

**IDAHO DEPARTMENT OF WATER RESOURCES**
WELL DRILLER'S REPORT

RECEIVED
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or
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FEB 06 1995
NORTH HAVEN REGION
IDWR

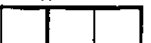
1. DRILLING PERMIT NO. 95 - 94 - N - 0186 - 000
Other IDWR No. _____

2. OWNER:

Name PAUMBO, JAMES
Address PO BOX 15196
City SPOKANE State WA Zip 99216

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 51 North ☐ or South ☐
 Rge. 06 East ☐ or West ☒
 Sec. 24 1/4 SE 1/4 NW 1/4
 Gov't Lot _____ County KOOTENAI

Address of Well Site _____
City _____

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

Lt. _____ Blk. _____ Sub. Name _____

4. PROPOSED USE:

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

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	80	4 SACKS	CRUMBLES
BENTONITE	0	80	1 SACK	POWDER

Was drive shoe used? ☐ Y ☐ N ^XShoe Depth(s) _____

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	118	.250	STEEL	☒	☐	☒	☐
4	-10	305	.160	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method SAW CUT

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
265	305	.0625	60	4	PVC	☐	☐ X
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

_____ ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or
control devices:

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
17+			1 1/2

Water Temp. COLD Bottom hole temp.

Water Quality test or comments: CLEAN

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

Completed Depth 305 (Measurable)
Date: Started 01/27/95 Completed 01/27/95

13. DRILLER'S CERTIFICATION

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

Firm Name	Firm No.
H2O WELL SERVICE, INC.	448

Firm Official John Whelan Date 02/01/95

and
Supervisor or Operator Mark L. [Signature] Date 02/01/95