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Form 238-7  
11/97 JGR

MAR 22 2002

IDAHO DEPARTMENT OF WATER RESOURCES

## WELL DRILLER'S REPORT

IDWR/North

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

## 1. WELL TAG NO. D D0017759

DRILLING PERMIT NO. 771398

Other IDWR No. \_\_\_\_\_

## 2. OWNER:

Name JERRY BRUCE

Address PO BOX 201

City KENDRICK State ID Zip 83537

POSTED

## 3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

|   |  |                                   |  |                                                                             |  |
|---|--|-----------------------------------|--|-----------------------------------------------------------------------------|--|
| N |  | Twp. 41                           |  | North <input checked="" type="checkbox"/> or South <input type="checkbox"/> |  |
| W |  | Rge. 3                            |  | East <input type="checkbox"/> or West <input checked="" type="checkbox"/>   |  |
| S |  | Sec. 29                           |  | 1/4 SE 1/4 NE 1/4                                                           |  |
|   |  | Gov'l Lot _____                   |  | County LATAH                                                                |  |
|   |  | Lat: _____                        |  | Long: _____                                                                 |  |
|   |  | Address of Well Site 1065 LEEF RD |  | City KENDRICK                                                               |  |

(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<br>Sacks or Pounds | METHOD |
|------------------|------|----|---------------------------|--------|
| Material         | From | To |                           |        |
| BENTONITE        | 0    | 30 | 15                        | DRY    |

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 30Was drive shoe seal tested? ☒ Y ☐ N How? 300 PSI

## 8. CASING/LINER:

| Diameter | From | To  | Gauge | Material | Casing                              | Liner                               | Welded                              | Threaded                 |
|----------|------|-----|-------|----------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 8        | +1   | 30  | 1/4   | STEEL    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6        | 15   | 205 | 200   | PVC      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_

## 9. PERFORATIONS/SCREENS:

☒ Perforations Method SAW  
☐ Screens Screen Type \_\_\_\_\_

| From | To  | Slot Size | Number | Diameter | Material | Casing                   | Liner                               |
|------|-----|-----------|--------|----------|----------|--------------------------|-------------------------------------|
| 155  | 255 | 1/8       | 60     |          | PVC      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

## 10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

97 ft. below ground Artesian pressure \_\_\_\_\_ lb.

Depth flow encountered \_\_\_\_\_ ft. Describe access port or control devices: WELL CAP

## 11. WELL TESTS:

| Yield gal./min. | Drawdown | Pumping Level | Time |
|-----------------|----------|---------------|------|
| 6               |          | 180           | 1 HR |

Water Temp. 53 Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: \_\_\_\_\_

Depth first Water Encounter 175

## 12. LITHOLOGIC LOG: (Describe repairs or abandonment)

| Bore Dia. | From | To  | Remarks: Lithology, Water Quality & Temperature | Water |
|-----------|------|-----|-------------------------------------------------|-------|
| 14        | 0    | 23  | CLAY BROWN                                      | Y N   |
| 14        | 23   | 30  | BASALT GRAY MEDIUM                              |       |
| 8         | 30   | 35  | BASALT GRAY MEDIUM                              |       |
| 8         | 35   | 145 | CLAY BROWN                                      |       |
| 8         | 145  | 205 | BASALT & CLAY BROWN                             | X     |

Completed Depth 205 (Measurable)

Date: Started 10/2/2001 Completed 10/6/2001

## 13. DRILLER'S CERTIFICATION:

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name MCPHERSON &amp; WRIGHT DRILLING Firm No. 0376

Firm Official Ted Wright Date 3/5/02

and Driller or Operator \_\_\_\_\_ Date 3/5/02

(Sign once if Firm Official &amp; Operator)

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