

State of Idaho Department of Water Resources
GENERAL INSTRUCTIONS TO COMPLETE FORM 238(4)-2
AUTHORIZATION TO ABANDON (DECOMMISSION) A WELL

- A. Authorization forms(s) must be complete. Incomplete form(s) will be returned to applicant.
- B. Information provided on form(s) must be accurate. Incorrect information may invalidate authorization.
- C. Abandonment must be performed by a well driller licensed in the State of Idaho per Idaho Code 42-238 unless a waiver has been granted.
- D. The well must be abandoned in a manner compliant with IDAPA 37.03.09 Well Construction Standards Rules.
- E. There is no fee for an Authorization to Abandon a Well.
- F. Form(s) shall be submitted to the IDWR region in which the abandonment is to occur at least seventy-two (72) hours prior to abandonment. Authorization for abandonment must be granted before abandonment work commences. Signed Original forms must be submitted to the IDWR region in which the abandonment takes place.

Western Region

Idaho Department of Water Resources
2735 Airport Way
Boise, ID 83705-5082
Phone: (208) 334-2190

Northern Region

Idaho Department of Water Resources
7600 North Mineral Drive, STE 100
Coeur d'Alene, ID 83815
Phone: (208) 762-2800

Eastern Region

Idaho Department of Water Resources
900 North Skyline Drive STE A
Idaho Falls, ID 83402-1718
Phone: (208) 525-7161

Southern Region

Idaho Department of Water Resources
650 Addison Ave W, Ste 500
Twin Falls, ID 83301-5858
Phone: (208) 736-3033

**State of Idaho Department of Water Resources
AUTHORIZATION TO ABANDON (DECOMMISSION) A WELL**

1. **WELL OWNER INFORMATION:** (The well owner is the person who legally owns the property.)

Name: _____
Current Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: (_____) _____

2. **WELL LOCATION:** (GPS required in Degrees Decimal Minutes.)

Twp. _____, Rge. _____, Sec. _____, _____ 1/4 _____ 1/4 _____ 1/4
(10) (40) (160)
Gov't Lot No. _____ County _____ Lat. _____ Long. _____
Street Address of Well Location: _____
City: _____ Lot, block and subdivision: _____

3. **TYPE OF WELL:**

DOMESTIC MONITORING IRRIGATION OTHER _____ (Describe)

4. **WELL INFORMATION:** (*Casing size, well depth & static water level data are required.)

Well Tag Number: _____ Previous Drilling Permit Number: _____
Water Right Number: _____ - _____
Well Log on File? (Provide if available) Yes No Temperature: less than 85°F greater than 85°F
*Casing Size: _____ *Material: _____ *Well Depth _____ (measured)
*Current Static Water Level: _____ (measured) Flowing Artesian? Yes No

5. **REASON FOR ABANDONMENT OF WELL:**

6. **PROPOSED METHOD OF ABANDONMENT:** (Must be consistent with IDAPA 37.03.09. This Application must be reviewed prior to commencement of abandonment.)

7. **Drilling company name:** _____ **company lic. No.** _____

8. **Date of abandonment:** _____

9. **Applicants signature:** _____

10. **Title:** _____ **date:** _____

ACTION OF THE DEPARTMENT OF WATER RESOURCES

This application for abandonment has been reviewed by IDWR on _____/_____/_____

This review does not constitute an endorsement by IDWR of the proper abandonment of this well. Pursuant to Section 42-238(12), Idaho Code, all abandonments must meet the requirements of the Administrative Rules for Well Construction Standards. **Abandonment of this well will require the services of a well driller licensed in the State of Idaho unless a waiver has been granted.**

Signature of Authorized Department Representative

Title

