

49525

1. DRILLING PERMIT NO. 47-95-S-0075-000

Other IDWR No. 47-W-0022-001
 2. OWNER: 47-W-0023-001 D.W. 9-19-95

2. OWNER:

Name Ferris + Freestone Jr
Address 3829 E 3300N
City HANSEN State ID Zip 83334

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
 W E
 Twp. 11 North ☐ or South ☒
 Rge. 18 East ☒ or West ☐
 Sec. 11, _____ 1/4 NW 1/4 NW 1/4
10 acres 40 acres 160 acres
 Gov't Lot _____ County Twin Falls

Address of Well Site Same as Above
City Hesperia

(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

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	19	200 Pounds	Dry

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"	+1	19	250	Steel	<input checked="" 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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ 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:

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

11. WELL TESTS:

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time

Water Temp. _____ Bottom hole temp. -85

Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

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 Eaton Drilling Firm No. 26

Firm Official [Signature] Date 5-29-95

and
Supervisor or Operator Michael Y. Hood Date 5-29-95

(Sign once if Firm Official & Operator)