

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTState 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.**RECEIVED**
OCT 20 1988

1. WELL OWNER

Name Angela Bissel
Address Harrison Idaho
Owner's Permit No. 94-88-N-15

7. WATER LEVEL

Department of Water Resources

Static water level _____ feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature 60 °F. Quality Good
Describe artesian or temperature zones below.2. NATURE OF WORK 94-88-N-18

- ☒
- New well
- ☐
- Deepened
- ☐
- Replacement
-
- ☐
- Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

☐ Pump ☐ Bailor ☒ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>7</u>	<u>105</u>	<u>1</u>
<u>15</u>	<u>120</u>	<u>1</u>

3. PROPOSED USE

- ☒
- Domestic
- ☐
- Irrigation
- ☐
- Test
- ☐
- Municipal
-
- ☐
- Industrial
- ☐
- Stock
- ☐
- Waste Disposal or Injection
-
- ☐
- Other _____ (specify type)

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water Yes No
	From	To		
<u>8</u>	<u>0</u>	<u>109</u>		
<u>6</u>	<u>109</u>	<u>125</u>		
	<u>0</u>	<u>30</u>	<u>Basalt & Clay streaks</u>	<u>X</u>
	<u>30</u>	<u>105</u>	<u>Brown Clay</u>	<u>X</u>
	<u>105</u>	<u>125</u>	<u>Solid Basalt</u>	<u>X</u>

4. METHOD DRILLED

- ☒
- Rotary
- ☒
- Air
- ☐
- Hydraulic
- ☐
- Reverse rotary
-
- ☐
- Cable
- ☐
- Dug
- ☐
- Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>109</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☒ Yes ☐ No
Perforated? ☒ Yes ☐ No
How perforated? ☐ Factory ☐ Knife ☒ Torch
Size of perforation 3 inches by 1/8 inches

Number	From	To
<u>10 ft.</u> perforations	<u>99</u> feet	<u>109</u> feet
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet

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 _____ feetGravel packed? ☐ Yes ☒ No ☐ Size of gravel _____
Placed from _____ feet to _____ feetSurface seal depth 90 Material used in seal: ☐ Cement grout
☒ Bentonite ☐ Pudding clay ☐ _____Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing
☐ Overbore to seal depth
Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent
Weld _____
☐ Cemented between strata

Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.

N
W E
X
S

Subdivision Name Govt Lot 3
Lot No. 2 Block No. _____

County Kootenai
NE 1/4 SW 1/4 Sec. 17 T. 47 N. R. 3 E

10.

Work started 10-3-88 finished 10-4-88

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name H20 Firm No. 449Address Hayden Idaho Date 10-6-88Signed by (Firm Official) John Whittenand
(Operator) Wayne Miller