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JUN 15 1964

WELL LOG AND REPORT OF THE
STATE RECLAMATION ENGINEER OF IDAHO

Department of Reclamation

034525

Permit No. _____ Well No. _____ County Blaine

Owner R.F. Kelly

Address Gannett

Driller _____

Address _____

Well location 1/4 SE 1/4 Sec. 15, T. 1 N, R. 18 E/W

Size of drilled hole 6 in

Total depth of well 72

Locate well in section

NW 1/4	NE 1/4
SW 1/4	SE 1/4

Give depth to standing water from the ground _____ Water temp. 46 °Fahr.

On "Pumping Test" delivery was _____ g.p.m. or _____ c.f.s. Drawdown was _____ feet.

Size of pump and motor used to make test _____

Length of time of test _____ hours _____ minutes.

If flowing well, give flow unknown c.f.s. or _____ g.p.m. and of shut off pressure unknown

If flowing well, described control works Gate Valve
(TYPE AND SIZE OF VALVE, ETC.)

Water will be used for Domestic Weight of casing per lineal foot 19 lb.

Thickness of casing 28" Casing material Steel
(STEEL, CONCRETE, WOOD, ETC.)

Diameter, length and location of casing 6 in 0 to 70 ft
(CASING 12" IN DIAMETER OR LESS, GIVE INSIDE DIAMETER;
CASING OVER 12" IN DIAMETER, GIVE OUTSIDE DIAMETER)

CASING RECORD

Diam. Casing	From Feet	To Feet	Length	Remarks—seals, grouting, etc.
6	0	70	70	

Number and size of perforations None located _____ feet to _____ feet from ground

Date of commencement of well 12-27-63 Date of completion of well 1-9-64

SE 5.15 / 5 18E

used

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**WELL LOG AND REPORT OF THE
STATE RECLAMATION ENGINEER OF IDAHO**

034522

Permit No. 26994 Well No. Old Well County Blaine

Owner James Chaney

Address Ketchum

Driller EUGENE W. WALKER

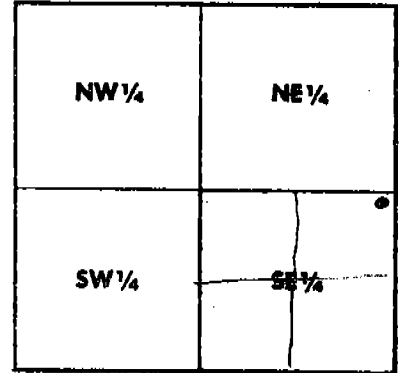
Address 624 Pierce St.
Twin Falls, Idaho

Well location NE 1/4 SE 1/4 Sec 15, T 15 N 18 E 1/4

Size of drilled hole 8 in

Total depth of well 128

Locate well in section



Give depth to standing water from the ground _____ Water temp. 46 °Fahr.

On "Pumping Test" delivery was _____ g.p.m. or _____ c.f.s. Drawdown was _____ feet.

Size of pump and motor used to make test _____

Length of time of test _____ hours _____ minutes.

If flowing well, give flow 150 c.f.s. or 150 g.p.m. and of shut off pressure _____

If flowing well, described control works 6 in Gate Valve
(TYPE AND SIZE OF VALVE, ETC.)

Water will be used for _____ Weight of casing per lineal foot 23

Thickness of casing 250 Casing material Steel
(STEEL, CONCRETE, WOOD, ETC.)

Diameter, length and location of casing 8 in - 99 to 118 New Hole
(CASING 12" IN DIAMETER OR LESS, GIVE INSIDE DIAMETER;
CASING OVER 12" IN DIAMETER, GIVE OUTSIDE DIAMETER)

CASING RECORD

Diam. Casing	From Feet	To Feet	Length	Remarks—seals, grouting, etc.
8	0	118	118	

Number and size of perforations None located _____ feet to _____ feet from ground

Date of commencement of well 26 July Date of completion of well 9 Aug 65

NESE S.15 1S 18E designed

WELL LOG

From Feet	To Feet	Type of Material	Water-bearing Formation Ans. Yes or No	Casing Perforated Ans. Yes or No
0	102	Old Well		No
102	105	Clay + sand	no	No
105	118	Layers of Gravel, sand & Clay, Flowed some Water from each layer of gravel - Would not flow the Original Amount		No
		Well Flowed sand + Lumps of Clay for 1 1/2 days then quit flowing.		
		These Formations appeared to Have Broken down away from lower end of casing.		
118	128	Sand + Clay	yes	No
If more space is required use Sheet No. 2				

WELL DRILLER'S STATEMENT

This well was drilled under my supervision and the above information is complete, true and correct to the best of my knowledge and belief.

Signed Eugene Walker
By _____

Dated 20 Aug, 1965

License No. _____

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WELL LOG AND REPORT OF THE
STATE RECLAMATION ENGINEER OF IDAHO

Department of Reclamation

Permit No. 231541 Well No. _____ County Bernie 034524

Owner Chaney Ranch - James Chaney
Address Ketchum Idaho

Locate well in section

NW 1/4	NE 1/4
SW 1/4	SE 1/4

Driller EUGENE W. WALKER
624 Pierce St.
Twin Falls, Idaho

Well location NE 1/4 SE 1/4 Sec. 15, T. 1 N. 18 E. R. 18 E. 1/4

Size of drilled hole 8 in Replacement
Well Total depth of well 96

Give depth to standing water from the ground _____ Water temp. 46 °Fahr.

On "Pumping Test" delivery was _____ g.p.m. or _____ c.f.s. Drawdown was _____ feet.

Size of pump and motor used to make test _____

Length of time of test _____ hours _____ minutes.

If flowing well, give flow 720 c.f.s. or _____ g.p.m. and of shut off pressure _____

If flowing well, described control works Gate Valve - 8 in
(TYPE AND SIZE OF VALVE, ETC.)

Water will be used for Irrigation Weight of casing per lineal foot 23

Thickness of casing 250 Casing material Steel
(STEEL, CONCRETE, WOOD, ETC.)

Diameter, length and location of casing 8 in 96 ft - Complete
(CASING 12" IN DIAMETER OR LESS, GIVE INSIDE DIAMETER;
CASING OVER 12" IN DIAMETER, GIVE OUTSIDE DIAMETER)

CASING RECORD

Diam. Casing	From Feet	To Feet	Length	Remarks—seals, grouting, etc.
8	0	96	96	Stopped in Clay

Number and size of perforations None located _____ feet to _____ feet from ground

Date of commencement of well 10 Aug 65 Date of completion of well 18 Aug 65

NESE S. 15 15 18E

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DEC 24 1968

REPORT OF WELL DRILLER
State of Idaho

Department of Reclamation

State law requires that this report shall be filed with the State Reclamation Engineer within 30 days after completion or abandonment of the well.

WELL OWNER:
Name F. Haddy Street
Address Garnett Idaho

Owner's Permit No. _____
NATURE OF WORK (check): Replacement well
New well Deepened Abandoned

Water is to be used for: domestic

METHOD OF CONSTRUCTION: Rotary Cable
Dug Other _____ (explain)

CASING SCHEDULE: Threaded _____ Welded _____
8" Diam. from 0 ft. to 115 ft.
"Diam. from _____ ft. to _____ ft.
"Diam. from _____ ft. to _____ ft.
"Diam. from _____ ft. to _____ ft.

Thickness of casing: 1/2" Material: _____
Steel concrete wood other

(explain)
PERFORATED? Yes No Type of perforator used: Miller Knife

Size of perforations: _____ " by _____ "
40 perforations from 97 ft. to 110 ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.
perforations from _____ ft. to _____ ft.

WAS SCREEN INSTALLED? Yes No
Manufacturer's name _____

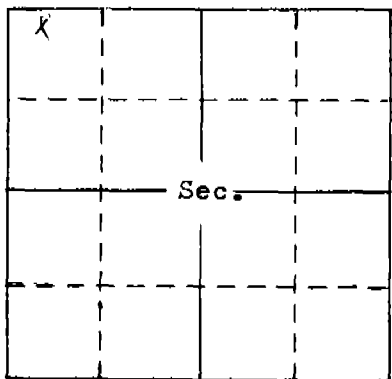
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

CONSTRUCTION: Well gravel packed? Yes
No size of gravel _____ Gravel placed from _____ ft. to _____ ft. Surface seal provided? Yes No To what depth? _____ ft. Material used in seal: _____

Did any strata contain unusable water? Yes
No Type of water: _____
Depth of strata _____ ft. Method of sealing strata off: _____

Surface casing used? Yes No
Cemented in place? Yes No

Locate well in section



LOCATION OF WELL: County Blaine
NW 1/4 NW 1/4 Sec. 11 T. 1 N. R. 18 E.

Size of drilled hole: 8 Total depth of well: 132 Standing water level below ground: Flow Temp. Fahr. 50 ° Test delivery: 50 gpm or _____ cfs Pump? Bail
Size of pump and motor used to make test: _____

Length of time of test: _____ Hrs. _____ Min.
Drawdown: _____ ft. Artesian pressure: _____ ft. above land surface Give flow _____ cfs or 50 gpm. Shutoff pressure: 74
Controlled by: Valve Cap Plug
No control Does well leak around casing? Yes No

DEPTH MATERIAL WATER 39516 YES OR NO

FROM FEET	TO FEET	MATERIAL	WATER YES OR NO
0	4	Surface	
4	10	Gravel Sand	10 ft
10	26	Gravel - sand & clay	4 in
26	40	Light tan clay	
40	60	Sandy clay	
60	95	Sand with some clay layers	4 in
95	96 1/2	Brown clay	
96 1/2	107	Clay & decomposed granite	4 in
107	115	Sand & clay	7 in
115	132	11	7 in

Work started: 9 Oct 1968
Work finished: 14 Nov 1968
Well Driller's Statement: This well was drilled under my supervision and this report is true to the best of my knowledge.
Name: Ernie K Walker
Address: 1624 Pine St
Signed by: Tom Falls Idaho
License No. 15 Date: 13 Dec 1968

Use other side for additional remarks

USGS

USE TYPEWRITER OR BALL POINT PEN

State of Idaho Department of Water Administration

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WELL DRILLER'S REPORT

State law requires that this report be filed with the State Reclamation Engineer within 30 days after completion or abandonment of the well.

Department of Water Administration

card in

1. WELL OWNER

Name J. E. Fredrickson

Address Bellevue Ida

Owner's Permit No. _____

7. WATER LEVEL

Static water level 0 feet below land surface

Flowing? Yes No G.P.M. flow 1600

Temperature _____ ° F. Quality Clear

Artesian closed-in pressure 14 p.s.i.

Controlled by Valve Cap Plug

2. NATURE OF WORK

New well Deepened Replacement

Abandoned (describe method of abandoning)

8. WELL TEST DATA

Pump Bailer Other

Discharge G.P.M.	Draw Down	Hours Pumped

3. PROPOSED USE

Domestic Irrigation Test

Municipal Industrial Stock

9. LITHOLOGIC LOG 39708

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
9 3/8"	0	15	Topsoil + Small Gravel	X	
9 3/8"	15	18	fine sand	X	
6"	18	45	"	X	
6"	45	125	Sandy Blue Clay		X
6"	125	130	Blue Clay		X
6"	130	135	Sandy Blue Clay		X
6"	135	140	Barren Gravel & Sand	X	
Drive Shoe set in Blue Clay					

4. METHOD DRILLED

Cable Rotary Dug Other

5. WELL CONSTRUCTION

Diameter of hole 6 inches Total depth 140 feet

Casing schedule: Steel Concrete

Thickness	Diameter	From	To
<u>281</u> inches	<u>6</u> inches	<u>+1</u> feet	<u>126</u> feet

Was a packer or seal used? Yes No

Perforated? Yes No

How perforated? Factory Knife Torch

Size of perforation _____ inches by _____ inches

Number	From	To

Well screen installed? Yes No

Manufacturer's name _____

Type _____ Model No. _____

Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? Yes No Size of gravel _____

Placed from _____ feet to _____ feet

Surface seal? Yes No To what depth 18 feet

Material used in seal Cement grout Puddling clay

6. LOCATION OF WELL

Sketch map location must agree with written location.

County Blaine

SW 1/4 SW 1/4 Sec. 13, T. 1 N/S, R. 18 E/DX

10. Work started 3-9-71 finished 3-13-71

11. DRILLER'S CERTIFICATION

This well was drilled under my supervision and this report is true to the best of my knowledge.

Rossiter Well Drilling 19
Driller's or Firm's Name Number

303 1/2 Rail Shoshone
Address

Norman A. Johnson 4-18-71
Signed By Date

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

AD

1. WELL TAG NO. D 0060729

Drilling Permit No. 863174
 Water right or injection well # 37-22685

2. OWNER: Harry Hagey

Name _____
 Address P.O. Box 3742
 City Hailey State Id Zip 83333

3. WELL LOCATION:

Twp. 1 North or South Rge. 18 East or West
 Sec. 15 _____ 1/4 NE _____ 1/4 NE _____ 1/4

Gov't Lot _____ County _____
 Lat. 43 ° 20.559 (Deg. and Decimal minutes)
 Long. 114 ° 17.848 (Deg. and Decimal minutes)
 Address of Well Site 100 Heart Rock Road (10302 Hwy 75)

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

Lot _____ Blk. _____ Sub. Name _____

4. USE:

Domestic Municipal Monitor Irrigation Thermal Injection
 Other Heating & Cooling / Fire Protection

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 ft ³)	Placement method/procedure
Bentonite Grout	42ft	10ft	400lbs	Pumped Tremie Pipe
Bentonite Chips	10ft	0ft	1000lbs	Dry Pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6"	110ft	+6ft	250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was drive shoe used? Y N Shoe Depth(s) 110ft

9. PERFORATIONS/SCREENS:

Perforations Y N Method _____

Manufactured screen Y N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule

Length of Headpipe _____ Length of Tailpipe _____

Packer Y N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method

11. FLOWING ARTESIAN:

Flowing Artesian? Y N Artesian Pressure (PSIG) 8 psi
 Describe control device Flanged Plate with Valves

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 10ft Static water level (ft) Flowing
 Water temp. (°F) cold Bottom hole temp. (°F) cold

Describe access port Ball Valves

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
<u>0</u>	<u>254</u>	<u>3 days</u>

Test method:

Pump	Bailer	Air	Flowing artesian
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Water quality test or comments: Good

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	N
10	0	6	Fill Dirt		X
10	6	15	Gravel & Clay		X
10	15	23	Gravel & Sand	X	
10	23	27	Sand		X
10	27	42	Sticky Blue Clay		X
6	42	46	Sticky Blue Clay		X
6	46	50	Sand		X
6	50	52	Blue Clay		X
6	52	77	Granite Sand	X	
6	77	78	Blue Clay		X
6	78	93	Granite Sand		X
6	93	96	Decomposed Granite	X	
6	96	100	Decomposed Granite		X
6	100	107	Decomposed Granite	X	
6	107	108	Brown Clay		X
6	108	110	Cemented Slate & Shale & Gravel	X	

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MAY 10 2012
DEPT. OF WATER RESOURCES
SOUTHERN REGION

5/11/12

Completed Depth (Measurable): 110ft
 Date Started: 4/18/2012 Date Completed: 5/01/2012

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 Dirt Works Co. No. 652

*Principal Driller [Signature] Date 5/02/2012

*Driller _____ Date _____

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.