

PLEASE COMPLETE
ENTIRE FORM

WELL DRILLERS REPORT
Division of Water Rights
Department of Water & Natural Resources

6/60

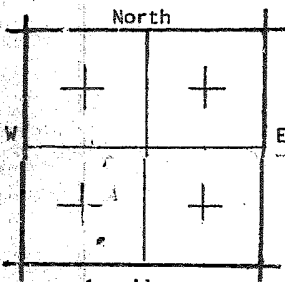
Well Owner:

Name Brian W. Schmidt

Address RR1 Box 23 Marion, I.D.
57043

Well Location:

Mark location
with an "X"



County Turner
SW 1/4 SE 1/4 SW 1/4 Sec. 12 Twp. 100 Rg. 55

Proposed Use:

☒ Domestic ☐ Municipal ☐ Test
Holes
☐ Irrigation ☐ Industrial ☐ Stock

Method of Drilling:

☒ Forward Rotary ☐ Bored ☐ Jetted
☐ Reverse Rotary ☐ Cable ☐ Other

Well Construction:

Diameter of Hole 5 in

Depth

Casing ☐ Steel ☐ Concrete

☒ Plastic ☐ Other

If other, specify _____

Was casing end left open

No

Was a well screen installed

Describe Well Screen

Diameter 5 in Material plastic

Slot size

Was well gravel packed

yes

Was well grouted

yes

Was water sample taken

yes

Remarks:

received
5-8-81

Water Level Information:

Static water level 99 ft below land surface

If flowing: closed in pressure _____ PSI
rate of flow _____ GPM

Controlled by:

☐ Valve ☐ Reducers ☐ Other

If other, specify _____

Well Test Data:

☐ Pumped

☐ Bailed

Describe: _____

☐ Other

Pumping Level Below Land Surface

_____ ft. After _____ Hrs. pumped _____ GPM
" " " " " "
" " " " " "

Well Log:

Formation	Depth	
	From	To
<u>2' top soil</u>	<u>0</u>	<u>2' feet</u>
<u>yellow clay</u>	<u>2</u>	<u>36' feet</u>
<u>blue clay</u>	<u>36</u>	<u>290' feet</u>
<u>Chalk Rock</u>	<u>290</u>	<u>310</u>
<u>sandstone</u>	<u>310</u>	<u>340</u>

(Use Back if Necessary)

Date Completed:

4/16/1981

Driller:

Schmidt

372

Driller's or Firm's Name

License NO.

Lenora S. Doh

Address

1401 Schmidt 4/16/81

Signature By

Date