

IDAHO DEPARTMENT OF WATER RESOURCES

WELL INSPECTION FORM

1. DRILLING PERMIT NO: NONE FD. OTHER APPLICABLE NO: 37-08436
2. OWNER: HARTMAN, RUTH Phone: _____
Address: _____
3. WELL LOCATION: Twp 04N, Rge. 18E, Sec. 32, SW 1/4 SW 1/4
County BLAINE (Provide sketch map and photo on reverse.)
4. DRILLER: WOOD RVR DRILLING Lic. No. _____
When Drilled? 1987
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 SEE PHOTO
Depth of Casing _____ ft. Method Drilled _____
Condition of Well Casing: ☐ Good ☐ Fair ☐ Poor Describe UNKNOWN
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 constuction 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 _____ ft. Water Temperature _____ °F
Flowing Artesian ☐ Yes ☐ No Pressure: _____ (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: _____

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:

Irrigation only

JL Satterlee *WR Agent*

Signature of Dept. Representative & Title

13 Aug 97

Inspection Date

PHOTOS, DRAWINGS, OTHER ATTACHMENTS:

GPS A0002939

POST 7' WEST
OF WELL



PHOTO LOOKING W/14