

10/8/02

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Form 238-7
6/02IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

SEP 21 2002

IDWR/NOID

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

1. WELL TAG NO. D 0022714

DRILLING PERMIT NO. 355761

Water Right or Injection Well No. 784703

2. OWNER:

Name Russell & Tori Posey
 Address 1147 Crane Creek Rd
 City Catalach State Id Zip 83855

3. LOCATION OF WELL by legal description:

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

Twp. 42 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 29 1/4 SE 1/4 SW 1/4
 Gov't Lot _____ County Catalach 10 acres 40 acres 160 acres

Lat: _____ Long: _____
 Address of Well Site same as well City Catalach
(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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>40</u>	<u>8 bags</u>	<u>Dry</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 83 ftWas drive shoe seal tested? ☒ Y ☐ N How? air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6" +2</u>	<u>81</u>	<u>250</u>	<u>250</u>	<u>steel</u>	☒	☐	☒	☐
<u>4 1/2 -60</u>	<u>105</u>	<u>160</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

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
<u>-110</u>	<u>105</u>	<u>1/8 X 3/16</u>	<u>140</u>	<u>4 1/2</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

64 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: _____

42 N 4W 29

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>30 gpm</u>			

Water Temp. 54° Bottom hole temp. 54°Water Quality test or comments: goodDepth first Water Encounter 129

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>2</u>	<u>dirt</u>		
<u>6</u>	<u>2</u>	<u>80</u>	<u>clay</u>		
	<u>80</u>	<u>138</u>	<u>hard lignite</u>		
	<u>138</u>	<u>150</u>	<u>med soft lignite</u>		

Completed Depth 155 (Measurable)Date: Started 8/29/02 Completed 8/30/02

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 Whitcomb Firm No. 125Principal Driller John Whitcomb Date 9/21/02and Driller or Operator II John Whitcomb Date 9/21/02

Operator I _____ Date _____

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

FORWARD WHITE COPY TO WATER RESOURCES