

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

RECEIVED

SEP 11 2003

IDWR/North

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____	_____	Long: _____	_____

1. WELL TAG NO. D 0028753
DRILLING PERMIT NO. 806097
Water Right or Injection Well No. _____

2. OWNER:

Name Carl R. Nichols
Address 4219 W. Indian Trail Road
City Spokane State WA Zip 99208

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 53 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 34 SW 1/4 NE 1/4 SE 1/4
Gov't Lot _____ County Kootenai

Lat: _____ Long: _____
Address of Well Site 24500 N. Cedar Mtn. Road
City Athol

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	18	450#	dry granular

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) Ring Bit 271'

Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	271	250	Steel	☒	☐	☒	☐
4"	8	483	160	PVC	☐	☒	☒	☐
4"	483	503	200	PVC	☐	☒	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method saw cut 1/8" x 6" slot

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
483	503	1/8	60	4"	PVC	☐	☒
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

218 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
8 gpm			4 hrs

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: cold & clear

Depth first Water Encounter 296

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	3	Topsoil, gravel		
	3	7	Gravel, silt		
	7	18	Gravel, cobbles		
8	18	26	Gravel, sand, cobbles		
	26	29	Boulder		
	29	38	Gravel, cobbles		
	38	40	Boulder		
	40	68	Gravel		
	68	74	Gravel, silt, wet		
	74	116	Clay, yellow		
	116	168	Clay, tan		
	168	180	Clay, lt. brown		
	180	230	Clay, tan		
	230	265	Clay, lt. brown		
	265	271	Clay, brown		
6	271	298	Granite, blue green, hard		
	298	316	Granite, grey, hard 1 gpm	x	
	316	348	Granite, grey, green, hard		
	348	390	Granite, grey, black, wht, hard		
	390	425	Granite, grey, green, hard		
	425	427	Granite, brown, white, broken		
			w/ 3 gpm, medium	x	
	427	438	Granite, green, grey, medium		
	438	450	Granite, green, tan		
	450	476	Granite, grey, tan		
	476	483	Granite, broken, 2 gpm	x	
	483	503	Granite, grey, tan		

Completed Depth 503' (Measurable)

Date: Started 8-21-03 Completed 8-28-03

14. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name McCarty Drilling & Pump Inc Firm No. 586

Principal Driller Brian M. [Signature] Date 8-31-03

and Driller or Operator II _____ Date _____

Operator I _____ Date _____

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II

53N 3W 34