

APPLICATION FOR IDAHO WELL DRILLING COMPANY LICENSE: INSTRUCTIONS

You may not drill in Idaho until all requirements have been met and you have received your license card and certificate from IDWR. To be considered for an Idaho Well Drilling Company License, applicants are required to submit:

1) APPLICATION

Application Form for a Well Drilling Company License (Form 238-1): An Application for Well Drilling Company's License (Form 238-1, attached) must be completed and submitted to the appropriate IDWR Regional Office (see information below).

In the application, you must identify all Drillers and Operators who will operate well drilling equipment in Idaho under this company license. You must designate a Principal Driller for the company. The Principal Driller is an Idaho licensed driller in responsible charge of the company's drilling activities. Drillers and Operators included in the Company Application who are not currently licensed in Idaho are required to submit the appropriate application and fee. Applicants for a Driller's license or Operator permit are subject to examination requirements (see below). This application must be received at least 20 days prior to scheduling drillers and operators for the exam.

2) BONDING

A company must have a bond in an amount determined by the Director within the limits of 42-238, Idaho Code, covering each driller licensed by the company. An applicant who intends to drill wells as an individual and not for a company must secure an individual bond.

- **Surety Bond (Form 238-4):** A Surety Bond is obtained through the applicant's insurance agent. Form 238-4 is completed by the agent then signed by the agent and the Principal Driller. Bonds without both signatures will be returned to the applicant. All bonds and continuation certificates must be on forms provided or approved by IDWR. *Surety bonds must be valid for the entire licensing period, with an expiration date no earlier than March 31 two years in the future (for example, a license application date of October 1, 2020, would require a bond valid through March 31, 2022).*

or

- **Cash Bond Pledge (Form 238-5A):** A Cash Bond Pledge must be through an acceptable banking entity located in Idaho. A document of verification must be provided to IDWR.

3) EXAM (if applicable)

Any driller license or operator applicants not currently licensed in Idaho and to be employed by the company must complete and pass a licensing exam. To sit for the exam, applicants must complete the following:

- **Submit Driller/Operator Application:** Twenty (20) days before the exam date, the applicant must submit the appropriate driller/operator application and all required documents (experience record, references, and application fee) to the IDWR Regional Office where the exam will be taken (see information below).
- **Schedule the Exam:** Contact an IDWR Regional Offices listed below to schedule a licensing exam.
- **Pass the Exam:** An applicant must pass the licensing exam with a score of at least 70%.

IDWR REGIONAL OFFICES			
Western Region 2735 Airport Way Boise ID 83705-5082 Phone: 208-334-2190	Eastern Region 900 N. Skyline Drive, Ste A Idaho Falls ID 83402-1718 Phone: 208-525-7161	Northern Region 7600 N. Mineral Dr. Coeur d'Alene ID 83815 Phone: 208-762-2800	Southern Region 650 Addison Ave W, Ste 500 Twin Falls, ID 83301-5858 Phone: 208-736-3033



APPLICATION FOR IDAHO WELL DRILLING COMPANY LICENSE

Submit complete applications to the nearest IDWR Regional Office (see *Instructions* for locations). If driller license or operator applicants are sitting for an exam, submit this complete application to the same office where the exam is scheduled.

PART I: COMPANY

CONTACT INFORMATION

Name of Drilling Company		Principal Driller Name		
Company Mailing Address		City	ST	Zip
Company Physical Address (if different from mailing address)		City	ST	Zip
Company Contact Phone #	Phone type (select one): <input type="checkbox"/> PD mobile <input type="checkbox"/> office	Company Email Address		
Company Fax #	Company Website			

COMPANY OWNER (if different from Principal Driller)

Last Name		First Name		MI
Mailing Address		City	ST	Zip
Phone #	Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> office	Email Address		

LICENSES OR PERMITS IN OTHER STATES

List licenses or permits the drilling company was issued by other states relative to well drilling:

State	License Number	Period Licensed or Permitted

VIOLATIONS AND COMPLIANCE

List all violations and compliance-related warnings issued within the last five years to the company, the owners, and the employees of the company listed in this application. Attach an extra page, if necessary.

PART II: DRILLERS AND OPERATORS

List the Drillers and Operators employed by the drilling company and covered under the Well Driller's Bond. Drillers and Operators included in the company application who are *not currently licensed* in Idaho are required to submit the appropriate application (listed below) and fee:

- Application for a Driller's License (DL) – Form 238-9
- Application for an Operators Permit (OP) – Form 238-3A

PRINCIPAL DRILLER (must obtain or currently hold an Idaho Driller's License)					
Last Name		First Name		MI	IDWR License Card No.
Mailing Address		City	ST	Zip	
Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> office		Email Address	
DRILLERS AND OPERATORS					
License Type	Last Name	First Name		MI	IDWR License Card No.
DL	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
OP	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
License Type	Last Name	First Name		MI	IDWR License Card No.
DL	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
OP	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
License Type	Last Name	First Name		MI	IDWR License Card No.
DL	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
OP	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
License Type	Last Name	First Name		MI	IDWR License Card No.
DL	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
OP	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
License Type	Last Name	First Name		MI	IDWR License Card No.
DL	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
OP	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
License Type	Last Name	First Name		MI	IDWR License Card No.
DL	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	
OP	Phone #		Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work	Email Address	

CERTIFICATION (to be completed by Principal Driller applicant)

I certify that I have read, understand, and will comply with all Idaho Statutes and Department Rules, including Start Card Procedures. I certify that all of the statements made in this application are true and correct to the best of my knowledge. I acknowledge and understand that a false or dishonest answer to any question in this application may be grounds for revocation or refusal to approve the Well Drilling Company's license and that all statements made are subject to investigation.

X

Principal Driller's Signature (as it will appear on driller reports)

Date

Principal Driller Name (please print clearly)

FOR IDWR OFFICE USE ONLY

Receipt No. _____ Fee \$ _____ Date Rec'd _____ Rec'd by _____