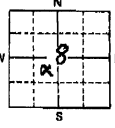


*DWD*

# WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

<p><b>1. WELL OWNER</b>  Name <u>Mike Tupper</u>  Address <u>Rt 1 Box 54A, Salmon</u>  Drilling Permit No. <u>74-93E-007-000</u>  Water Right Permit No. _____</p>	<p><b>7. WATER LEVEL</b>  Static water level <u>43</u> feet below land surface.  Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____  Artesian closed-in pressure _____ p.s.i.  Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug  Temperature <u>57</u> °F. Quality <u>Good</u>  <small>Describe artesian or temperature zones below.</small></p>																																																																																																																																		
<p><b>2. NATURE OF WORK</b>  <input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement  <input type="checkbox"/> Well diameter increase <input type="checkbox"/> Modification  <input type="checkbox"/> Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 9.)</p>	<p><b>8. WELL TEST DATA</b>  <input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><u>12</u></td> <td style="text-align: center;"><u>164</u></td> <td style="text-align: center;"><u>3</u></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>12</u>	<u>164</u>	<u>3</u>																																																																																																																												
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<p><b>3. PROPOSED USE</b>  <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Monitor  <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection  <input type="checkbox"/> Other _____ (specify type)</p>	<p><b>9. LITHOLOGIC LOG</b> <span style="float: right;">107386</span></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>6</td><td>0</td><td>3</td><td>Top Soil</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>3</td><td>18</td><td>BOULDERS RIG</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>18</td><td>20</td><td>HARD BOULDERS</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>20</td><td>35</td><td>BOULDERS HARD</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>35</td><td>50</td><td>CLAY BOULDERS</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>40</td><td>45</td><td>BOULDERS HARD</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>45</td><td>48</td><td>BOULDERS GRAVEL</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td></td><td>48</td><td>60</td><td>BROWN ROCK COMMERCE</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>60</td><td>88</td><td>Brown GRANITE</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>88</td><td>90</td><td>DARK BROWN Rock</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>90</td><td>98</td><td>BROWN Rock</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>98</td><td>100</td><td>GREY SANDSTONE</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td></td><td>100</td><td>110</td><td>BROWN</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>110</td><td>122</td><td>GREY SANDSTONE</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>122</td><td>125</td><td>GRAVELLY SANDSTONE</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>125</td><td>130</td><td>GREY LI</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>130</td><td>142</td><td>BROWN SANDSTONE</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td></td><td>142</td><td>160</td><td>BROWN</td><td></td><td><input checked="" type="checkbox"/></td></tr> <tr><td></td><td>160</td><td>162</td><td>HARD DARK BROWN</td><td><input checked="" type="checkbox"/></td><td></td></tr> <tr><td></td><td>162</td><td>165</td><td>BROWN SANDSTONE</td><td><input checked="" type="checkbox"/></td><td></td></tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	6	0	3	Top Soil		<input checked="" type="checkbox"/>		3	18	BOULDERS RIG		<input checked="" type="checkbox"/>		18	20	HARD BOULDERS		<input checked="" type="checkbox"/>		20	35	BOULDERS HARD		<input checked="" type="checkbox"/>		35	50	CLAY BOULDERS		<input checked="" type="checkbox"/>		40	45	BOULDERS HARD		<input checked="" type="checkbox"/>		45	48	BOULDERS GRAVEL	<input checked="" type="checkbox"/>			48	60	BROWN ROCK COMMERCE		<input checked="" type="checkbox"/>		60	88	Brown GRANITE		<input checked="" type="checkbox"/>		88	90	DARK BROWN Rock		<input checked="" type="checkbox"/>		90	98	BROWN Rock		<input checked="" type="checkbox"/>		98	100	GREY SANDSTONE	<input checked="" type="checkbox"/>			100	110	BROWN		<input checked="" type="checkbox"/>		110	122	GREY SANDSTONE		<input checked="" type="checkbox"/>		122	125	GRAVELLY SANDSTONE		<input checked="" type="checkbox"/>		125	130	GREY LI		<input checked="" type="checkbox"/>		130	142	BROWN SANDSTONE	<input checked="" type="checkbox"/>			142	160	BROWN		<input checked="" type="checkbox"/>		160	162	HARD DARK BROWN	<input checked="" type="checkbox"/>			162	165	BROWN SANDSTONE	<input checked="" type="checkbox"/>	
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<p><b>4. METHOD DRILLED</b>  <input checked="" type="checkbox"/> Rotary <input checked="" type="checkbox"/> Air <input type="checkbox"/> Auger <input type="checkbox"/> Reverse rotary  <input type="checkbox"/> Cable <input type="checkbox"/> Mud <input type="checkbox"/> Other _____  <small>(backhoe, hydraulic, etc.)</small></p>	<p><b>10.</b>  Work started <u>4/16/93</u> finished <u>4/20/93</u></p>																																																																																																																																		
<p><b>5. WELL CONSTRUCTION</b>  Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____  Thickness <u>2.50</u> inches Diameter <u>4 1/2</u> inches From <u>45</u> feet To <u>60</u> feet  <u>PVC</u> inches <u>4 1/2</u> inches <u>45</u> feet <u>164</u> feet  _____ inches _____ inches _____ feet _____ feet  Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Was a packer or seal used? <input type="checkbox"/> Yes <input type="checkbox"/> No  Perforated? <u>PVC</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input checked="" type="checkbox"/> SAW  Size of perforation? <u>1/8</u> inches by <u>4</u> inches  <u>400</u> Number From <u>45</u> feet To <u>164</u> feet  _____ perforations _____ feet _____ feet  _____ perforations _____ feet _____ feet  _____ perforations _____ feet _____ feet  Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Manufacturer _____ Type _____  Top Packer or Headpipe _____  Bottom of Tailpipe _____  Diameter _____ Slot size _____ Set from _____ feet to _____ feet  Diameter _____ Slot size _____ Set from _____ feet to _____ feet  Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____  Placed from _____ feet to _____ feet  Surface seal depth <u>20</u> Material used in seal: <input type="checkbox"/> Cement grout  <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Puddling clay <input type="checkbox"/> _____  Sealing procedure used: <input type="checkbox"/> Slurry pit  <input type="checkbox"/> Temp. surface casing <input checked="" type="checkbox"/> Overbore to seal depth  Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded  <input type="checkbox"/> Solvent Weld <input type="checkbox"/> Cemented between strata  Describe access port <u>Sanitary well seal</u></p>	<p><b>11. DRILLER'S CERTIFICATION</b>  I/We certify that all minimum well construction standards were complied with at the time the rig was removed.  HARBER DRILLING COMPANY  Firm Name _____ Post Office Box 194 Firm No. <u>430</u>  Carmen Creek Road  Address CARMEN, IDAHO 83402-0194 Date <u>4/20/93</u>  Signed by Drilling Supervisor <u>[Signature]</u>  and _____  (Operator) _____  <small>(If different than the Drilling Supervisor)</small></p>																																																																																																																																		
<p><b>6. LOCATION OF WELL</b>  Sketch map location must agree with written location.    Subdivision Name <u>Antelope Hills</u>  Lot No. <u>1</u> Block No. _____  County <u>Lemhi</u>  Address of Well Site <u>Carmen Creek</u>  <small>(give at least name of road)</small>  <u>NE</u> 1/4 <u>SW</u> 1/4 Sec. <u>8</u> T. <u>22</u> N <input type="checkbox"/> or S <input type="checkbox"/>  R. <u>22</u> E <input type="checkbox"/> or W <input type="checkbox"/></p>	<p><b>RECEIVED</b>  APR 29 1993  Department of Water Resources  Eastern District Office</p> <p><b>FEB 09 1994</b></p>																																																																																																																																		