Form 238-4
11/2010

THIS BLOCK FOR DEPARTMENT USE ONLY
Well Drilling Company Lic. No.: _____

State of Idaho
Department of Water Resources
WELL DRILLER'S SURETY BOND

BOND NO. _____

Name of Surety: _____ Phone No. _____

Address of Surety - Street or PO Box_____

City _____ State _____ Zip Code_____

KNOW ALL MEN BY THESE PRESENTS: That _____
Name of Drilling Company

_____ as principal, and
(Address of Drilling Company)

_____ as corporation, duly organized and doing
(Surety)

business under and by virtue of the laws of the State of _____ and authorized to do business in the State of Idaho, and duly licensed for the purpose of making, guaranteeing or becoming sole surety upon bonds or undertakings required or authorized by the laws of the State of Idaho, as surety, are held and firmly bound unto the people of the State of Idaho through the Director, Department of Water Resources, in the sum of _____ thousand dollars (_____) lawful money of the United States of America, for the payment whereof well and truly to be made, we bind ourselves, our heirs, executors, successors and assigns, jointly and severally firmly by these presents.

WHEREAS, under the terms of Section 42-238, Idaho Code, a surety bond is required of said principal and good sufficient surety, payable to the people of the State of Idaho through the Director, Department of Water Resources, and conditioned upon the faithful and honest compliance with Section 42-238 and Section 42-3913, Idaho Code, and with the rules and regulations promulgated by the Director, Department of Water Resources, pursuant thereto.

NOW, THEREFORE, if the above bound drilling company, during the period beginning _____ and ending _____ shall faithfully and honestly conduct business as Well Driller and complies with the provisions of said statutes and rules and regulations, then this obligation shall be null and void; otherwise to remain in full force and effect.

IN WITNESS WHEREOF WE HAVE SET OUR HANDS AND SEALS THIS _____(Date)

By _____
(Principal of Surety Corporation)

BY_____
(Its Attorney-in-Fact)

State of)
) ss
County of _____)

On _____, personally appeared before me the signer of the above instrument, who duly acknowledged to me that s/he executed the same.

_____
Notary Public

Residing at _____

My Commission Expires _____