



IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT
Use Typewriter or Ballpoint Pen

77528

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
_____ 1/4 _____ 1/4 _____ 1/4
Lat: _____ Long: _____

1. DRILLING PERMIT NO. 93-96-N-7
Other IDWR No. _____

2. OWNER:
Name VK. CARNELL
Address P.O. Box 91
City St. Maries State Id Zip 83861

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
W
E
S
Twp. 46 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 33 1/4 SE 1/4 SE 1/4
Gov't Lot _____ County _____
Lat: _____ Long: _____
Address of Well Site 1/2 mi up Riverbank
Ed. on 1/2 mi up Riverbank City ST. MARIES
400 Ft. 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/FILTER PACK		AMOUNT		METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	90	600 lbs.	pooured

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____
Was drive shoe seal tested? ☒ Y ☐ N How? air Poured

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	90	.280	Steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method Air Perfor
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
78	87	1/16	30	1/4	Steel	☒	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

11. WELL TESTS:

☐ Pump ☐ Bailor

☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
3 To 4 gallons	Est.		

Water Temp. Cold Bottom hole temp. Cold

Water Quality test or comments: good

Depth first Water Encountered 305

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	3	Top Soil		X
8	3	17	gray clay		X
8	17	23	orange clay		X
8	23	46	gray clay		X
8	46	82	Brown clay/broken		X
8	82	90	gray clay + Fractured basalt	X	
6	90	120	Broken basalt		X
6	120	260	hard basalt		X
6	260	305	Fractured basalt	X	
6	305	360	hard basalt		X
6	360	370	Fractured basalt	X	
6	370	385	hard basalt		X

SCANNED

DEC 21 2017

Completed Depth 385 (Measurable)

Date: Started 10/26/96 Completed 11/1/96

13. DRILLER'S CERTIFICATION

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

Firm Name Precision Drilling Firm No. 558

Firm Official James J. Carr Date 11-4-96

and _____

Supervisor or Operator James J. Carr Date 11-4-96

(Sign once if Firm Official & Operator)

SESE 33 46N 3W
FORWARD WHITE COPY TO WATER RESOURCES