

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only

Inspected by _____

Twp _____ Rge _____ Sec _____

1/4 1/4 1/4

Lat: _____ Long: _____

1. WELL TAG NO. D 0041008

DRILLING PERMIT NO. 838083

Other IDWR No.

2. OWNER:

Name LEON & KERI LEVORCE

Address **1229 E. COVE RD**

City **POTLATCH** State **ID** Zip **83855**

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 41 North ☒ or South ☐
 Rge. 6 East ☐ or West ☒
 Sec. 12
 Gov't Lot _____
 Lat: _____ Long: _____
 Address of Well Site 100 FT S. BLUE RD.
 City POTLATCH
 Lt. _____ Bik. _____ Sub. Name _____
 _____ (Give at least name of road + Distance to Road or Landmark)

4. USE:

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

5. TYPE OF WORK: check all that apply

☒ New Well ☐ Modify ☐ Abandonment ☐ Other

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES:

Seal/Filler Pack			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	22	8	DRY

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 22

Was drive shoe seal tested? ☒ Y ☐ N How? 300 PSI

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	+1	22	1/4	STEEL	☒	☐	☒	☐
4 1/2	10	280	200	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS:

☒ Perforations Method **SAW**
☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Linear
220	280	1/8	120	4 1/2	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

95 _____ ft. below ground Artesian pressure

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

devices: **WELL CAP**

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
11		270	1 HR

Water Temp. 54 Bottom hole temp

Water Quality test or comments:

Depth first Water Encounter 253

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]**13. DRILLER'S CERTIFICATION:**

WE CERTIFY:
We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name **MCPHERSON & WRIGHT DRILLING** Firm No. **0376**

Firm Official *Lee H. Rupp* Date 1/24/2006

Driller or Operator Paul Wright Date 1/24/2006

(Sign once if Firm Official & Operator)

44 N 6W 12

FORWARD WHITE COPY TO WATER RESOURCES