

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Well ID No. 802984
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 _____ 1/4 _____ 1/4 _____
Lat: _____ : _____ Long: _____ : _____

1. WELL TAG NO. D 00 29339
DRILLING PERMIT NO. _____
Water Right or Injection Well No. _____

2. OWNER:
Name Kevin Sutton
Address PO Box 25
City Ola State ID Zip 83657

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 10 North ☒ or South ☐
Rge. 1 East ☒ or West ☐
Sec. 14 1/4 NE 1/4 SE 1/4
Gov't Lot _____ County Gem 10 acres 40 acres 160 acres

Lat: _____ : _____ Long: _____ : _____
Address of Well Site 1 1/2 miles on RT past Ola Store City Ola
(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.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>18</u>	<u>7</u>	<u>Dry Pour</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 198

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>198</u>	<u>250</u>	<u>Steel</u>	☒	☐	☐	☐
<u>6"</u>	<u>+2</u>	<u>280</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method _____

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

0+2 ft. below ground Artesian pressure 20 lb.

Depth flow encountered 200' ft. Describe access port or control devices:

Artesian Cap w/ 1 1/2" port and Valve

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>38</u>	<u>390</u>	<u>390</u>	<u>4 hrs</u>

Water Temp. 65° Bottom hole temp. _____

Water Quality test or comments: Clean

Depth first Water Encounter 67

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>18</u>	<u>Dark bin Clay</u>		
<u>8</u>	<u>18</u>	<u>24</u>	<u>Dark Bin Clay</u>		
	<u>24</u>	<u>27</u>	<u>Sandy Blue Clay</u>		
	<u>27</u>	<u>30</u>	<u>sand + gravel</u>		
	<u>30</u>	<u>41</u>	<u>sandy blue clay</u>		
	<u>41</u>	<u>77</u>	<u>Grey granite w/ lava + clay strips</u>		
	<u>77</u>	<u>87</u>	<u>Brown - Red clay</u>		
	<u>87</u>	<u>94</u>	<u>Brown Granite</u>		
	<u>94</u>	<u>167</u>	<u>Tan clay w/ grey granite strips</u>		
	<u>167</u>	<u>185</u>	<u>sandstone</u>		
	<u>185</u>	<u>200</u>	<u>Baked blue clay + brown</u>		
	<u>200</u>	<u>230</u>	<u>Tan clay</u>		
	<u>230</u>	<u>250</u>	<u>sandy white clay</u>		
	<u>250</u>	<u>257</u>	<u>Tan clay</u>		
	<u>257</u>	<u>265</u>	<u>Baked blue clay</u>		
	<u>265</u>	<u>272</u>	<u>Grey - white granite</u>		
			<u>well Heaved to 200' modified to 390'</u>		
	<u>272</u>	<u>280</u>	<u>Heaving gravel</u>		
	<u>280</u>	<u>292</u>	<u>Lava</u>		
	<u>292</u>	<u>390</u>	<u>Black + white granite</u>		
			<u>Log modified on 6-30-03</u>		

RECEIVED
JUL 23 2003

Completed Depth 200'
Date: Started 5-31-03 Completed 6-3-03
WATER RESOURCES WESTERN REGION (insurable)

14. DRILLER'S CERTIFICATION

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

Company Name Jim Drywall Firm No. 623

Principal Driller and Operator [Signature] Date 6-10-03

Driller or Operator II _____ Date _____

Operator I _____ Date _____

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.