

IDAHO DEPARTMENT OF WATER RESOURCES

WELL INSPECTION FORM

1. DRILLING PERMIT NO: Tag D0053448 OTHER APPLICABLE NO: WR 63-33266
63-12527
2. OWNER: Tom Sellin Phone: cell 870-6673
Address: home 4047 N Ptarmigan Pl, Star, ID 83669
3. WELL LOCATION: Twp 5N, Rge. 1W, Sec. 32, NW 1/4 SW 1/4
County Ada (Provide sketch map and photo on reverse.)
4. DRILLER: Waterpro Well Drilling Lic. No. 626
When Drilled? January 2009
5. WELL CONSTRUCTION:
Casing Diameter 8 inches Water tight cap? ☒ Yes ☐ No Access Port: ☐ Yes ☒ No
Casing $\geq$ 12 inches above ground? ☒ Yes ☐ No - Describe _____
Depth of Casing 382 ft. Method Drilled Air Rotary
Condition of Well Casing: ☒ Good ☐ Fair ☐ Poor Describe _____
Control Valve? ☐ Yes ☒ No Pressure Gauge: ☐ Yes ☒ No
Condition of Piping and Valving good
Auger to a depth of N/A ft. Evidence of Annular Seal ☐ Yes ☒ No
Are there obvious construction problems that may be a source for contamination or waste of water?
☐ Yes ☒ No (Describe in Remarks and Attach Photo - On Reverse)
6. HYDROLOGIC INFORMATION:
Depth to Static Water 192* ft. Water Temperature 56* °F
Flowing Artesian ☐ Yes ☒ No Pressure: 34 (psi) on gage at time of exam
Water Sample Taken? ☐ Yes ☒ No If yes, describe purpose _____
Water Quality Measurements/Observations (Describe) _____
7. WELL USE:
☒ Domestic ☒ Irrigation ☒ Stock
☐ Test ☐ Municipal ☐ Industrial
☐ Abandoned ☐ Waste Disposal/Injection ☐ Not Used
☐ Other: _____

*per well log

8. **POSSIBLE CONTAMINATION SOURCES:**

Is there evidence of Chemigation? ☐ Yes ☒ No

If yes, is there a check-valve present? ☐ Yes ☒ No

Is there a possible source of contamination nearby? ☐ Yes ☒ No

If yes, what Type? _____

How far away from the well is this source? _____

9. **REMARKS:** Big hole next to well casing

Kay Walker

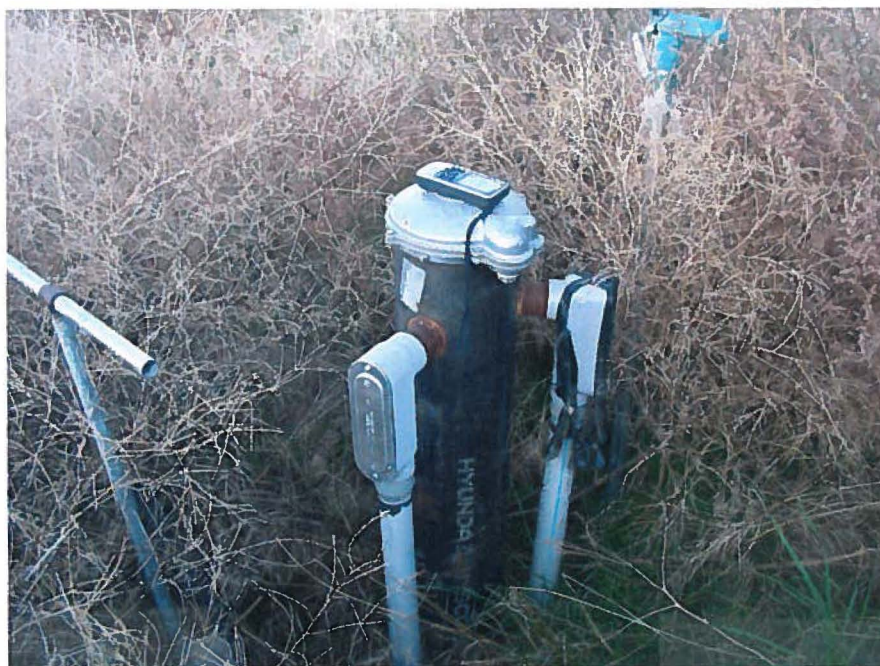
Signature of Dept. Representative & Title

10-21-2010

Inspection Date

PHOTOS, DRAWINGS, OTHER ATTACHMENTS:

Field exam Permits 63-12527 and 63-33266
10/21/2010



Valley Pump and Equipment Co. Inc.

Box 548
Emmett, ID 83617
208-365-2972

Invoice

DATE	INVOICE #
7/8/2009	104498

Rec'd by
fax 4/8/2011-

BILL TO	SHIP TO
Tom Sellin 1036 E. Iron Eagle Rd.-Suite#100 Eagle, ID 83616	

P.O. NUMBER	REP	TERMS
		Net 30

QUANTITY	DESCRIPTION
5	1/2" teflon tape
336	feet of 1-1/4" galvanized pipe
4	1-1/4" flomatic check valve
1	# 8 heat shrink kit
346	8-3 flat jacketed sub wire w/g
1	(20AV15S4PE)1-1/2hp 18gpm Aqua Duty Stainless Steel pump end 09C22
1	3 HP 3 phase 230 volt Franklin submersible motor S/N 07L18-29-0578
1	130C rubber splicing tape
1	black electrical tape
4	Blue wire nuts
4	2 AWG Split bolt Connector
1	4" black valve cover
1	heat shrink kit for #10,#12,#14 wire
1	# 2 Heatshrink Kit
1	7-1/2 HP 3-Wire 1-Ph 230 Volt Franklin Sub. Motor S/N 08J19-23-6163
1	7-1/2 HP 50 GPM Pump End 08J19
1	3" x 2" black iron hex bushing
350	feet of 2" galvanized pipe

Thank you for your business & have a great day.

Subtotal

Sales Tax (0.0%)

Total

Payments/Credits

Thank you

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

854730

1. WELL TAG NO. D

Drilling Permit No. D0053448 9071516-854730
Water right or injection well # 63-12527

2. OWNER

Name Tom Sellin / Michael Mendoza
Address 1036 Iron Eagle Suite 100
City Eagle State ID Zip 83616

3. WELL LOCATION:

Twp. 5 North ☒ or South ☐ Rge. 1 East ☐ or West ☒
Sec. 32 NW 1/4 NW 1/4 SW 1/4
10 acres 40 acres 160 acres

Gov't Lot _____ County ada
Lat. 43° 43.669 (Deg. and Decimal minutes)
Long. 116° 29.504 (Deg. and Decimal minutes)
Address of Well Site n/a N. Plarnigan Pl.
City star

Lot 5 Blk. 1 Sub. Name Chukar Point

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ 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 ft³)	Placement method/procedure
bentonite	0	45	1200	pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Linear	Threaded	Welded
8	3	380	.250	steel	☒	☐	☐	☒
6	373	382	.250	steel	☒	☐	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 380

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____
Manufactured screen ☒ Y ☐ N Type johnson
Method of installation washin

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
382	392	.16	10	6	ss	

Length of Headpipe 9 Length of Tailpipe _____
Packer ☒ Y ☐ N Type 3 3 weng k-packer

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	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) 210 Static water level (ft) 192
Water temp. (°F) 56 Bottom hole temp. (°F) _____
Describe access port cap

Well test:

Test method:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
<u>7</u>	<u>100</u>	<u>3hr</u>	☐	☐	☒	☐
<u>= 0.22 cfs</u>						

Water Quality test or comments:

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
14	0	3	top soil	X
14	3	5	hard pan	X
14	5	18	brown sandy clay	X
10	18	39	brown sandy clay	X
10	39	44	pea gravel	X
8	44	75	gravel	X
8	75	210	brown clay with sand strips	X
8	210	218	brown sand	X
8	218	221	tan clay	X
8	221	230	fine to medium sand	X
8	230	260	tan clay	X
8	260	268	medium sand	X
8	268	270	light brown clay	X
8	270	273	fine to medium sand	X
8	273	276	brown clay	X
8	276	280	light green clay	X
8	280	286	fine sand	X
8	286	290	sticky tan clay	X
8	290	293	fine sand	X
8	293	301	sticky tan clay	X
8	301	304	medium sand	X
8	304	310	tan clay	X
8	310	313	fine sand	X
8	313	329	sandy tan clay	X
8	329	331	medium sand	X
8	331	335	blue clay	X
8	335	342	sticky tan clay	X
8	342	352	tan clay with thin sand strip	X
8	352	375	blue clay with sand strips	X
8	375	380	sticky blue clay	X
8	380	400	medium sand	X

Completed Depth (Measurable) 392

Date: Started 1-13-09 Completed 1-22-09

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 waterpro well drilling Co. No. 626
Principal Driller Monte Post Date 3-13-08
Driller _____ Date _____
Operator II _____ Date _____
Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.

RECEIVED

MAR 17 2009

WATER RESOURCES
WESTERN REGION