

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Use Typewriter
or
Ball Point Pen

49118

1. DRILLING PERMIT NO. 63-95-W-0044-000 ²⁰⁰
Other IDWR No. 63-03608

2. OWNER: City of Nysa 10
Name City of Nysa
Address 145 S 3rd
City Nysa State OK Zip 97913

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N

W E S

Twp. 6 North or South
Rge. 5 East or West
Sec. 7 1/4 NW 1/4 NE 1/4
Gov't Lot 1 County Canyon 10 acres 40 acres 160 acres

Address of Well Site East Bank of Snake R.W. - Supplywell Field City Nysa
(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

- Domestic Municipal Monitor Irrigation
 Thermal Injection Other

5. TYPE OF WORK

- New Well Modify or Repair Replacement Abandonment

6. DRILL METHOD

- Mud Rotary Air Rotary Cable Other

7. SEALING PROCEDURES

Material	SEAL/FILTER PACK		AMOUNT Sacks or Pounds	METHOD
	From	To		
<u>Cement</u>	<u>0</u>	<u>20</u>	<u>2644</u>	<u>Overbore</u>
<u>6-9 Silica</u>	<u>10</u>	<u>58</u>	<u>6714</u>	<u>Pressure</u> <u>Grout</u>

Was drive shoe used? Y N Shoe Depth(s) 20
Was drive shoe seal tested? Y N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>18</u>	<u>1</u>	<u>20</u>	<u>315</u>	<u>Steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>10</u>	<u>2</u>	<u>53</u>	<u>3.5</u>	<u>Steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 33 Length of Tailpipe 11

9. PERFORATIONS/SCREENS

- Perforations Method _____
 Screens Screen Type 304 STAINLESS

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>32</u>	<u>42</u>	<u>.080</u>		<u>10</u>	<u>Stainless steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

11 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

- Pump Bailor Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>Pump 575</u>	<u>18'</u>		<u>5.5</u>
<u>Air 500</u>		<u>52</u>	

Water Temp. 61° Bottom hole temp. _____

Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
	<u>0</u>	<u>8</u>	<u>Brown Silty Clay</u>		
	<u>8</u>	<u>20</u>	<u>Sand and Gravel</u>	<input checked="" type="checkbox"/>	
	<u>14</u>	<u>41</u>	<u>Sand and Gravel</u>	<input checked="" type="checkbox"/>	
	<u>14</u>	<u>41</u>	<u>Blue Clay</u>		

RECEIVED
AUG 07 1995
Department of Water Resources

RECEIVED
JUL 28 1995
WATER RESOURCES
WESTERN REGION
Late RW

007 02 1995

Completed Depth 52 (Measurable)
Date: Started 5-16-95 Completed 5-19-95

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 Dallas Drilling Pump Firm No. 445

Firm Official [Signature] Date 7-25-95

and Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)