

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 Peter Ward
Address 981 S. Stans Rd. Battlett
2.L. 60103
Owner's Permit No. 96-87-N-95

7. WATER LEVEL

Static water level 186 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature 49 OF. Quality good
Describe artesian or temperature zones below.

2. NATURE OF WORK

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

8. WELL TEST DATA

- ☐
- Pump
- ☒
- Bailer
- ☐
- Air
- ☐
- Other _____

Discharge G.P.M. 15+ Pumping Level 0 DRAW DOWN Hours Pumped 1 HR

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 1.550 inches Diameter 6 inches + 1 feet 215 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feetWas casing drive shoe used? ☒ Yes ☐ NoWas a packer or seal used? ☒ Yes ☐ NoPerforated? ☐ Yes ☒ NoHow perforated? ☐ Factory ☐ Knife ☐ Torch

Size of perforation _____ inches by _____ inches

Number _____ From _____ To _____
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feetWell screen installed? ☒ Yes ☐ NoManufacturer's name JOHNSONType STAINLESS Model No. 60Diameter 6 Slot size 60 Set from 215 feet to 226 feet

Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? ☐ Yes ☐ No ☐ Size of gravel _____

Placed from _____ feet to _____ feet

Surface seal depth 18+ 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

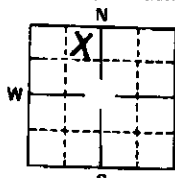
Weld

☐ Cemented between strata

Describe access port _____

6. LOCATION OF WELL

Sketch map location must agree with written location.

Subdivision Name RECEIVED

MAR 09 1988

Lot No. _____ Block No. _____

County Bonner

NE 1/4 NW 1/4 Sec. 17, T. 54 N., R. 4 E.

10.

Work started 5-3 finished 5-8-87

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name Johnson Firm No. 252Address Box 312 Priest River Date 5-9-87Signed by (Firm Official) Norman D. Hyslop

and

(Operator) Same