

IDAHO DEPARTMENT OF WATER RESOURCES

WELL INSPECTION FORM

1. DRILLING PERMIT NO: UNKNOWN OTHER APPLICABLE NO: 37-08226
2. OWNER: PIGEON, KRISTINE Phone: 788-9636
Address: 109 GREENHORN RD. (LOT 4 GREENHORN SUBD.)
3. WELL LOCATION: Twp 03N, Rge. 7E, Sec. 13, SE 1/4 NE 1/4
County BLAINE (Provide sketch map and photo on reverse.)
4. DRILLER: ROESSLER, RAY Lic. No. _____
When Drilled? 1985 ±
5. WELL CONSTRUCTION:
Casing Diameter 9 inches Water tight cap? ☒ Yes ☐ No Access Port: ☒ Yes ☐ No
Casing ≥ 12 inches above ground? ☒ Yes ☐ No - Describe _____
Depth of Casing _____ ft. Method Drilled _____
Condition of Well Casing: ☐ Good ☒ Fair ☐ Poor Describe _____
Control Valve? ☐ Yes ☐ No Pressure Gauge: ☐ Yes ☒ No
Condition of Piping and Valving _____
Auger to a depth of _____ 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 100 ft. Water Temperature _____ °F
Flowing Artesian ☐ Yes ☒ No Pressure: 50 ± (psi)
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: WELLS PER 37-07935 - 08464 ARE FOR GREENHORN SUBD. WHICH MS. PIGEON OWES. ALSO

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: SEE #7 "OTHER"

Georgia Satterlee 23 MAY 1997
Signature of Dept. Representative & Title Inspection Date

PHOTOS, DRAWINGS, OTHER ATTACHMENTS:



GPS TAG #0002762

