devices: _____

Well Cap
48 N 2E S

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>18 gpm</u>	<u>Airlift</u>	<u>from</u>	<u>362</u>

Water Temp. 52° Bottom hole temp. _____

Water Quality test or comments: Clear

Depth first Water Encounter 238

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
<u>8</u>	<u>0</u>	<u>5</u>	<u>clay - Tan</u>			
	<u>5</u>	<u>8</u>	<u>Clay - Green</u>			
	<u>8</u>	<u>120</u>	<u>Clay - Tan</u>			
	<u>120</u>	<u>180</u>	<u>Clay - Tan w/shale</u>			
	<u>180</u>	<u>225</u>	<u>Clay - Gray w/shale</u>			
	<u>225</u>	<u>238</u>	<u>Shale - Gray</u>			
<u>6</u>	<u>238</u>	<u>240</u>	<u>shale w/water</u>			☒
			<u>29 gpm</u>			
	<u>240</u>	<u>315</u>	<u>shale - Gray</u>			
	<u>315</u>	<u>380</u>	<u>Shale - Gray w/water</u>			☒
			<u>49 gpm</u>			
	<u>320</u>	<u>340</u>	<u>Shale Gray w/water</u>			☒
			<u>12 gpm</u>			
	<u>340</u>	<u>362</u>	<u>Shale Gray</u>			

RECEIVED

NOV 13 2007

IDWR/North

Completed Depth 362 (Measurable)

Date: Started 8-21-07 Completed 8-23-07

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 Action Drilling Inc Firm No. 618

Principal Driller Alvin Carris Date 9-20-07

Driller or Operator II _____ Date _____

Operator I Alvin Carris Date 9-20-07

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

HALL, CHAD, HALL, LONI	Domestic	48N	02E	5	SWSE	100 CIRCLE DR	18	180	362	362	6/8/23/2007	848613	D0053813
<u>Related Documents</u>													