

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
BENEFICIAL USE FIELD REPORT

A. GENERAL INFORMATION

Permit No: 36-8745

Exam Date: 4/18/2014

1. Current Owner: NELSEN DAIRY
600 N 120 E
JEROME ID 83338
(208)324-4158
2. Accompanied by: Jack Nelsen
Phone No: same as above
Address: same as above
Relationship to Permit Holder: permit holder

3. SOURCETRIBUTARY

GROUND WATER

B. OVERLAP REVIEW

1. Other water rights with the same place of use: 36-14563, 36-14564
2. Other water rights with the same point of diversion: 36-14563, 36-14564

C. DIVERSION AND DELIVERY SYSTEM1. LOCATION OF POINT(S) OF DIVERSION:

GROUND WATER	L3 NW1/4SW1/4	Sec. 7,	Twp 07S,	Rge 17E, B.M.
JEROME County				
GROUND WATER	L3 NW1/4SW1/4	Sec. 7,	Twp 07S,	Rge 17E, B.M.
JEROME County				

Method of Determination: Aerial imagery, site visit observations

2.

PLACE OF USE: STOCKWATER

Twp	Rge	Sec	NE				NW				SW				SE				Totals			
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE				
07S	17E	7									X	X										
											L 3	L 3										

PLACE OF USE: COMMERCIAL

Twp	Rge	Sec	NE				NW				SW				SE				Totals			
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE				
07S	17E	7									X	X										
											L 3	L 3										

Method of Determination: Aerial imagery

3. ☒ Delivery System Diagram Attached (required). Indicate all major components and distances between components. Indicate weir size/pipe as applicable.
- ☒ Map Attached Showing Location(s) of point(s) of diversion and place(s) of use (required). Scale must be 1:24,000 or greater.
- ☒ Aerial Photo Attached (required for irrigation of 10+ acres).
- ☒ Photo of Diversion and System Attached

4.

<u>Well or Diversion</u>			<u>Pump Serial No. or Discharge</u>		
<u>ID No.*</u>	<u>Motor Make</u>	<u>Hp</u>	<u>Motor Serial No.</u>	<u>Pump Make</u>	<u>Size</u>
A004896	Main well	7.5			
A004897	Backup well	7.5			

*Code to correspond with No. on map and aerial photo

D. FLOW MEASUREMENTS

1.

<u>Measurement</u>	<u>Type</u>	<u>Make</u>	<u>Model No.</u>	<u>Serial No.</u>	<u>Size</u>	<u>Calib. Date</u>
Flowmeter	Sonic	Fuji				

2. Measurements: A ten minute test was run with the permit holder advised to operate the system at maximum capacity in order to obtain as much of his permitted flow as possible.

E. FLOW CALCULATIONS☒ Additional Computation Sheets Attached

Measured Method: The highest recorded flow during the test was 50.86 gpm or 0.11 cfs.

F. VOLUME CALCULATIONS

1. Volume Calculations for Irrigation: NA

$$V_{I.R.} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) =$$

$$V_{D.R.} = [\text{Diversion Rate (cfs)}] \times (\text{Days in Irrigation season}) \times 1.9835 =$$

$$V = \text{Smaller of } V_{I.R.} \text{ and } V_{D.R.} =$$

2. Volume Calculations for Other Uses: The IDWR Dairy Spreadsheet was run using data from the development period supplied by Mr. Nelsen, yielding a volume of 33.6 AF. IDWR data supplied by Water District 130 shows a maximum yearly volume of 43.3 AF during the development period. Since this is actual use, it will be used for licensing purposes.

G. NARRATIVE/REMARKS/COMMENTS

The Beneficial Use Field Exam for permit 36-8745 was completed on April 18, 2014, with Jack Nelsen, dairy owner, present. This permit was obtained after the moratorium was put in place, so it has a mitigation plan that involves recharging the aquifer with Northside Canal Company water shares owned by Mr. Nelsen and appurtenant to his property. IDWR records and verbal communication with the watermaster of Water District 130 indicate that the recharge has been taking place on a yearly basis.

Two wells supply water to a 5000 gallon storage tank and then to washing and misting uses in the milk barn. Seven water troughs are located in the feed yard and three small waste lagoons collect the waste water after use in the dairy. An operating flowmeter is in place in the pump house.

The dairy has two decreed stockwater and domestic rights: 36-14563 (0.06 cfs) and 36-14564 (0.06 cfs), each of which is limited to 13,000 gallons per day. A flowmeter test was run, with the permit holder urged to commence flow in as many uses as possible in order to maximize the amount diverted. The highest flow recorded was 50.86 gpm or 0.11 cfs. Additionally, in order to determine a volume for the permit, the IDWR Dairy Spreadsheet was run, with information provided by Mr. Nelsen for the development time period, producing a total volume of 33.6 AF. IDWR records indicate that as much as 43.3 AF was used during the development period. This value will be recommended for the permit volume and the combined volume for the two water rights and the permit. The combined flow rate for the two rights and the permit will be the maximum observed rate of 0.11 cfs.

Have conditions of permit approval been met? ☒ Yes ☐ No

H. RECOMMENDATIONS**1. Recommended Amounts**

<u>BENEFICIAL USE</u>	<u>PERIOD OF USE</u>	<u>DIVERSION RATE</u>	<u>ANNUAL VOLUME</u>
STOCKWATER	01/01 to 12/31	0.110 CFS	43.30 AF
COMMERCIAL	01/01 to 12/31	0.110 CFS	43.30 AF
<u>Totals:</u>		0.110 CFS	43.30 AF

2. Recommended Amendments

☐ Change P.D. as reflected above ☐ Add P.D. as reflected above ☒ None

☐ Change P.U. as reflected above ☐ Add P.U. as reflected above ☐ Other

I. AUTHENTICATION

Field Examiner's Name Jim R. [Signature] Date 4/18/2014

Reviewer [Signature] Date 7/31/14



Backup Well Near Milk Barn

Main Well on Southwest Corner of Property





Water Storage Tank and Pump House (Behind)

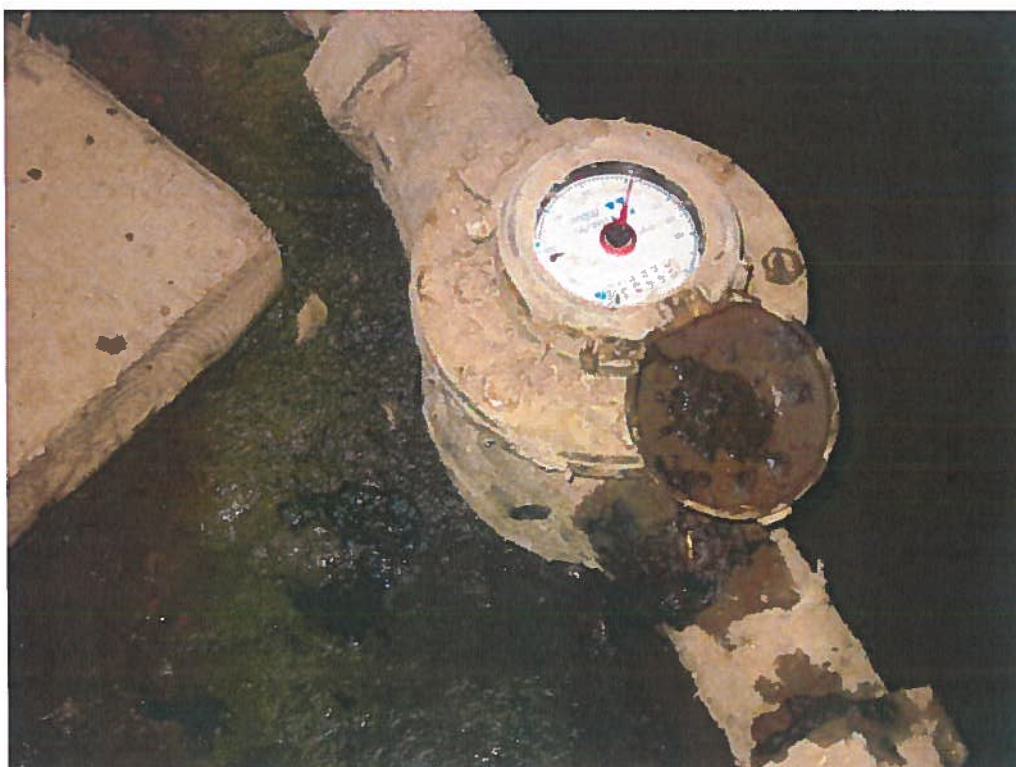
Milk Barn





Plumbing inside Pump House

Flowmeter





Water Trough in Feed Yard

View of Feed Yard



Idaho Department of Water Resources

System Diagram



Legend

- Township/Range
- Sections
- QQ
- POU
- Water Troughs
- PODs (Wells)

36-8745
Nelsen



0 0.0275 0.055 0.11 Miles

FILE NUMBER _____
REVIEWER _____

DAIRIES: WATER USE WORKSHEET

REQUIRED DAIRY DATA

NUMBER OF MILKING CATTLE _____ 500
NUMBER OF DRY CATTLE _____ 70
NUMBER OF REPLACEMENT CATTLE 0-2 MONTHS _____ 75
3-4 MONTHS _____ 75
5-8 MONTHS _____ 75
9-12 MONTHS _____ 75
13-15 MONTHS _____ 75
16-24 MONTHS _____ 75
ENTER 1 FOR MANUAL COW WASHING, 2 FOR AUTOMATIC, OR 3 IF
SPRINKLERS ARE USED TO FLUSH HOLDING PEN AND WASH COWS _____ 3
IF SPRINKLERS ARE USED NUMBER OF SPRINKLERS IN HOLDING PEN _____ 25
NOZZLE DISCHARGE (USE 5.0 GPM IF UNKNOWN) _____ 5.00
OPERATION TIME OF SPRINKLERS (MIN/DAY) _____ 15
NUMBER OF MILKINGS PER DAY _____ 2
AVG. LBS. OF MILK PRODUCED PER DAY PER ANIMAL (IDAHO AVG IS 70 LBS.) _____ 75
HOURS PER DAY PUMP OPERATES FOR STOCKWATER USE _____ 24.0
HOURS PER DAY PUMP OPERATES FOR COMMERCIAL USE _____ 16.0
IS RECYCLED WATER USED TO FLUSH MILKHOUSE AND PARLOR FLOORS? _____ N
IS RECYCLED WATER USED TO WASH COWS? _____ N
IS A PLATE COOLER USED? _____ Y
IS RECYCLED WATER USED FOR PLATE COOLER? (IF NO PLATE COOLER,
LEAVE BLANK) _____ N
IF CORRAL MISTERS ARE USED NUMBER OF MISTERS IN HOLDING PEN _____ 25
NOZZLE DISCHARGE (GPM) _____ 5.00
OPERATION TIME OF MISTERS (MIN/DAY) _____ 15
DAYS PER YEAR MISTERS ARE USED _____ 90

CALCULATIONS

DIVERSION RATE (CFS):

STOCKWATER
MILKING CATTLE (BASED ON MILK PRODUCTION) _____ 0.03
DRY CATTLE @17.0 GPD/HD _____ 0.00
REPLACEMENT CATTLE _____ 0.01
TOTAL _____ 0.04
COMMERCIAL
TOTAL _____ 0.02
TOTAL DIVERSION RATE _____ 0.06

DIVERSION VOLUME (AFA):

STOCKWATER
MILKING CATTLE _____ 19.4
DRY CATTLE _____ 1.1
REPLACEMENT CATTLE _____ 3.0
TOTAL _____ 23.5
COMMERCIAL
WASHING OF BULK TANK AND RELATED EQUIPMENT _____ 0.4
BACKFLUSH _____ 0.6
PARLOR/MILKHOUSE/HOLDING PEN CLEANUP _____ 2.0
CATTLE WASHING BASED UPON METHOD OF WASHING _____ 2.1
PLATE COOLER _____ 5.0
CORRAL MISTERS _____ 0.5
TOTAL _____ 10.1
TOTAL DIVERSION VOLUME _____ 33.6

CONSUMPTIVE USE VOLUME (AFA)(assuming 100% consumptive):

STOCKWATER _____ 23.5
COMMERCIAL _____ 10.1
TOTAL CONSUMPTIVE USE _____ 33.6

THEORETICAL FLOW ESTIMATION WORKSHEET

REQUIRED PUMP INFORMATION

	PUMP 1	PUMP 2	PUMP 3	PUMP 4	PUMP 5
PUMP HORSEPOWER (HP) _____				0.00	0.00
LIFT (FT) _____				0	0
DISCHARGE PRESSURE (PSI) _____		0	0	0	0
FRICTION LOSSES (FT) _____	0.0	0.0	0.0	0.0	0.0
HOURS PER DAY PUMP OPERATES _____				0.0	0.0

CALCULATIONS

THEORETICAL FLOW RATE (CFS) * _____	0.00	0.00	0.00	0.00	0.00
DIVERSION VOLUME (AFA) ** _____	0.0	0.0	0.0	0.0	0.0

* PUMP EFFICIENCY WAS ASSUMED TO BE 70%

** DIVERSION VOLUME IS THE ABSOLUTE MAXIMUM VOLUME BASED ON THE
THEORETICAL FLOW RATE ASSUMING PUMP RUNS EVERY DAY OF THE YEAR

EVALUATION OF EQUIVALENT IRRIGATED ACREAGE

IRRIGATION RIGHT (BEFORE CHANGE)

DIVERSION RATE _____	CFS
ACRES OF IRRIGATION _____	ACRES
DIVERSION VOLUME _____	AC-FT/AC
CONSUMPTIVE USE VOLUME _____	AC-FT/AC
IRRIGATION IS BEING CONVERTED FOR WHICH PORTION OF THE DAIRY OPERATION - STOCKWATER (S), COMMERCIAL (C), OR BOTH (B)? _____	

CALCULATIONS

IRRIGATION DIVERSION RATE PER ACRE _____	#DIV/0!	CFS/AC
REDUCTION OF IRRIGATION BASED ON DIVERSION RATE _____	0.0	ACRES
REDUCTION OF IRRIGATION BASED ON DIVERSION VOLUME _____	0.0	ACRES
REDUCTION OF IRRIGATION BASED ON CONSUMPTIVE USE _____	0.0	ACRES

Idaho Department of Water Resources

WMIS
Water Management Information System

Quick Search:

[For assistance, email](#)[WMIS Info](#)

Search Method:

WMIS Number 

WMIS Number

400122

You are logged in as jbitzenburg

Point Of Diversion	PCC	Flow Meter	Time Clock	Alternate	Contacts	Data Summary
Other	Logout					

Data Summary

You are viewing 400122; A0004896

Report Year	Alternate	FM	PCC	Time Clock
2013		48.78		
2012		62.69		
2011		36.15		
2010		40.79		
2009		46.19		
2008		51.26		
2007		42.27		
2006		45.51		
2005		40.11		
2004		43.29		
2003		21.49		
2002		11.05		
2001		3.53		



LD04

No. 04

LOG NAME:JACKN

START :04-18 09:55

END :04-18 10:05

INTERVAL:00:01:00

4/18/2014 10:00

+4.554E+0 ft/s

+5.086E+1 gal/m

+TOTAL 0000250 gal

NORMAL

High Flow

50.86 gpm - 11.3 cfs

4/18/2014 9:55

+4.526E+0 ft/s

+5.055E+1 gal/m

+TOTAL 0000000 gal

NORMAL

4/18/2014 10:01

+4.547E+0 ft/s

+5.078E+1 gal/m

+TOTAL 0000301 gal

NORMAL

4/18/2014 9:56

+4.538E+0 ft/s

+5.069E+1 gal/m

+TOTAL 0000049 gal

NORMAL

4/18/2014 10:02

+4.538E+0 ft/s

+5.068E+1 gal/m

+TOTAL 0000351 gal

NORMAL

4/18/2014 9:57

+4.488E+0 ft/s

+5.013E+1 gal/m

+TOTAL 0000100 gal

NORMAL

4/18/2014 10:03

+4.530E+0 ft/s

+5.059E+1 gal/m

+TOTAL 0000401 gal

NORMAL

4/18/2014 9:58

+4.461E+0 ft/s

+4.982E+1 gal/m

+TOTAL 0000150 gal

NORMAL

4/18/2014 10:04

+4.517E+0 ft/s

+5.045E+1 gal/m

+TOTAL 0000452 gal

NORMAL

4/18/2014 9:59

+4.464E+0 ft/s

+4.986E+1 gal/m

+TOTAL 0000200 gal

NORMAL

4/18/2014 10:05

+4.512E+0 ft/s

+5.040E+1 gal/m

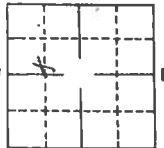
+TOTAL 0000502 gal

NORMAL

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

JUN 25 1987

1. WELL OWNER Name <u>Jack Nelson</u> Address <u>Jerome</u> Owner's Permit No. _____	7. WATER LEVEL Department of Water Resources Static water level <u>290</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____																																																																																																																																																																																																				
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____	8. WELL TEST DATA NONE ☐ Pump ☐ Baller ☐ Air ☐ Other _____ <table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>	Discharge G.P.M.	Pumping Level	Hours Pumped																																																																																																																																																																																																	
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type) _____	9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>10</td><td>Top Soil</td><td></td><td>X</td></tr><tr><td></td><td>10</td><td>22</td><td>Med Hard Gray Basalt w/sm.breaks</td><td></td><td></td></tr><tr><td></td><td>22</td><td>30</td><td>Med Hard Gray Basalt w/trace br. basalt</td><td></td><td></td></tr><tr><td></td><td>30</td><td>50</td><td>Med Hard Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>50</td><td>65</td><td>Hard Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>65</td><td>87</td><td>Med Hard Gray Basalt w/lg.breaks-crevices</td><td></td><td></td></tr><tr><td></td><td>87</td><td>90</td><td>Hard Rock w/sm.breaks</td><td></td><td></td></tr><tr><td></td><td>90</td><td>110</td><td>Med Hard Rock w/lg.breaks-crevices</td><td></td><td></td></tr><tr><td></td><td>110</td><td>123</td><td>Hard Rock</td><td></td><td></td></tr><tr><td></td><td>123</td><td>150</td><td>Med Hard Rock w/lg.breaks</td><td></td><td></td></tr><tr><td></td><td>150</td><td>170</td><td>Med Hard Rock w/sm.breaks</td><td></td><td></td></tr><tr><td></td><td>170</td><td>179</td><td>Med Hard w/Br. basalt w/lg.breaks</td><td></td><td></td></tr><tr><td></td><td>179</td><td>180</td><td>Hard Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>180</td><td>215</td><td>Hard Gray Basalt w/sm.breaks</td><td></td><td></td></tr><tr><td></td><td>215</td><td>220</td><td>Med Soft Gray w/broken spots</td><td></td><td></td></tr><tr><td></td><td>220</td><td>225</td><td>Broken Pinkish Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>225</td><td>230</td><td>Med Hard Basalt</td><td></td><td></td></tr><tr><td></td><td>230</td><td>236</td><td>Med Soft Pink Porous Broken Basalt</td><td></td><td></td></tr><tr><td></td><td>236</td><td>253</td><td>Med Hard Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>253</td><td>255</td><td>Broken Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>255</td><td>260</td><td>Med Hard Gray-Pinkish Basalt</td><td></td><td></td></tr><tr><td></td><td>260</td><td>266</td><td>Med Hard Pink Basalt</td><td></td><td></td></tr><tr><td></td><td>266</td><td>270</td><td>Med Hard Pink/Gray Basalt trace</td><td></td><td></td></tr><tr><td></td><td>270</td><td>300</td><td>Hard Gray Basalt</td><td></td><td></td></tr><tr><td></td><td>300</td><td>302</td><td>Soft</td><td></td><td></td></tr><tr><td></td><td>302</td><td>360</td><td>Med Hard Basalt</td><td></td><td></td></tr><tr><td></td><td>360</td><td>390</td><td>XXX Sand Redish Brown</td><td></td><td></td></tr><tr><td></td><td>390</td><td>395</td><td>Sand</td><td></td><td></td></tr><tr><td></td><td>395</td><td>410</td><td>Gravel & Black Cinders</td><td></td><td>X</td></tr><tr><td></td><td>410</td><td>420</td><td>Med Hard Rock w/sm.breaks</td><td></td><td>X</td></tr><tr><td></td><td>420</td><td>440</td><td>Med Hard Rock w/breaks</td><td></td><td>X</td></tr></tbody></table>	Hole Diam.	Depth		Material	Water		From	To	Yes	No	8	0	10	Top Soil		X		10	22	Med Hard Gray Basalt w/sm.breaks				22	30	Med Hard Gray Basalt w/trace br. basalt				30	50	Med Hard Gray Basalt				50	65	Hard Gray Basalt				65	87	Med Hard Gray Basalt w/lg.breaks-crevices				87	90	Hard Rock w/sm.breaks				90	110	Med Hard Rock w/lg.breaks-crevices				110	123	Hard Rock				123	150	Med Hard Rock w/lg.breaks				150	170	Med Hard Rock w/sm.breaks				170	179	Med Hard w/Br. basalt w/lg.breaks				179	180	Hard Gray Basalt				180	215	Hard Gray Basalt w/sm.breaks				215	220	Med Soft Gray w/broken spots				220	225	Broken Pinkish Gray Basalt				225	230	Med Hard Basalt				230	236	Med Soft Pink Porous Broken Basalt				236	253	Med Hard Gray Basalt				253	255	Broken Gray Basalt				255	260	Med Hard Gray-Pinkish Basalt				260	266	Med Hard Pink Basalt				266	270	Med Hard Pink/Gray Basalt trace				270	300	Hard Gray Basalt				300	302	Soft				302	360	Med Hard Basalt				360	390	XXX Sand Redish Brown				390	395	Sand				395	410	Gravel & Black Cinders		X		410	420	Med Hard Rock w/sm.breaks		X		420	440	Med Hard Rock w/breaks		X
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____																																																																																																																																																																																																					
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>.250 inches</td><td>5/8" OD</td><td>2 feet</td><td>-410 feet</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches <table border="1"><thead><tr><th>Number</th><th>From</th><th>To</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table> Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>18</u> Material used in seal: ☐ Cement grout ☒ Puddling clay ☐ Well cuttings Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☐ Welded ☒ Solvent ☐ Cemented between strata Describe access port _____	Thickness	Diameter	From	To	.250 inches	5/8" OD	2 feet	-410 feet													Number	From	To																																																																																																																																																																														
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6. LOCATION OF WELL Sketch map location must agree with written location  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Jerome</u> NW 1/4 Sec. <u>7</u> , T. <u>7S</u> , R. <u>17E</u> NW.	11. DRILLERS CERTIFICATION Department of Water Resources I/we certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>SMITH DRILLING & PUMPING CO., INC.</u> Address <u>Jerome</u> Date <u>4/7/81</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>[Signature]</u>																																																																																																																																																																																																				

FORWARD WHITE COPY TO WATER RESOURCES

56660

1. DRILLING PERMIT NO. 36-94-S-0088-001

Other IDWR No. _____

2. OWNER:

Name _____

Address _____

City _____ State _____ Zip _____

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

Twp. 7 North ☐ or South ☒
 Rge. 17 East ☒ or West ☐
 Sec. 7 1/4 NW 1/4 SW 1/4
 Gov't Lot _____ County Jerome

Address of Well Site _____

City _____

(Give at least name of road + Distance to Road or Landmark)

Lt. Blk. Sub. Name

4. PROPOSED USE:

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

5. TYPE OF WORK

☐ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☐ Air Rotary ☐ Cable ☐ Other_____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	

Was drive shoe used? Y ☐ N ☐

Was drive shoe seal tested? Y ☐ N ☐ How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	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:

ft. below ground Artesian pressure lb.

Depth flow encountered _____ ft. Describe access port or control devices:

11. WELL TESTS:

☐ Pump ☐ Baller ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments:

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

DRILLER'S CERTIFICATION

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

Firm Name _____ Firm No. _____

Firm Official _____ Date _____

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES