

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 0046020

DRILLING PERMIT NO. 841482

Other IDWR No.

ENTERED

2. OWNER:

Name **WAYNE SCHROCK**

Address **1005 CARSCALLAN RD.**

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

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

Twp. 42 North ☒ or South ☐
 Rge. 5 East ☐ or West ☒
 Sec. 35
 Gov't Lot _____
 Lat: _____ Long: _____
 Address of Well Site 1002 BOLLER RD.
 City POTLATCH
 (Give at least name of road + Distance to Road or Landmark) _____
 L.I. _____ Blk. _____ Sub. Name _____

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/Filter Pack			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	20	7	DRY

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 20'

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	+1	20	1/4	STEEL	☒	☐	☒	☐
6	15	305	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
225	285	1/8	90	6	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

130 ft. below ground Artesian pressure lb

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
60		295	1 hr

Water Temp. 55 Bottom hole temp.

Water Quality test or comments:

Depth first Water Encounter 268

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

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

1/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. **0378**

Firm Official [Signature] Date 2/1/2007

and
Driller or Operator [Signature] Date 2/1/2007
(Sign once if Firm Official & Operator)

42 N 5 W 35

FORWARD WHITE COPY TO WATER RESOURCES