

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER OR
BALLPOINT PENState 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 GERALD AND MARTY DAVIES
Address _____
Owner's Permit No. 96-80-N-64**7. WATER LEVEL**Static water level 155 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 _____**2. NATURE OF WORK**☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning) _____**8. WELL TEST DATA**☐ Pump ☐ Bailer ☒ Air ☐ Other _____

Discharge G.P.M.	Pumping Level	Hours Pumped

3. PROPOSED USE☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)**9. LITHOLOGIC LOG**

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
6	0	127	SAND AND GRAVEL		X
	127	131	GRANITE BOULDER		X
	131	162	SAND AND GRAVEL - WATER ZONE	X	
	162	186	DECOMPOSED GRANITE		X
	186	212	" " SEEP	X	
	212	242	FIRM " "		X
	242	255	BROKEN " "	46pm	X
	255	272	FIRM " "		X
	272	276	BROKEN " "	36pm	X
	276	350	FIRM " "		X

4. METHOD DRILLED☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☒ Cable ☐ Dug ☐ Other _____**5. WELL CONSTRUCTION**Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
250 inches	6 inches	1 feet	167 feet

Was 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

Well screen installed? ☐ Yes ☒ No

Manufacturer's name _____

Type _____ Model No. _____

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☒ Pudding clay ☒ Well cuttingsSealing procedure used: ☐ Slurry pit ☒ Temp. surface casing☒ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld

☐ Cemented between strata

Describe access port _____

RECEIVED

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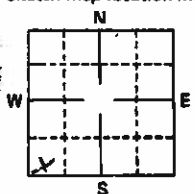
Department of Water Resources
Northern District Office

NOV 17 1980

Department of Water Resources

10.Work started 10-3-80 finished 10-13-80**6. LOCATION OF WELL**

Sketch map location must agree with written location.

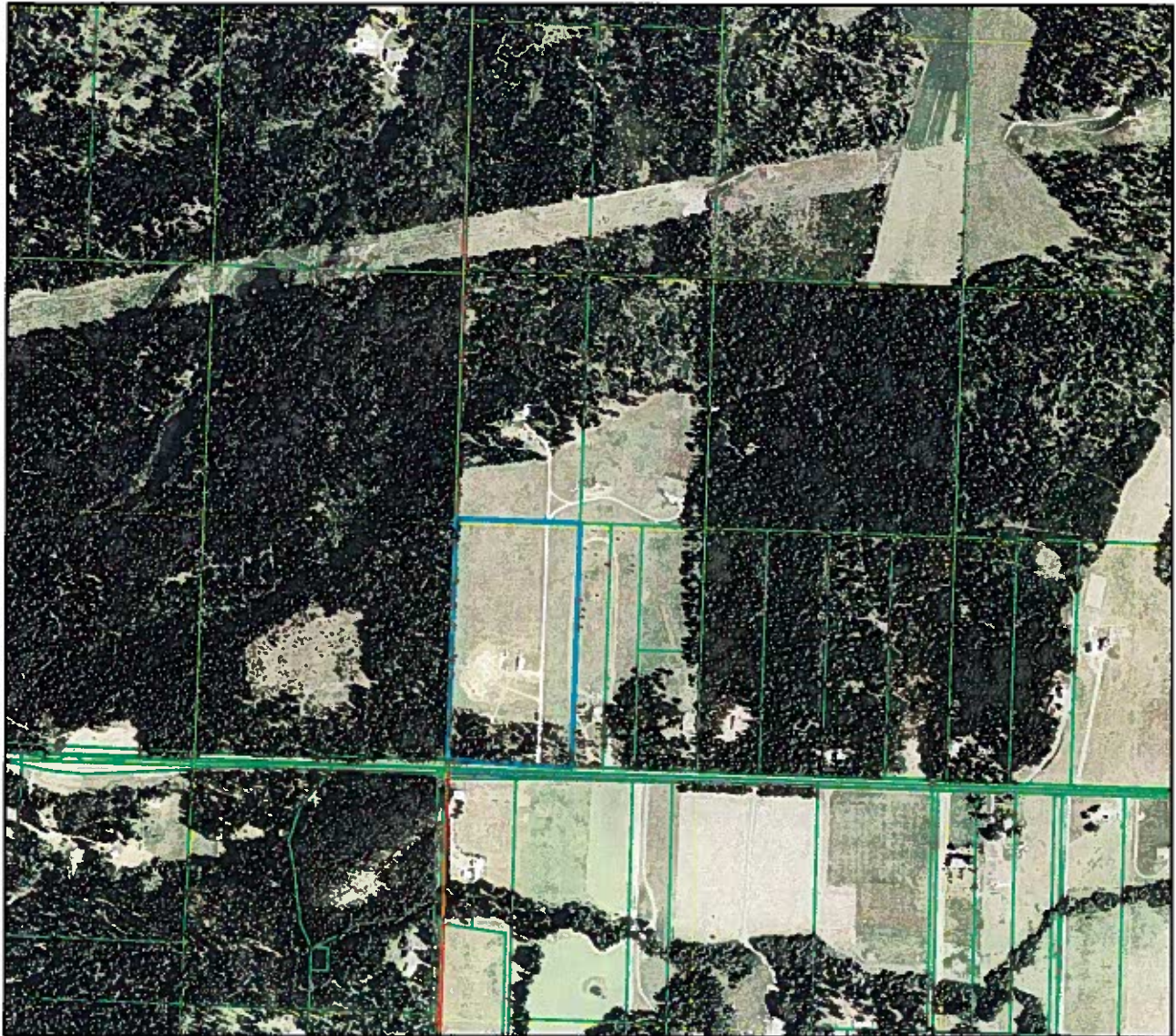


Subdivision Name _____

Lot No. _____ Block No. _____

County KOOTENAISW 1/4 SW 1/4 Sec. 30, T. 53 N. R. 2 E. W.**11. DRILLERS CERTIFICATION**I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name BRAND X Firm No. 289Address RATHDRUM Id Date 10-20-80Signed by (Firm Official) Landon Cordanand
(Operator) Jenny Cordan

WARD



0 362.5 725 1,450 2,175 2,900 Feet



Legend

 Taxlots