

Form 238-7 IDAHO DEPARTMENT OF WATER RESOURCES
6/02 **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 D00 53874

DRILLING PERMIT NO. --

Water Right or Injection Well No. --

CORRECTED REPORT

2. OWNER

Name LARRY GERMER

Address 140 EAST PALOUSE RIVER DRIVE

City MOSCOW

State ID

Zip 83843

3. LOCATION OF WELL by legal description:

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

Twp. 39

North ☒

or

South ☐

Rge. 5

East ☐

or

West ☒

Sec. 30

1/4

NE

1/4

NW

1/4

10 acres

40 acres

160 acres

Gov't Lot --

County LATAH

Lat: _____

Long: _____

Address of Well Site 3055 HWY 95

City MOSCOW

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

Lt. 3

Blk. _____

Sub. Name SKY VIEW

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 Material	From	To	Weight / Volume	Seal Placement Method
BENTONITE	0	120	400	400
				TOP POUR

Was drive shoe used? ☒ Y

☐ N

Shoe Depth(s) -120

Was drive shoe seal tested? ☒ Y

☐ N

How? AIR

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	120	.250	Steel	☒	☐	☒	☐
4.5	-15	375	160	PVC	☐	☒	☐	☐

Length of Headpipe

Length of Tailpipe

Packer ☐ Y

☒ N

Type

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method SAW

Screen Type & Method of Installation

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
335	375	1/8x4	42	4.5	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight/Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

4 ft. below ground

Artesian pressure _____ lb.

Depth flow encountered _____ ft.

Describe access port or control devices:

TOP OF CASING

12. WELL TESTS:

☐ Pump

☐ Bailer

☒ Air

☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
2			1.5

Water Temp. 55

Bottom hole temp. _____

Water Quality test or comments: GOOD

Depth first Water Encounter 165

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
10	0	100	CLAY	X
10	100	120	MED HD GRANITE	X
6	120	165	HD WHITE GRANITE	X
6	165	204	SOFT BR & GRN GRANITE	X
6	204	318	SOFT BR GRANITE	X
6	318	375	HD WHITE GRANITE	X

RECEIVED

OCT 30 2007

IDWR/North

Completed Depth 375

(Measurable)

Date: Started 8/22/07

Completed 8/22/07

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 TWO U DRILLING, LLC

Firm No. 125

Principal Driller

Date 9/03/01

and

Driller or Operator II

Date 9-16-07

Operator I

Date

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.

FORWARD COPY TO WATER RESOURCES

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SCANNED

AUG 17 2008

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____		Long: _____	

1. WELL TAG NO. D D0053864

DRILLING PERMIT NO. --

CORRECTED REPORT 12. WELL TESTS:

Water Right or Injection Well No. --

2. OWNER

Name **LARRY GERMER**

Address **140 EAST PALOUSE RIVER DRIVE**

City **MOSCOW**

State **ID**

Zip **83843**

3. LOCATION OF WELL by legal description:

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

Twp. **39** North ☒ or South ☐
Rge. **5** East ☐ or West ☒
Sec. **30** 1/4 **NE** 1/4 **NW** 1/4
10 acres 40 acres 160 acres

Gov't Lot _____ County **LATAH**

Lat: _____ Long: _____

Address of Well Site **3055 HWY 95**

City **MOSCOW**

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

Lt. **2** Blk. _____ Sub. Name **SKYVIEW**

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 Material	From	To	Weight / Volume		Seal Placement Method
BENTONITE	0	40	400	400	TOP POUR

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) **-38**

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	38	.250	Steel	☒	☐	☒	☐
4.5	-2	200	160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method **SAW**

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
160	200	1/8X4	42	4.5	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight/Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

67 ft. below ground Artesian pressure -- lb.

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

TOP OF CASING

Yield gal./min.	Drawdown	Pumping Level	Time
3			1.5

Water Temp. **55**

Bottom hole temp. _____

Water Quality test or comments: **GOOD**

Depth first Water Encounter **150**

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
10	0	38	CLAY	X
6	38	145	SOFT BR GRANITE	X
6	145	188	GREEN GRANITE	X
6	188	200	HD WHITE GRANITE	X

RECEIVED

OCT 30 2007

WATER RESOURCES

Completed Depth **200** (Measurable)

Date: Started **8/27/07**

Completed **8/27/07**

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 **TWO U DRILLING, LLC** Firm No. **125**

Principal Driller **[Signature]** Date **9/03/07**

and Driller or Operator II **[Signature]** Date **10/16-07**

Operator I _____ Date _____

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

FORWARD COPY TO WATER RESOURCES

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AUG 12 2008

PARCEL LOCATION FOR PRBA CLAIM 87-10154

2019 AERIAL PHOTO



SCANNED

AUG 17 2020