

IDAHO DEPARTMENT OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

WELL TAG NO. D DRILL-N-FILL  
DRILLING PERMIT NO. 905006-852010  
Water Right or Injection Well No. \_\_\_\_\_

**2. OWNER:**

Name JOHN MCCALLUM  
Address 18196 SE WILSON RD  
City GLENN'S FERRY State ID Zip 83623

**3. LOCATION OF WELL by legal description:**

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

Twp. 3 North ☐ or South ☒  
Rge. 9 East ☒ or West ☐  
Sec. 35 NW 1/4 SW 1/4 NE 1/4  
Gov't Lot \_\_\_\_\_ County ELMORE  
Lat: 43:07:18 Long: 115:21:7.3  
Address of Well Site MARKER RD  
City GLENN'S FERRY  
(Give at least name of road + Distance to road or Landmark)  
Lt. \_\_\_\_\_ Blk. \_\_\_\_\_ Sub. Name \_\_\_\_\_

**4. USE:**

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

**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    | 700 | 11,500#         | Pour                  |

Was drive shoe used? ☐ Y ☐ N Shoe Depth(s) \_\_\_\_\_

Was drive shoe seal tested? ☐ Y ☐ N How? \_\_\_\_\_

**8. CASING/LINER:**

| Diameter | From | To | Gauge | Material | Casing                   | Liner                    | Welded                   | Threaded                 |
|----------|------|----|-------|----------|--------------------------|--------------------------|--------------------------|--------------------------|
|          |      |    |       |          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|          |      |    |       |          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|          |      |    |       |          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

Packer ☐ Y ☐ N Type \_\_\_\_\_

**9. PERFORATIONS/SCREENS PACKER TYPE**

Perforation Method \_\_\_\_\_

Screen Type & Method of Installation \_\_\_\_\_

| From | To | Slot Size | Number | Diameter | Material | Casing                   | Liner                    |
|------|----|-----------|--------|----------|----------|--------------------------|--------------------------|
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |

**10. FILTER PACK**

| Filter Material | From | To | Weight / Volume | Placement Method |
|-----------------|------|----|-----------------|------------------|
|                 |      |    |                 |                  |
|                 |      |    |                 |                  |
|                 |      |    |                 |                  |

**11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:**

114 ft. below ground Artesian pressure \_\_\_\_\_ lb.  
Depth flow encountered \_\_\_\_\_ ft. Describe access port or control devices: \_\_\_\_\_

**12. WELL TESTS:**

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

| Yield gal./min. | Drawdown | Pumping Level | Time |
|-----------------|----------|---------------|------|
| 200             |          | 200           | 1 hr |
|                 |          |               |      |
|                 |          |               |      |

Water Temp. \_\_\_\_\_ Bottom hole temp. 60

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

**13. LITHOLOGIC LOG: (Describe repairs or abandonment)**

| Bore Dia. | From | To  | Remarks: Lithology, Water Quality & Temperature | Y | N |
|-----------|------|-----|-------------------------------------------------|---|---|
| 6         | 0    | 10  | gravel & clay mix                               |   |   |
|           | 10   | 22  | Basalt Red                                      |   |   |
|           | 22   | 265 | clay red                                        |   |   |
|           | 265  | 280 | multi colored 1/8" sand                         |   |   |
|           | 280  | 350 | Basalt Red                                      |   |   |
|           | 350  | 480 | clay brown                                      |   |   |
|           | 480  | 580 | multi colored sand 1/8"                         |   |   |
|           | 580  | 700 | clay brown                                      |   |   |

Here WAS ABANDONED  
WITH 11,500# OF BENTONITE

RECEIVED

AUG 07 2008

WATER RESOURCES  
WESTERN REGION

Completed Depth 5 (Measurable)

Date: Started 6-29-08 Completed 7-3-08

**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 STRATA DRILLING Firm No. 681

Principal Driller ALAN L. NEUBERGER Date 8-1-08

and Driller or Operator II \_\_\_\_\_

Operator I \_\_\_\_\_

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

Applicant's  
Exhibit

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