

**USE TYPEWRITER OR
BALLPOINT PEN**

2

WELL DRILLER'S REPORT

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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.

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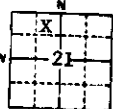
1. WELL OWNER
Name ROGER PICKELSIMER
Address PO BOX 2773 HAYDEN LAKE ID 83835
Drilling Permit No. 95-93-N-0066
Water Right Permit No. _____

2. NATURE OF WORK
☒ New well ☐ Deepened ☐ Replacement
☐ Well diameter increase ☐ Modification
☐ Abandoned (describe abandonment or modification procedures such as liners, screen, materials, plug depths, etc. in lithologic log, section 9.)

3. PROPOSED USE
☒ Domestic ☐ Irrigation ☐ Monitor
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

4. METHOD DRILLED
☒ Rotary ☒ Air ☐ Auger ☐ Reverse rotary
☐ Cable ☐ Mud ☐ Other _____
(backhoe, hydraulic, etc.)

5. WELL CONSTRUCTION
Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____
Thickness Diameter From To
.250 inches 6 inches + 2 feet 345 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 ☐ Gun
Size of perforation? _____ inches by _____ inches
Number From To
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
Well screen installed? ☐ Yes ☒ No
Manufacturer _____ Type _____
Top Packer or Headpipe _____
Bottom of Tailpipe _____
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 20 Material used in seal: ☐ Cement grout
☒ Bentonite ☐ Puddling 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 _____

LOCATION OF WELL
Sketch map location must agree with written location:

Subdivision Name _____
Lot No. _____ Block No. _____
County _____
Address of Well Site DIAGONEL RD
(give at least name of road)
NE ¼ NW ¼ Sec. 21 T. 52 R. 4 N ☒ or S ☐
E ☐ or W ☒

USE ADDITIONAL SHEETS IF NECESSARY

7. WATER LEVEL
Static water level 284 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ °F Quality _____
Describe artesian or temperature zones below.

8. WELL TEST DATA
☐ Pump ☐ Bailor ☒ Air ☐ Other _____
Discharge G.P.M. Pumping Level Hours Pumped
35+ 340 1

9. LITHOLOGIC LOG
104565
Bore Diam. Depth From To Material Water Yes No
10 0 2 TOPSOIL, CLAY X
10 2 20 SAND GRAVEL, COBBLES X
8 20 103 SAND GRAVEL, COBBLES X
8 103 124 GRAVEL, BOULDERS X
8 124 200 SAND, GRAVEL, COBBLES X
8 200 235 SAND, MED. COMPACTED X
8 235 321 SAND, GRAVEL, COURSE X
8 321 339 SAND, FINE, GRAVEL, 1/4" Fine X
8 339 345 GRAVEL, BOULDERS X

10. Work started 05/11/93 finished 05/13/93

11. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed:
Firm Name H2O WELL SERVICE Firm No. #448
Address 582 W HAYDEN AVE Date 05/13/93
Signed by Drilling Supervisor [Signature]
and [Signature]
(Operator) (if different than the Drilling Supervisor)

RECEIVED
MAY 24 1993
NORTHERN REGION
IDWR

FILED
AUG 09 1993

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT