Basin 47
Appl 870650
Per 775943
IP 308512

6

Form 238-7
11/97 JGE

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

C

Office Use Only
Inspected by
Twp ____ Rge ____ Sec ____
____ 1/4 ____ 1/4 ____ 1/4
Lat: : : Long: : :

1. WELL TAG NO. D 0016968
DRILLING PERMIT NO. 775943
Other IDWR No. 308512

2. OWNER:
Name Dutch Touch dairy
Address 3477 N. 2900 E.
City Twin Falls State ID Zip 83301

3. LOCATION OF WELL by legal description:
Sketch map location must agree with written location.

N / W / E / S

Twp. 11 North [ ] or South [X]
Rge. 16 East [X] or West [ ]
Sec. 5 ____ 1/4 (10 acres) SE 1/4 (40 acres) NE 1/4 (160 acres)
Gov't Lot ____ County Twin Falls
Lat: Long:
Address of Well Site 3475 N. 2300 E.
(Give at least name of road + Distance to Road or Landmark) City Filer
Lt. ____ Blk. ____ Sub. Name ____

4. USE:
[ ] Domestic [ ] Municipal [ ] Monitor [ ] Irrigation
[ ] Thermal [ ] Injection [X] Other stockwater

5. TYPE OF WORK: check all that apply (Replacement etc.)
[ ] New Well [X] Modify [ ] Abandonment [X] Other deepen

6. DRILL METHOD:
[X] Air Rotary [ ] Cable [ ] Mud Rotary [ ] Other ____

7. SEALING PROCEDURES:

Seal/Filter Pack			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	

Was drive shoe used? [ ] Y [X] N Shoe Depth(s) ____
Was drive shoe seal tested? [ ] Y [X] N How? ____

8. CASING/LINER:

Diameter	From	To	Guage	Material	Casing	Liner	Welded	Threaded
					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS:
[ ] Perforations Method ____
[ ] Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
244 ft. below ground Artesian pressure ____ lb.
Depth flow encountered ____ ft. Describe access port or control devices: ____

11. WELL TESTS:
[ ] Pump [ ] Bailer [ ] Air [ ] Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time

Water Temp. ____ Bottom hole temp. ____
Water Quality test or comments: ____
Depth first Water Encounter ____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	345	423	hard lava		
8	423	426	soft lava & ash	X	
8	426	430	hard lava		
8	430	432	soft & broken lava	X	
8	432	436	hard lava		
8	436	441	soft lava & cnders	X	
8	441	445	soft & broken lava	X	
8	445	455	medium to soft lava		
8	455	457	soft lava & breaks	X	
8	457	469	medium lava		
8	469	473	soft lava	X	
8	473	477	hard lava		
8	477	480	soft lava & breaks	X	

RECEIVED
MAY 1 5 2002
Department of Water Resources
Southern Region

Completed Depth 480' (Measurable)
Date: Started 4/1/2002 Completed 4/2/2002

13. DRILLER'S CERTIFICATION:
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Eaton Drilling & pump Service, Inc. Firm No. 26
Firm Official Larry Nielsen Date 4/2/2002
and
Driller or Operator Marvin Short Date 4/2/2002
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

Basin 47
App 87048

Form 238-7
11/97 JGE

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

C

Office Use Only
Inspected by
Twp ____ Rge ____ Sec ____
____ 1/4 ____ 1/4 ____ 1/4
Lat: : : Long: : :

1. WELL TAG NO. D0016969
DRILLING PERMIT NO. 775941
Other IDWR No. 308513

2. OWNER:
Name Dutch Touch dairy
Address 3477 N. 2900 E.
City Twin Falls State ID Zip 83301

3. LOCATION OF WELL by legal description:
Sketch map location must agree with written location.

N / W / E / S

Twp. 11 North ☐ or South ☒
Rge. 16 East ☒ or West ☐
Sec. 5 ____ 1/4 (10 acres) SE 1/4 (40 acres) NE 1/4 (160 acres)
Gov't Lot ____ County Filer
Lat: Long:
Address of Well Site 3475 N. 2300 E.
(Give at least name of road + Distance to Road or Landmark) City Filer
Lt. ____ Blk. ____ Sub. Name ____

4. USE:
☐ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☒ Other Stockwater

5. TYPE OF WORK: check all that apply (Replacement etc.)
☐ New Well ☒ Modify ☐ Abandonment ☒ Other deepen

6. DRILL METHOD:
☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other ____

7. SEALING PROCEDURES:

Seal/Filter Pack			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	

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

8. CASING/LINER:

Diameter	From	To	Guage	Material	Casing	Liner	Welded	Threaded
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS:
☐ Perforations Method ____
☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
244 ft. below ground Artesian pressure ____ lb.
Depth flow encountered ____ ft. Describe access port or control devices: ____

11. WELL TESTS:
☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time

Water Temp. ____ Bottom hole temp. ____
Water Quality test or comments: ____
Depth first Water Encounter ____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	345	378	medium lava		
8	378	385	broken lava & talc	X	

RECEIVED
MAY 15 2002
Department of Water Resources
Southern Region

Completed Depth 385' (Measurable)
Date: Started 4/4/2002 Completed 4/4/2002

13. DRILLER'S CERTIFICATION:
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Eaton Drilling & pump Service, Inc. Firm No. 26
Firm Official Lonny Nielson Date 4/4/2002
and
Driller or Operator Marvin Stout Date 4/4/2002
(Sign once if Firm Official & Operator)

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