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Form 238-7

3/95 FEB 12 1998

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

NORTHERN REGION

IDWR

1. DRILLING PERMIT NO. 87-98-N-3

Other IDWR No. 00003363

2. OWNER:

Name CATHERINE J. Bielenberg

Address Rt 2 Box 14A

City Genesee State ID Zip 83832

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N		Twp. <u>37</u>		North ☒ or South ☐	
W		Rge. <u>5</u>		East ☐ or West ☒	
S		Sec. <u>24</u>		NE 1/4 <u>SE</u> 1/4 <u>SE</u> 1/4 <u>SE</u> 1/4	
		Gov't Lot		County <u>NEE PERCE</u>	
		Lat:		Long:	
		Address of Well Site <u>2265 Central</u>		City <u>Genesee</u>	

Garage Rd.
(Give at least name of road - Distance to Road or Landmark)

Lt. _____ 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		
<u>Bentonite</u>	<u>0</u>	<u>65</u>	<u>12 sacks</u>		<u>Day Pump</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 68'

Was drive shoe seal tested? ☒ Y ☐ N How? AIR

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>8"</u>	<u>+2</u>	<u>66</u>	<u>025</u>	<u>Steel</u>	☒	☐	☒	☐
<u>6"</u>	<u>-50</u>	<u>130</u>		<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

- ☒ Perforations Method Skull Saw
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>90</u>	<u>130</u>	<u>6 1/8"</u>	<u>60</u>	<u>6"</u>	<u>PVC</u>	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

35 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 100 ft. Describe access port or control devices: Removable Well Cap

NESE 24 37N 5W

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

11. WELL TESTS:

- ☐ Pump ☐ Bailor

- ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>45</u>		<u>120'</u>	<u>1hr</u>

Water Temp. 52° Bottom hole temp. _____

Water Quality test or comments: Clear & Clean

Depth first Water Encountered 60

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>3</u>	<u>Soil</u>		☒
<u>10</u>	<u>3</u>	<u>30</u>	<u>Clay</u>		☒
<u>10</u>	<u>30</u>	<u>45</u>	<u>Broken Basalt</u>		☒
<u>10</u>	<u>45</u>	<u>60</u>	<u>Clay</u>		☒
<u>10</u>	<u>60</u>	<u>65</u>	<u>Lava</u>	☒	☒
<u>8</u>	<u>65</u>	<u>130</u>	<u>Basalt</u>	☒	

H2O At 60 was Full of N. triphos and was capped out with steel

Completed Depth 130' (Measurable)

Date: Started 2-3-98 Completed 2-4-98

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 Burs Well Drilling Firm No. 103

Firm Official [Signature] Date 2-10-98

and Supervisor or Operator [Signature] Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE BOX TO WATER RESOURCES