

MEMORANDUM

Date: September 22, 2015
To: Water Right File 15-7268
From: Scott Bergendorf
Re: Field Exam Visit

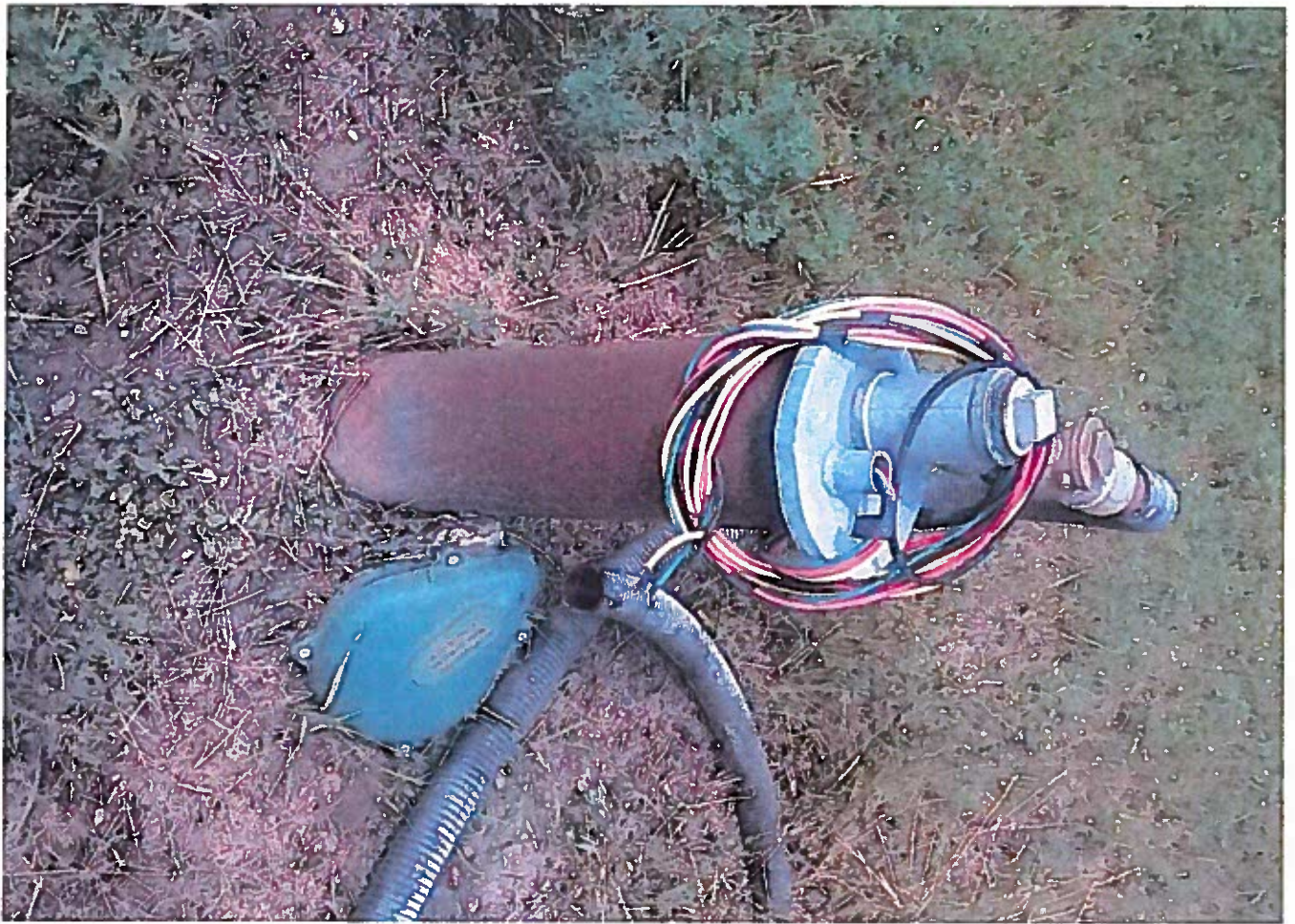
On September 1, 2015, I conducted a field exam for water right permit 15-7268 in the name of Gordon Smith. The location of the point of diversion was found to be at the GPS coordinates N 42.205, W 112.249 with the well tag number of D0050931. The well has a submersible pump and wiring for a portable generator. At the time of the exam there was not a generator at the location. The well is connected to a plastic hose that is approximately 10 feet long.

At the time of the exam I could find no evidence that the well has ever been connected to the 40 acre place of use irrigation system consisting of wheel lines and hand lines. The well is about 60 feet from the nearest mainline with no other connections to the well other than the 10 foot plastic hose.

System currently uses surface water irrigation and there is no evidence that permit 15-7268 was ever used to irrigate the property.







IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

15

1. WELL TAG NO. D 0050931

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER: Gordan Smith

Name _____

Address Grand View Dr. NCity Twins Falls State ID Zip _____

3. WELL LOCATION:

Twp. 14 North ☐ or South ☒ Rge. 76 East ☒ or West ☐Sec. 16 10 acres 1/4 NE 1/4 SE 1/4 180 acresGov't Lot _____ County OneidaLat. 42° 12' 15.69 (Deg. and Decimal minutes)Long. 112° 14' 55.80 (Deg. and Decimal minutes)

Address of Well Site _____

(Give at least name of road • Distance to Road or Landmark) City malad

Lot. _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft)	Placement method/procedure
Bentonite	0	38	26 bags	overbore

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6	0	376	2.50	steel	☒	☐	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 376

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method machineManufactured screen ☐ Y ☐ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
380	375	1/4"	1100	6"	steel	.250

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft)	Placement method
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11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☐ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 280 Static water level (ft) 268Water temp. (°F) cold Bottom hole temp. (°F) coldDescribe access port well cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	50	

Test method:

Pump	Bailer	Air	Flowing artesian
☐	☐	☒	☐

Water quality test or comments: good

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
10	0	15	Bm clay		X
10	15	25	Gravel Bm clay		X
10	25	38	Soft Bm clay		X
6	38	40	Soft Bm clay		X
6	40	45	Bm clay sand		X
6	45	90	Bm clay		X
6	90	100	Gray clay sand		X
6	100	150	Gray clay		X
6	150	160	Gravel gray clay		X
6	160	175	Bm clay gravel		X
6	175	188	Gray sand/clay		X
6	188	220	Gravel cobbles Bm clay		X
6	220	280	Gravel cobbles Bm clay		X
6	280	320	Gravel cobbles Bm clay	X	

RECEIVED

AUG 24 2010

Department of Water Resources
Eastern RegionCompleted Depth (Measurable): 376
Date Started: _____ Date Completed: Jan. 19, 2010

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 Mt. West Well Drilling Co. No. 543Principal Driller Michael Frandsen Date 1-24-10

Driller _____ Date _____

Operator II Thilo Frandsen Date 1-23-10

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.