

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 0040072
DRILLING PERMIT NO. 832379
Water Right or Injection Well No. _____

2. OWNER:
Name Gary Finney
Address 645 E Kingswood Lane
City CDA State ID Zip 83814

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 45 North ☒ or South ☐
Rge. 3 East ☒ or West ☐
Sec. 15 1/4 N/E 1/4 W/E 1/4
Gov't Lot _____ County Shoshone
Lat: _____ Long: _____
Address of Well Site St Joe Road - Spring Creek
City Calder
(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>30</u>	<u>15 sacks</u>	<u>Pour</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 66'
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>12</u>	<u>66</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>20</u>	<u>325</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>265</u>	<u>305</u>	<u>1"</u>	<u>28</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

68' ft. below ground Artesian pressure _____ lb.
Depth flow encountered 155 ft. Describe access port or control devices: cap

12. WELL TESTS:

☐ Pump	☐ Bailer	☒ Air	☐ Flowing Artesian
Yield gal./min.	Drawdown	Pumping Level	Time
<u>6 GPM</u>			<u>2 hrs</u>

Water Temp. 46 Bottom hole temp. _____

Water Quality test or comments: clear no odor

Depth first Water Encounter 155

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>fill</u>			
	<u>5</u>	<u>30</u>	<u>Decomposed Granite</u>			
	<u>30</u>	<u>50</u>	<u>Granite Broken Soft</u>			
	<u>50</u>	<u>70</u>	<u>Granite Blue</u>			
<u>6"</u>	<u>70</u>	<u>80</u>	<u>Granite Blue</u>			
	<u>80</u>	<u>130</u>	<u>Granite Blue/white</u>			
	<u>130</u>	<u>155</u>	<u>Granite Salt Pepper</u>			
	<u>155</u>	<u>250</u>	<u>Granite Black</u>			
	<u>250</u>	<u>325</u>	<u>Granite Salt Pepper</u>			

RECEIVED

MAY

IDAHO DEPARTMENT OF WATER RESOURCES

Completed Depth 325 (Measurable)
Date: Started 4/12/05 Completed 4/13/05

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 Always Drilling, Inc Firm No. 570

Principal Driller Stanley Wolf Date 5/10/05

and Driller or Operator II Stanley Wolf Date 5/10/05

Operator I _____ Date _____

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

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7813

91-XXXXX CSRBA CLAIM SHOSHONE PARCEL RP45N03E143200

