

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 0041372

DRILLING PERMIT NO. 839447

Water Right or Injection Well No. _____

2. OWNER:

Name Wade Simons

Address 1130 Mtn. Home Rd

City Potlatch State Id. Zip 83855

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>approx. 12</u>		<u>189</u>	<u>1 Hr.</u>

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

13. LITHOLOGIC LOG: (Describe repairs or abandonment) _____ Depth first Water Encounter 119

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
8 1/2	109	131	<u>basalt firm</u>	☒
8 1/2	131	136	<u>Red Cinders</u>	☒

RECEIVED
MAY 23 2006
IDWR/North

Completed Depth 136 (Measurable)

Date: Started 4/21/06 Completed 4/22/06

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 WITT Well Drilling Firm No. 58

Principal Driller Roger Wett Date 4/23/06

Driller or Operator II _____ Date _____

Operator I _____ Date _____

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

3. LOCATION OF WELL by legal description:

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

Twp. 41 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 15 NW 1/4 NW 1/4
Gov't Lot _____ 1/4

Lat: _____ Long: _____

Address of Well Site 1031 UT Lane City Princeton

LI. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK check all that apply

☐ New Well ☒ Modify ☐ Abandonment ☐ Other (Replacement etc.)

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method

Was drive shoe used? ☐ Y ☐ N Shoe Depth(s) _____

Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
					☐	☐	☐	☐

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:

35 ft. below ground

Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____