By: mciscell 2013-10-22 Form 238-7 IDAHO DEPARTMENT OF WATER RESOURCES 8/02 WELL DRILLER'S REPORT inspected by \_\_\_\_ Age Sec WELL TAG NO. D 1/4 1/4 1/4 DRILLING PERMIT NO. 12. WELL TESTS: Water Right or Injection Well No. Long: Latt Pomo **X**Baller - Flowing Artesian OWNER: You gallering Drawdown Purgang Lavai Name State 11/1/20 99757. 2040 Water Temp. 3. LOCATION OF WELL by legal description: Bottom hole temp. Water Quality test or comments: (4000) You must provide address or Lot, Blk, Sub, or Directions to well. Twp. North X or Depth first Water Encounter 35 P06..... 13. LITHOLOGIC LOG: (Describe repairs or abandonment) East West 📉 Water From Remarks: Lithology, Water Quality & Temperature Gov1 Lot Long: CLAY /SALO TANGLEWOOD IR SAND/CLAY/GRAVEL ON PRIEST RIVER Communication Communication (Communication) LL\_\_\_\_\_Blk\_\_\_\_\_Sub. Name 45 SAND (FINE) MEANING 4. USE: **X** Domestic Municipal Monitor Irrigation Thermal Direction ... Other 5. TYPE OF WORK check all that apply (Replacement etc.) X New Well Modify \_\_ Abandonment Other 6. DAILL METHOD: \_\_Ar Folary XCable ☐ Mud Rotary Other 7. SEALING PROCEDURES Sect Material A CONTRACTOR OF THE PARTY OF TH Seal Placement Menor BENTONITE Was drive shoc used? N Shoe Depth(s) 20 B/BASING BNER: Diameter From Gauge Casing Material Liner Welded Threaded 250 STEEL 6// X 000000 DMRAtonthLength of Headpipe Length of Tailpipe **>** K-PACKER Type 9. PERFORATIONS/SCREENS PACKER TYPE Perforation Method Screen Type & Method of Installation SラフE4E公内を W/7426 2216 Norther Claimeter Slot Size Casino Material Liner 35 Completed Depth 304 (Measurable) 40 AZA 51157EEL Date: Started 6-/2-06 6-14-06 Completed 14. DRILLER'S CERTIFICATION 10. FILTER PACK I/Ve certify that all minimum well construction standards were complied with at the Pilot Material From time the rig was removed. Weight Volume Placement Method Company Name 14461/ES 1047/E/C 10/E45 Firm No. 604 11. STATIC WATER LEVEL OR ARTESIAN PRESSURE: \_\_ft. below ground Artesian pressure Depth flow encountered Oriller or Operator II tt. Describe Coess port or control devices: WELL CAP Operator I Principal Driller and Rig Operator Required Operator I must have signature of Drillor/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

**Location Corrected by IDWR To:** 

T58N R03E Sec. 16 NWNWSW