

IDAHO DEPARTMENT OF WATER RESOURCES

WELL INSPECTION FORM

1. DRILLING PERMIT NO: _____ OTHER APPLICABLE NO: 37-08483
2. OWNER: BRUCE AUGUSTUS Phone: 726-9422
Address: PO BOX 450, SUN VALLEY, ID. 83353
3. WELL LOCATION: Twp 04N, Rge. 18E, Sec. 18, SE 1/4 SW 1/4
County BLAINE (Provide sketch map and photo on reverse.)
4. DRILLER: _____ Lic. No. _____
When Drilled? 1971±
5. WELL CONSTRUCTION:
Casing Diameter 6 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 _____ ft. Water Temperature _____ °F
Flowing Artesian ☐ Yes ☒ No Pressure: 60 (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: COMMERCIAL

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:

GPS Site Tag on pump house (North Side)
#AD0004691

G. Satterlee

Signature of Dept. Representative & Title

29 Apr 98

Inspection Date

PHOTOS, DRAWINGS, OTHER ATTACHMENTS:



↑ Photo Looking E'ly



↓ Photo looking S'ly