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Form 238-7
6/07

859381

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0057782

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER:

Name Gaylord Dubie

Address 4310 N. Linder Rd.

City Eagle State ID Zip 83616

3.WELL LOCATION:

Twp. 10 North ☒ or South ☐ Rge. 1 East ☒ or West ☐

Sec. 23 SE (10 acres) 1/4 NE (40 acres) 1/4 NW (160 acres) 1/4

Gov't Lot _____ County Gem

Lat. 44 ° 11.534 (Deg. and Decimal minutes)

Long. 116 ° 18.237 (Deg. and Decimal minutes)

Address of Well Site 25 m N of Baldwin Rd. on 3rd Fork Rd.

East side NE corner of barn City Ola

(Give at least name of road + Distance to Road or Landmark)

Lot. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection

☐ Other _____

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well

☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method/procedure
3/8 Bentonite	0	46	1650Lbs.	Dry Pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/ Schedule	Material	Casing	Liner	Threaded	Welded
6"	+2	56	.250	Steel	☒	☐	☐	☒
4.5"	45	85	S-17	PVC	☐	☒	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

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

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____

Manufactured screen ☒ Y ☐ N Type PVC

Method of installation placed

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
85	125	.020	----	4.5"	PVC	SDR-17

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10.FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method

11. FLOWING ARTESIAN:

Flowing Artesian? ☒ Y ☐ N Artesian Pressure (PSIG) 2 psi

Describe control device Sanitary Seal

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 90ft Static water level (ft) _____

Water temp. (°F) 57DegF Bottom hole temp. (°F) _____

Describe access port pipe fitting on cap

Well test: **Test method:**

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
125ft	40GPM	60	☐	☐	☒	☐
	5		☐	☐	☐	☒

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water Y	Water N
10"	0	2	Top soil		X
"	2	10	Basalt boulders		X
"	10	26	Basalt		X
"	26	46	Blue clay		X
6"	46	90	Blue clay		X
"	90	100	Coarse cemented sand	X	
"	100	125	Blue clay		X

RECEIVED
JUL 16 2010
WATER RESOURCES
WESTERN REGION

Completed Depth (Measurable): 125ft

Date Started: Jul 8, 2010 Date Completed: Jul 9, 2010

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 Coonse Well Drilling Co. No. 409

*Principal Driller [signature] Date Jul 12, 2010

*Driller _____ Date _____

*Operator II [signature] Date Jul 12, 2010

Operator I _____ Date _____

*** Signature of Principal Driller and rig operator are required.**