

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCESUSE TYPEWRITER OR  
BALLPOINT PEN

## 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.

## 1. WELL OWNER

Name CARL BRAUGHTIGAN  
Address W 6755 EAST RIVERVIEW  
Drilling Permit No. 95-92-N-126  
Water Right Permit No. \_\_\_\_\_

## 7. WATER LEVEL

Static water level 195 feet below land surface.  
Flowing? ☐ Yes ☒ No G.P.M. flow \_\_\_\_\_  
Artesian closed-in pressure \_\_\_\_\_ p.s.i.  
Controlled by: ☐ Valve ☐ Cap ☐ Plug  
Temperature \_\_\_\_\_ of. Quality \_\_\_\_\_  
Describe artesian or temperature zones below.

## 2. NATURE OF WORK

- ☒
- New well
- ☐
- Deepened
- ☐
- Replacement
- 
- ☐
- Well diameter increase
- 
- ☐
- 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>5</u>         | <u>460</u>    | <u>1</u>     |
|                  |               |              |
|                  |               |              |

## 3. PROPOSED USE

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

## 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>2</u> feet  | <u>154</u> feet |
| <u>200psi</u> inches | <u>4" PVC</u> inches | <u>-7</u> feet | <u>463</u> feet |
|                      |                      |                |                 |
|                      |                      |                |                 |

Was casing drive shoe used? ☒ Yes ☐ NoWas a packer or seal used? ☐ Yes ☒ NoPerforated? ☒ Yes ☐ No SKILL SAWHow perforated? ☐ Factory ☐ Knife ☐ Torch ☐ GunSize of perforation 1/4 inches by 6 inches

| Number                  | From            | To              |
|-------------------------|-----------------|-----------------|
| <u>120</u> perforations | <u>423</u> feet | <u>463</u> 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 \_\_\_\_\_ feet

Gravel packed? ☐ Yes ☒ No ☐ Size of gravel \_\_\_\_\_

Placed from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface seal depth 100 Material used in seal: ☐ Cement grout☒ Bentonite ☐ Puddling clay ☐ \_\_\_\_\_Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing☐ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld \_\_\_\_\_

☐ Cemented between strata

Describe access port \_\_\_\_\_

## 9. LITHOLOGIC LOG

079716

| Bore<br>Diam. | Depth |     | Material                              | Water |    |
|---------------|-------|-----|---------------------------------------|-------|----|
|               | From  | To  |                                       | Yes   | No |
| 8             | 0     | 40  | CLAY, GREY, SOFT                      |       | X  |
| 8             | 40    | 70  | GRANITE, DECOMPOSED, CLAY             |       | X  |
| 8             | 70    | 100 | GRANITE, BROWN, WHITE, DECOMP         |       | X  |
| 6             | 100   | 115 | GRANITE, BROWN, WHITE, DECOMP         |       | X  |
| 6             | 115   | 140 | CLAY, GREEN, HARD                     |       | X  |
| 6             | 140   | 170 | GRANITE, BROWN, WHITE, DECOMP         |       | X  |
| 6             | 170   | 312 | GRANITE, BLACK, WHITE, MOD HARD       |       | X  |
| 6             | 312   | 374 | GRANITE, BLACK, WHITE, WITH FRACTURES |       | X  |
| 6             | 374   | 463 | GRANITE, GREEN, WHITE, SOFT           |       | X  |

RECEIVED

JUL 21 1992

NORTHERN REGION  
IDWR

RECEIVED

JUL 27 1992

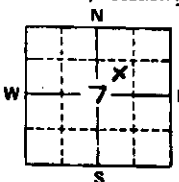
Department of Water Resources

## 10.

Work started 7/7/92 finished 7/10/92

## 6. LOCATION OF WELL

Sketch map location must agree with \_\_\_\_\_



Subdivision Name \_\_\_\_\_

AUG 1 1992

Lot No. \_\_\_\_\_

Block No. \_\_\_\_\_

County Kootenai

SW 1/4 NE 1/4 Sec. 7, T. 50 N. R. 4 W.

## 11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were  
compiled with at the time the rig was removed.Firm Name H2O Well Svc Firm No. 448Address Hayden Lk Rd Date 7-13-92Signed by (Firm Official) Burt M. [Signature]

and

(Operator) Anthony [Signature]