Form 238-7
9/82

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

USE TYPEWRITER OR BALLPOINT PEN

RECEIVED
AUG 6 1984
Department of Water Resources
Western Regional Office

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

1. WELL OWNER

Name GLEN OSBORN

Address WILDER IDAHO

Owner's Permit No. 63-84-C-0111-000 83676

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☒ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

4. METHOD DRILLED

☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☒ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
.250 inches	6 inches +	1 feet	141 feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

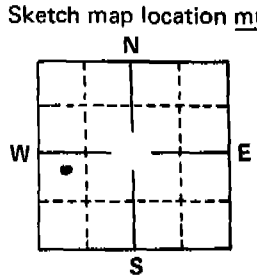
Was casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ Torch
Size of perforation _____ inches by _____ inches

Number	From	To
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet

Well screen installed? ☐ Yes ☒ No
Manufacturer's name _____
Type _____ Model No. _____
Diameter ____ Slot size ____ Set from _____ feet to _____ feet
Diameter ____ Slot size ____ Set from _____ feet to _____ feet
Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
Placed from _____ feet to _____ feet
Surface seal depth 18 Material used in seal: ☐ Cement grout ☐ Bentonite ☒ Puddling clay ☐ _____
Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth
Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata
Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____
Lot No. _____ Block No. _____
County CANYON
NW ¼ SW ¼ Sec. 22, T. 4 N/S, R. 5 E/W.

7. WATER LEVEL

Static water level 95 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature ____ °F. Quality 28 GRNS.
Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump ☒ Bailer ☐ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
15	100	2

9. LITHOLOGIC LOG

70095

Bore Diam.	Depth From	Depth To	Material	Water Yes	Water No
6	0	1	BROWN CLAY		✓
	1	6	GRAVEL		✓
	6	15	BROWN SAND		✓
	15	60	SANDY BROWN CLAY		✓
	60	70	BROWN SAND		✓
	70	85	STICKY BROWN CLAY		✓
	85	135	SAND & GRAVEL	✓	
	135	145	BROWN CLAY		✓
	145		COARSE BROWN SAND	✓	

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MICROFILMED

10.

Work started 4-10-84 finished 4-13-84

11. DRILLERS CERTIFICATION

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

Firm Name KENNE HEITZER DRL. Firm No. 93
RT-2
Address HOMEDALE IDA Date 4-15-84
Signed by (Firm Official) Kenneth Heitzer
and
(Operator) _____

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT