

Idaho Department of Water Resources Receipt

Receipt ID: W044637

Payment Amount \$125.00 Date Received 9/16/2016 10:37 AM Region WESTERN
Payment Type Check Check Number 6142
Payer HACKLER, DOUGLAS R & LORELLI D
Comments WELL UPGRADE FEE FOR DOUG HACKLER FOR WR# 63-34237

Fee Details

Amount	Description	PCA	Fund	Fund Detail	Subsidiary	Object
\$125.00	DRILLING PERMITS	62134	0229	21		1205



Signature Line (Department Representative)

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

66236

Office Use Only			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
1/4 _____		1/4 _____	
Lat: _____		Long: _____	
☐ Air ☐ Flowing Artesian			

1. DRILLING PERMIT NO. 63-97-W 339-200
Other IDWR No. _____

2. OWNER:

Name Doug Hackler
Address 11102 W. Eaglehill Dr
City Boise State ID Zip 83709

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N		
W		E
	X	
S		

Twp. 2 North ☒ or South ☐
Rge. 2 East ☒ or West ☐
Sec. 8 1/4 NE 1/4 SW 1/4
Gov't Lot _____ County Ada 10 acres 160 acres
Lat: _____ Long: _____

Address of Well Site
Hollyhock-Cole Rd. City Boise
(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		METHOD
Material	From	To	Spill Pounds		
<u>Bentonite</u>	<u>0</u>	<u>20</u>	<u>500</u>		<u>Pour</u>

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
<u>6</u>	<u>1</u>	<u>4.55</u>	<u>1.250</u>	<u>Steel</u>	☒	☐	☐	☐
<u>5</u>	<u>4.46</u>	<u>4.51</u>	<u>1.250</u>	<u>Steel</u>	☒	☐	☐	☐
<u>5</u>	<u>4.61</u>	<u>4.65</u>	<u>1.250</u>	<u>Steel</u>	☒	☐	☐	☐

Length of Headpipe 5' Length of Tailpipe 4'

9. PERFORATIONS/SCREENS

☐ Perforations Method _____
☒ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>4.51</u>	<u>4.61</u>	<u>0.20</u>		<u>5</u>	<u>SS</u>	☐	☐
<u>4.65</u>	<u>4.75</u>	<u>0.16</u>		<u>5</u>	<u>SS</u>	☐	☐
<u>4.76</u>	<u>4.86</u>	<u>0.15</u>		<u>5</u>	<u>SS</u>	☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

11. WELL TESTS:

☒ Pump ☐ Bailor

Yield gal/min.	Drawdown	Pumping Level	Time
<u>75</u>			<u>3</u>

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
				Y N
<u>8</u>	<u>0</u>	<u>1</u>	<u>Top Soil</u>	
	<u>1</u>	<u>20</u>	<u>SAND - Gravel</u>	X
<u>6</u>	<u>20</u>	<u>53</u>	<u>SAND - Gravel</u>	X
	<u>53</u>	<u>154</u>	<u>SAND - Gravel</u>	X
	<u>154</u>	<u>177</u>	<u>SANDY clay</u>	X
	<u>177</u>	<u>195</u>	<u>clay - Gravel</u>	X
	<u>195</u>	<u>295</u>	<u>SAND - Gravel - Clay</u>	X
	<u>295</u>	<u>299</u>	<u>SAND</u>	X
	<u>299</u>	<u>318</u>	<u>C. SAND - Gravel</u>	X
	<u>318</u>	<u>348</u>	<u>C. SAND - Gravel</u>	X
	<u>348</u>	<u>374</u>	<u>C. SAND</u>	X
	<u>374</u>	<u>376</u>	<u>SANDY clay</u>	X
	<u>376</u>	<u>381</u>	<u>fine Brown SAND</u>	X
	<u>381</u>	<u>385</u>	<u>SANDY clay</u>	X
	<u>385</u>	<u>390</u>	<u>Brown SAND</u>	X
	<u>390</u>	<u>420</u>	<u>SANDY clay</u>	X
	<u>420</u>	<u>435</u>	<u>Blue clay</u>	X
	<u>435</u>	<u>445</u>	<u>Brown clay</u>	X
	<u>445</u>	<u>452</u>	<u>SANDY clay</u>	X
	<u>452</u>	<u>459</u>	<u>Coarse Grey Sand</u>	X
	<u>459</u>	<u>490</u>	<u>SANDY clay - SAND streaks</u>	X

RECEIVED

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AUG 21 1997

SEP 04 1997

WATER RESOURCES
WESTERN REGION

Department of Water Resources

MICROFILMED

Completed Depth 490 (Measurable)
Date Started 6-9-97 Completed 7-16-97

13. DRILLER'S CERTIFICATION

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

Firm Name Dennis Phipps W.D. Firm No. 932Firm Official Dennis Phipps Date 8-1-97

and _____

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

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