

Manufactured by
Alexander Clark Business Forms
Bolsa, Idaho - (208) 322-0611



Form 238-7
6/07

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 2055847

Drilling Permit No. _____

Water right or injection well # 63-31922

2. OWNER: West Ballantyne Water Users Assoc

Name: % Don Stockton

Address: 2370 W Valli Hi Rd

City: Eagle State: ID Zip: 83616

3. WELL LOCATION:

Twp. 5 North or South Rge. 1 East or West

Sec. 31 1/4 NW 1/4 NE 1/4

Gov't Lot _____ County Ada

Lat. 43° 43' 978 (Deg. and Decimal minutes)

Long. 116° 22' 781 (Deg. and Decimal minutes)

Address of Well Site: Ballantyne Rd

City: Eagle

Lot _____ Blk. _____ Sub. Name _____

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

Lot _____ Blk. _____ Sub. Name _____

4. USE:

Domestic Municipal Monitor Irrigation Thermal Injection

Other _____

5. TYPE OF WORK:

New well Replacement well Modify existing well

Abandonment Other _____

6. DRILL METHOD:

Air Rotary Mud Rotary Cable Other _____

7. SEALING PROCEDURES:

Seal material Front (ft) To (ft) Quantity (lbs or ft³) Placement method/procedure

Neat Cement 0 143 Pour

8. CASING/LINER:

Diameter (nominal) From (ft) To (ft) Gauge/Schedule Material Casing Liner Threaded Welded

8" 72 227 .250 Steel

5" 227 229 .258 Steel

5" 234 241 .258 Steel

Was drive shoe used? Y N Shoe Depth(s) 227

9. PERFORATIONS/SCREENS:

Perforations Y N Method _____

Manufactured screen Y N Type 6" Telescoping

Method of Installation: Washed In & Pulled Back

From (ft) To (ft) Slot size Number/ft Diameter (nominal) Material Gauge or Schedule

229 234 .30 5" St Steel

241 246 .30 5" St Steel

246 256 .35 5" St Steel

Length of Headpipe 5' Length of Tailpipe _____

Packer Y N Type K-Packer

10. FILTER PACK:

Filter Material From (ft) To (ft) Quantity (lbs or ft³) Placement method

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) 200 Static water level (ft) 110

Water temp. (°F) 56 Bottom hole temp. (°F) _____

Describe access port _____

Well test: _____ Test method: _____

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
<u>No test</u>	<u>400</u>	<u>6 hrs</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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
<u>8"</u>	<u>143</u>	<u>175</u>	<u>Brown Sand</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>175</u>	<u>200</u>	<u>Brown Clay</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>200</u>	<u>220</u>	<u>Brown & White Sand</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>210</u>	<u>211</u>	<u>Brown Clay</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>211</u>	<u>220</u>	<u>Brown & White Sand</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>220</u>	<u>227</u>	<u>Clay</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>227</u>	<u>234</u>	<u>Coarse White Sand</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>234</u>	<u>242</u>	<u>Clay</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>8"</u>	<u>242</u>	<u>256</u>	<u>Coarse White Sand</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Completed Depth (Measurable): 256'

Date Started: 7/14/09 Date Completed: 7/22/09

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 S.O.S. Well Drilling Co. No. 212

*Principal Driller _____ Date _____

*Driller _____ Date _____

*Operator II _____ Date _____

Operator I _____ Date _____

*Signature of Principal Driller and rig operator are required.



POU & POD Claim Map

1987 NAPP

63-31922







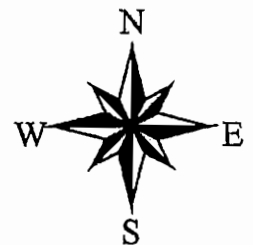
1320 0 1320 Feet



⊙ Point of Diversion for 63-04396

Total Claimed Acres: 47.0

-  Claimed Place of Use
-  Ada County Tax Lot Data
-  Quarter Quarter Lines
-  Section Lines



Prepared by: C. Saxton
Date: May 2004