

Use Typewriter  
or Ball Point Pen

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APR 21 1994

2. OWNER: TIM GAUGE  
Name \_\_\_\_\_  
Address N 29455 GOOD HOPE RD  
City ATHOL State ID Zip 83801


 Twp. 53 North ☒ or South ☐  
 Rge. 2 East ☐ or West ☒  
 Sec. 18 NE ☐ SE ☒ 1/4  
 Gov't Lot \_\_\_\_\_ County KOOTENAI

Address of Well Site Same  
City \_\_\_\_\_

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

Lt. \_\_\_\_\_ Blk. \_\_\_\_\_ Sub. Name \_\_\_\_\_

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

☒ New Well    ☐ Modify or Repair    ☐ Replacement    ☐ Abandonment

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other \_\_\_\_\_

| SEAL/FILTER PACK |      |     | AMOUNT          | METHOD |
|------------------|------|-----|-----------------|--------|
| Material         | From | To  | Sacks or Pounds |        |
| BENTONITE        | 0    | 40+ | 2bags           | SLURRY |
|                  |      |     |                 |        |

Was drive shoe used?      Y ☒ N ☐

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

| Diameter | From | To  | Gauge | Material | Casing                              | Liner                               | Welded                   | Threaded                 |
|----------|------|-----|-------|----------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|
| 6"       | +4   | 147 | 250   | Steel    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 4"       | 140  | 440 | 160   | psi pvc  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|          |      |     |       |          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_

☒ Perforations Method SKILLSAW

☐ Screens Screen Type \_\_\_\_\_

| From | To  | Slot Size | Number | Diameter | Material | Casing                   | Linear                              |
|------|-----|-----------|--------|----------|----------|--------------------------|-------------------------------------|
| 140  | 160 | 1/8x4"    | 60     | 4"       | PVC      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 240  | 260 | 1/8x4"    | 60     | 4"       | PVC      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 420  | 440 | 1/8x4"    | 60     | 4"       | PVC      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

control devices. 18 53N 2LW

☐ Pump    ☐ Bailer    ☒ Air    ☐ Flowing Artesian

| Yield gal./min. | Drawdown | Pumping Level | Time |
|-----------------|----------|---------------|------|
| 1 GPM           |          |               |      |
|                 |          |               |      |
|                 |          |               |      |

Water Temp. \_\_\_\_\_ Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: \_\_\_\_\_

## 12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

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

Firm Name H2O WELL SERVICE INC Firm No. #448

Firm Official: [Signature] Date: 4-11-94

and  
Supervisor or Operator [Signature] Date 4-11-94

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

769088



RECEIVED

JUN 15 2001

IDWR North

## FRACTURING LOG

Permit No. 96 94 N 53 500  
TAG D 00172081. OWNER: Name Tim Gage  
Address: 29455 N Good Hope Rd Athol, ID 83801Total depth 440'Diameter 6"2. TYPE OF WORK: Hydrofracturing

3. WELL TESTS:

Yield: gal./min. with ft. drawdown after Hrs.  
Pre-frac: \_\_\_\_\_

Post-frac: \_\_\_\_\_

4. HYDRO-FRACTURING LOG

357 - bottom294 - 357231 - 294168 - 231

5. FRACTURER'S STATEMENT:

This well was hydro-fractured under my jurisdiction and this report is true to the best of my knowledge and belief.

Name Northwest HydrofracturingAddress 13812 W Lincoln Rd Spokane, WA 99224Signed [Signature]Date Job was done 5/22/016. LOCATION OF WELL: County Kootenai  
NE 1/4 SE 1/4 Sec. 18 T 53N N, R 2W WM

53N 2W 18

53N02W-18-7300

NE SE Section 18 T53N R02W

well

The image is a high-contrast, black and white aerial photograph of a rural landscape. A grid of white lines is superimposed on the image, representing a land survey. In the upper left, a white rectangular box contains the text '53N02W-18-7300'. Below this, a white arrow points to a specific location on the grid. In the lower left, another white rectangular box contains the text 'NE SE Section 18 T53N R02W'. To the right of this box, a white arrow points to a specific location on the grid. In the center-right, the word 'well' is written in a handwritten style, with a line pointing to a small, dark, circular feature in the landscape. The background is a dense, textured pattern of dark and light areas, likely representing vegetation and terrain. The overall image has a grainy, high-contrast appearance, typical of an aerial photograph or a scanned map.

NE SE Section 18 T53N R02W

Well