

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0053062
DRILLING PERMIT NO. _____
Water Right or Injection Well No. _____

2. OWNER:
Name Larry Waller
Address 2458 West Central Rd.
City Emmett State ID. Zip 83607

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. 2 East ☒ or West ☐
Sec. 75 NW 1/4 NU 1/4 NU 1/4
Gov't Lot _____
Lat: 44° 12.576 N Long: 116° 12.693 W
Address of Well Site 86 Velgem Rd.
City High Valley
(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>Dentonix</u>	<u>0</u>	<u>20</u>	<u>500 lbs</u>	<u>Dry Pound</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 37'
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>37</u>	<u>.25</u>	<u>Steel</u>	☒	☐	☒	☐
<u>42</u>	<u>-20</u>	<u>300</u>		<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE
Perforation Method SAW
Screen Type & Method of Installation

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>200</u>	<u>300</u>	<u>1/4x1/4</u>	<u>1/ft</u>	<u>4.5</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
70 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 260 ft. Describe access port or control devices: well cap

852387
Office Use Only
Well ID No. 422159
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 _____ 1/4 _____ 1/4 _____
Lat: _____ Long: _____

12. WELL TESTS:
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>8</u>		<u>280</u>	<u>30 min</u>

Water Temp. 50° F Bottom hole temp. _____
Water Quality test or comments: Good.

13. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>12"</u>	<u>0</u>	<u>5</u>	<u>top Soil</u>		☒
<u>12"</u>	<u>5</u>	<u>20</u>	<u>Granite hard.</u>		☒
<u>8"</u>	<u>20</u>	<u>35</u>	<u>Granite hard.</u>		☒
<u>6"</u>	<u>35</u>	<u>57</u>	<u>Granite hard.</u>		☒
	<u>57</u>	<u>62</u>	<u>Granite Brown hard.</u>	☒	
	<u>62</u>	<u>63</u>	<u>" " Med.</u>	☒	
	<u>63</u>	<u>73</u>	<u>" " hard.</u>	☒	
	<u>73</u>	<u>78</u>	<u>" " Grey hard.</u>	☒	
	<u>78</u>	<u>90</u>	<u>" " Brown hard.</u>	☒	
	<u>90</u>	<u>110</u>	<u>" " Grey hard.</u>		☒
	<u>110</u>	<u>130</u>	<u>" " Brown Med hard.</u>	☒	
	<u>130</u>	<u>140</u>	<u>" " Grey hard.</u>	☒	
	<u>140</u>	<u>160</u>	<u>" " " "</u>		
	<u>160</u>	<u>171</u>	<u>" " Grey/white Fractured</u>	☒	
	<u>171</u>	<u>185</u>	<u>" " Grey hard. Fractured</u>	☒	
	<u>185</u>	<u>190</u>	<u>" " Brown hard.</u>	☒	
	<u>190</u>	<u>200</u>	<u>" " Grey hard.</u>	☒	
	<u>200</u>	<u>240</u>	<u>" " " "</u>	☒	
	<u>240</u>	<u>262</u>	<u>" " Med hard.</u>	☒	
	<u>262</u>	<u>265</u>	<u>" " Fractured</u>	☒	
	<u>265</u>	<u>300</u>	<u>" " Hard.</u>		

RECEIVED

AUG 07 2008

WATER RESOURCES
WESTERN REGION

Completed Depth 300 (Measurable)
Date: Started 7/19/08 Completed 7/21/08

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 All State Drilling Firm No. 561
Principal Driller Sam Jones Date 7/31/08
and Driller or Operator II Math K Korman Date 8/31/08
Operator I _____ Date _____

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