Form 238-7
1/78

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

USE TYPEWRITER OR BALLPOINT PEN

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

ENT'D

1. WELL OWNER

Name U.S. Forest Service

Address Wallace Idaho

Owner's Permit No. 94-80-N-6 Kittrice

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning) _____

3. PROPOSED USE

☐ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☒ Other Campground (specify type)

4. METHOD DRILLED

☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
0250 inches	6 inches +	13 feet	25' feet
inches	inches	feet	feet
inches	inches	feet	feet
inches	inches	feet	feet

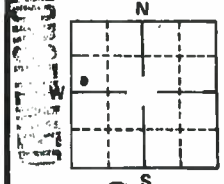
Was casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ Torch
Size of perforation _____ inches by _____ inches

Number	From	To
perforations	feet	feet
perforations	feet	feet
perforations	feet	feet

Well screen installed? ☐ Yes ☒ No
Manufacturer's name _____
Type _____ Model No. _____
Diameter ____ Slot size ____ Set from ____ feet to ____ feet
Diameter ____ Slot size ____ Set from ____ feet to ____ feet
Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
Placed from _____ feet to _____ feet
Surface seal depth 18' Material used in seal: ☒ Cement grout ☐ Puddling clay ☐ Well cuttings
Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing ☐ Overbore to seal depth
Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata
Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____ Block No. _____

County Shoshone

SW ¼ NW ¼ Sec. 30, T. 51N N/S, R. 4E E/W.

7. WATER LEVEL

Static water level 8 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature ____ °F. Quality _____

8. WELL TEST DATA

☒ Pump ☐ Bailer ☐ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
20	48	1/4
16	40	1/2
12	37	2 hrs
12	26	3½ hr

9. LITHOLOGIC LOG

Hole Diam.	Depth From	Depth To	Material	Water Yes	Water No
10"	0	18	Gravel, Boulders + Clay		X
6"	18	25	Gravel, Boulders + Cl	X	
	25	30	Granite		

Cobbles

RECEIVED JUL 10 1980 Department of Water Resources

RECEIVED JUN 30 1980 Department of Water Resources

10. Work started 5/24/80 finished 5/24/80

11. DRILLERS CERTIFICATION Cbdl

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name Hillman Drilling Firm No. 372

Address Livingston Mont 59047 Date 5/24/80

Signed by (Firm Official) Ed Hellma

and

(Operator) _____

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT

SCANNED MAR 0 9 2015