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NORTHERN REGION IDWR

Form 238-7 3/97

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

96076

Office Use Only
Inspected by _____
Twp____ Rge____ Sec ____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

Tag No D0003188

1. DRILLING PERMIT NO. 87-97-N 33

Other IDWR No. D3188

2. OWNER:

Name Vernon Judkins

Address P.O. Box 116

City Garfield State WA Zip 99130

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N / W / E / S — X

Twp. 40 North X or South ☐

Rge. 6 East ☐ or West X

Sec. 12 NW 1/4 (10 acres) NW 1/4 (40 acres) ____ 1/4 (160 acres)

Gov't Lot ____ County Latah

Lat: : : Long: : :

Address of Well Site Trestle Road

(Give at least name of road + Distance to Road or Landmark) City Viola

Lt. ____ Blk. ____ Sub. Name ____

4. USE:

X Domestic ☐ Municipal ☐ Monitor ☐ Irrigation

☐ Thermal ☐ Injection ☐ Other ____

5. TYPE OF WORK check all that apply (Replacement etc.)

X New Well ☐ Modify ☐ Abandonment ☐ Other ____

6. DRILL METHOD

X Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other ____

7. SEALING PROCEDURES

SEAL/FILTER PACK Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	0	38	250	Dry

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

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8"	-2	36	0250	Steel	X	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS

X Perforations Method Slotted

☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
105'	65'	3/16	50	4"	PVC	☐	X
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

____ ft. below ground Artesian pressure ____ lb.

Depth flow encountered 36 ft. Describe access port or control devices: ____

11. WELL TESTS:

☐ Pump ☐ Bailer X Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
10			

Water Temp. 60° Bottom hole temp. ____

Water Quality test or comments: Good

Depth first Water Encountered ____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
10	0	38	Brown Clay		X
6"	38	75	Black Blst.		X
6"	75	85	Black Green Blst.	X	
6"	85	105	Gray Black Blst		X

Completed Depth 105' (Measurable)

Date: Started 8-21-97 Completed 8-21-97

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 JRU Well Drilling Firm No. 539

Firm Official Jim Nehls Date ____

and

Supervisor or Operator ____ Date ____

(Sign once if Firm Official & Operator)

NWNW 12 40N 6W

FORWARD WHITE COPY TO WATER RESOURCES