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Form 238-7
3/95

NOV 13 1997



IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

0977727

Office Use Only			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat: : : :	Long: : : :		

NORTHERN REGION

1. DRILLING PERMIT NO. D 000-3-080-

Other IDWR No. 97-97-N-27

2. OWNER:

Name Mike Hawes

Address Box 113 Newport

City Newport State Id Zip 99156

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N		X	
Twp. <u>58</u>		North ☒ or South ☐	
Rge. <u>4</u>		East ☐ or West ☒	
Sec. <u>16</u>		1/4 <u>NE</u> 1/4 <u>NE</u> 1/4	
Gov't Lot _____		County _____	
Lat: : : :		Long: : : :	

Address of Well Site Jack Pine Flats
City First River

Lt. _____ Blk. _____ Sub. Name _____

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/FILTER PACK			AMOUNT		METHOD
Material	From	To	Feet	Feet	
<u>Bentonite</u>	<u>0</u>	<u>18</u>	<u>8</u>	<u>8</u>	<u>Templasing</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____

Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>1</u>	<u>255</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method Leaking
☒ Screens Screen Type Johnson

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>255</u>	<u>260</u>	<u>6</u>		<u>6"</u>	<u>S.S.</u>	☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

103 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

NENE 16 58N 4W

11. WELL TESTS:

☐ Pump ☒ Bailor ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>5</u>	<u>50</u>	<u>153'</u>	<u>2 hrs</u>

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encountered _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>18</u>	<u>Sand, topsoil</u>		☒
<u>6"</u>	<u>18</u>	<u>27</u>	<u>Sand</u>		☒
	<u>27</u>	<u>30</u>	<u>Clay mixed w/ sand</u>	☒	
	<u>30</u>	<u>80</u>	<u>Clay</u>	☒	
	<u>80</u>	<u>85</u>	<u>Clay</u>	☒	
	<u>85</u>	<u>86</u>	<u>Sand</u>	☒	
	<u>86</u>	<u>100</u>	<u>Clay</u>	☒	
	<u>100</u>	<u>150</u>	<u>Clay</u>	☒	
	<u>150</u>	<u>200</u>	<u>Clay</u>	☒	
	<u>200</u>	<u>240</u>	<u>Clay</u>	☒	
	<u>240</u>	<u>242</u>	<u>Sand</u>	☒	
	<u>242</u>	<u>250</u>	<u>Clay</u>	☒	
	<u>250</u>	<u>255</u>	<u>Clay mixed w/ sand</u>	☒	
	<u>255</u>	<u>260</u>	<u>Very fine Sand 261' clay</u>	☒	

Completed Depth 260' (Measurable)
Date: Started 8-15-97 Completed 8-20-97

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name Carl P. Hays, Inc. Firm No. 168

Firm Official Carl P. Hays Date 8-24-97

and Supervisor or Operator Steve Pitter Date 8-24-97

(Sign once if Firm Official & Operator)