

# IDAHO DEPARTMENT OF WATER RESOURCES

## WELL DRILLER'S REPORT

789123

Office Use Only

Inspected by \_\_\_\_\_

Twp \_\_\_\_\_ Rge \_\_\_\_\_ Sec \_\_\_\_\_

1/4 1/4 1/4

Lat: : : Long: : :


**1. DRILLING PERMIT NO.** - - - - -  
Other IDWR No. **D0025949**

**2. OWNER:**

Name **Chaney Stotts**  
Address **19300 Goodson Rd**  
City **Caldwell** State ID Zip **83607**

**3. LOCATION OF WELL** by legal description:

Sketch map location must agree with written location

W  E

Twp. 3 North ☒ or South ☐  
 Rge. 4 East ☐ or West ☒  
 Sec. 15  $\frac{1}{4}$  NE  $\frac{1}{4}$  SW  $\frac{1}{4}$   
                     10 acres                      40 acres                      160 acres

S Gov't lot \_\_\_\_\_ County **Canyon**  
 Lat: : : \_\_\_\_\_ Long: : : \_\_\_\_\_  
 Address of Well Site **15269 Frost Rd**

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

Lt.                      Blk.                      Sub. Name                      \_\_\_\_\_

#### **4. USE:**

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

**5. TYPE OF WORK** check all that apply (Replacement etc.)  
X New Well ☐ Modify ☐ Abandonment ☐ Other

## 6. DRILL METHOD

X Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

## 7. SEALING PROCEDURES

SEAL/FILTER PACK				METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	19	500 lbs	overbore

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
6.625	+2	56	250	Steel	X	<input type="checkbox"/>	X	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe N/A Length of Tailpipe \_\_\_\_\_

## 9. PERFORATIONS/SCREENS

☐ Perforations      Method \_\_\_\_\_

☐ Screens            Screen Type \_\_\_\_\_

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

**10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:**

Depth flow encountered 39 ft.      Artesian Pressure      lb  
Describe access port or control devices:

## 11. WELL TESTS:

☐ Pump    ☐ Bailer    ☒ Air    ☐ Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time

Water Temp. \_\_\_\_\_ Bottom hole temp. \_\_\_\_\_  
 Water Quality test or comments: \_\_\_\_\_  
 Depth first Water Encountered **50'**

**12. LITHOLOGIC LOG:** (Describe repair or abandonment)

## Water

[illegible]

Completed Depth: 56' (Measurable)  
Date: Started 11/19/02 Completed 11/19/02

### 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 Hiddleston & Son, Inc.--Boise Firm No. 35

Firm Official Mark S. Hinkle Date 12/3/02

Supervisor or Operator Matt Haddleton Date 12/3/02  
(Sign once if Firm Official & Operator)