

6000 Little Freezeout Rd.
Caldwell, Idaho 83607
208-453-8886 P
208-454-2664 F
208-941-1722 C

**Waterpro Well
Drilling Inc.**

Fax

To:	Shelly Keen	From:	Monte Post
Fax:		Pages:	
Phone:		Date:	12-31-08
Re:		cc:	

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• **Comments:**

To Shelly Keen,

12-31-08

Tom Sellin would like me to drill him a well like his neighbors well. We'd like to drill an 8 inch well with the maximum depth being 530 ft. if needed to get the quantity of water needed for him to irrigate. I've enclosed a copy of his neighbor's well log. The neighbors well is about 800 ft. from where Tom would like his well drilled. If you need anything else please call. My cell # 941-1722 or my office # 453-8886.

Thanks,

Monte Post

Form 238-7
5/02IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D

DRILLING PERMIT NO.

Water Right or Injection Well No.

41974

63-3194P

2. OWNER:

Name

Address

City

Daniel Van Lih

4476 N. Coburn PL

Eagle

State

ID

Zip

83616

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 5

North

or South

Rge. 1

East

or West

Sec. 32

SW 1/4

NW 1/4

Gov't Lot

Lot:

Long:

Address of Well Site

4075

Talmigan

City

LI. 4

Blk. 1

Sub. Name

Chukar Point Sub

4. USE:

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

5. TYPE OF WORK check all that apply

(Replacement etc.)

☒ New Well☐ Modify☐ Abandonment☐ Other

6. DRILL METHOD:

☒ Air Rotary☒ Cable☐ Mud Rotary☐ Other

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	30	1000	Over hole

Was drive shoe used?

☒ Y☐ N

Shoe Depth(s)

474

Was drive shoe seal tested?

☐ Y☒ N

How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Unr	Welded	Threaded
8	+1	474	250	Steel	☐	☐	☒	☐
6	462	477	250	Steel	☐	☐	☒	☐
6	477	503	250	Steel	☐	☐	☒	☐

Length of Headpipe

14'

Length of Tailpipe

3'

Packer

☒ Y☐ N

Type

305 Stainless

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method

Screen Type & Method of Installation

pull back

From	To	Size	Number	Diameter	Material	Casing	Unr
505	525	020		6	S.S.	☐	☒
477	497	020		6	S.S.	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

260 ft. below ground

Artesian pressure

Depth flow encountered

ft.

Describe access port or control device:

12. WELL TESTS:

☐ Pump☐ Bailor☒ Air☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
80			5

Water Temp.

Bottom hole temp.

Water Quality test or comments:

Depth first Water Encounter

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
12	0	2 Top Soil		X
	2	20 Sandy clay		X
8	30	25 Sandy clay		X
	85	131 Gravel		X
	131	245 Sandy clay		X
	245	252 Sandy clay / w SAND	X	
	252	257 SAND	X	
	257	362 Sandy clay / w SAND	X	
	362	372 Sand - clay streaks	X	
	372	394 Sandy clay	X	
	394	406 Blue clay	X	
	406	409 C. Blue SAND	X	
	409	422 Blue clay / SAND streaks	X	
	422	430 C. SAND	X	
	430	460 Blue clay / SAND streaks	X	
	460	472 Sandy Blue clay	X	
	472	477 coarse Blue SAND	X	
	477	495 coarse Blue SAND / clay	X	
	495	503 Blue clay	X	X
	503	525 coarse Blue SAND	X	
	525	528 Blue clay		X

RECEIVED

JUN 23 2006

WATER RESOURCES
WESTERN REGION

Completed Depth

525

(Measurable)

Date: Started

9-20-05

Completed

6-19-06

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

D PWD

Firm No.

372

Principal Driller

D. H. H.

Date

6-19-06

Driller or Operator II

Date

Operator I

Date

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

1542664
CAF

Form 235-1

10/1/03

Drilling Permit No. _____

Drilling Permit I.D. Tag No. D0053448Water Right Permit No. 63-12527

Injection Permit No. _____

State of Idaho
Department of Water ResourcesAPPLICATION FOR DRILLING PERMIT
(FOR THE CONSTRUCTION OF A WELL)

1. Owner (please print): Tom Sellin

2. Mailing Address: 1036 Iron Eagle Sweet 100
City: Eagle State: ID Zip Code: 83616 Telephone (208) 939-6641

3. Proposed Well Location: Twp. 5N, Rge. 1W, Sec. 32, 1/4 NE 1/4 SW 1/4;
Gov't Lot No. _____ County ADA Lat. 43 : 43 : 669 Long. 116 : 29 : 504
Street Address of Well Site _____ City Stare
Lot, block and subdivision Lt 5 BLK 1 Chukar Point Give at least name of road + Distance to Road or Landmark

4. Proposed Use of Well:

- ☒ DOMESTIC: The use of water for homes, organization camps, public campgrounds, livestock and for any other purpose in connection therewith, including irrigation of up to 1/2 acre of land, if the total use is not in excess of 13,000 gpd; or any other uses, if the total use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

Domestic does not include water for multiple ownership subdivisions, mobile home parks, commercial or business establishments, unless the use does not exceed a diversion rate of 0.04 cfs and a diversion volume of 2500 gpd.

NON-DOMESTIC: ☒ Irrigation ☐ Municipal ☐ Industrial
☐ Livestock ☐ Test ☐ Other _____
Type _____ Number Hd. _____ (Describe)

☐ INJECTION☐ MONITORING: A well bore schematic and map is required for each blanket permit. No. of proposed wells: _____

5. Well Construction Information:

A. ☒ New well ☐ Modify ☐ Replace

B. Proposed Casing Diameter 8 Proposed Maximum Depth 530

C. Anticipated bottom hole temperature:
☒ 85 F or less (Cold Water Well) ☐ 85 F to 212 F (Low Temp. Geo. Well) ☐ 212 F. or more (Geothermal Well)

6. Construction Start Date: _____

7. Anticipated Well Driller: Waterpro Well Drilling Driller's Lic. No. 626
NOTE: The actual well driller must be identified prior to drilling.8. Applicant's Signature: Monte Post Date _____

Address (if different than owner): _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Title: _____



(Owner, Firm Representative, Other)