

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 0054328
 DRILLING PERMIT NO. _____
 Water Right or Injection Well No. _____

2. OWNER:
 Name Jack & Barbara Carpenter
 Address P.O. Box 133
 City Blanchard State ID Zip 83804

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 54 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 22 1/4 NW 1/4 NW 1/4
 Gov't Lot _____ County Bonner
 Lat: : : Long: : :
 Address of Well Site Mountain View Rd
 City Blanchard
 (Give at least name of road + Distance to Road or Landmark)
 Lt. 2 Blk. 2 Sub. Name Spirit Valley Farms

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>18</u>	<u>400lbs</u>	<u>overbore</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 182 1/2
 Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6</u>	<u>+1 1/2</u>	<u>182 1/2</u>	<u>250</u>	<u>steel</u>	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method _____
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
125 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: cap

12. WELL TESTS:
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Pumping Level	Time
<u>25+</u>		<u>180</u>	<u>2hr</u>

 Water Temp. cold Bottom hole temp. _____
 Water Quality test or comments: clear

13. LITHOLOGIC LOG: (Describe repairs or abandonment) Water
 Depth first Water Encounter 125

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>18</u>	<u>sand&gravel</u>		
<u>6</u>	<u>18</u>	<u>76</u>	<u>sand&gravel</u>		
	<u>76</u>	<u>102</u>	<u>sand</u>		
	<u>102</u>	<u>167</u>	<u>sand&some gravel</u>	<u>x</u>	
	<u>167</u>	<u>184</u>	<u>sand&gravel some tan clay</u>	<u>x</u>	

RECEIVED
 MAY 16 2008
 IDWR/North

Completed Depth 184ft (Measurable)
 Date: Started 5-7-08 Completed 5-8-08

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 Bronson Water Wells Firm No. 360
 Principal Driller Cliff Bronson Date 5/9/08
 and
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____

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

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