

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Well ID No. _____
Inspected by _____
Twp. _____ Rge. _____ Sec. _____
1/4 _____ 1/4 _____ 1/4 _____
Lat. _____ : _____ : _____ Long. _____ : _____ : _____

1. WELL TAG NO. D 0054064
DRILLING PERMIT NO. 848963
Water Right or Injection Well No. _____



COLLECTED
COPY

2. OWNER:
Name Donald & Michelle McVey
Address 6940 E. Author Rd
City Arhol State Id. Zip 83801

12. WELL TESTS:

☐ Pump	☐ Bailor	☒ Air	☐ Flowing Artesian
Yield gal./min. <u>15</u>	Drawdown <u>NA</u>	Pumping Level <u>364</u>	Time <u>6 hr.</u>

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 53 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 3 1/4 SW 1/4 SW 1/4 SW 1/4 SE NW
Gov't Lot _____
County Kootenai
Lat: 47:58:26N Long: 116:41:48W
Address of Well Site SAME
City Arhol
(Give at least name of road - Distance to Road or Landmark)
Lt. _____ Blk. _____ Sub. Name _____

Water Temp. Cold Bottom hole temp. C
Water Quality test or comments: Good

13. LITHOLOGIC LOG: (Describe repairs or abandonment) Depth first Water Encounter 3

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y
12	0	30	SAND, GRAVEL	
6	30	120	SAND, GRAVEL	
6	120	147	Cobbles, sand, gravel	
6	147	183	SAND & GRAVEL	
6	183	207	Cobbles, sand, gravel	
6	207	229	SAND, GRAVEL	
6	229	307	Cobbles, sand, gravel	
6	307	332	SAND, GRAVEL	
6	332	337	Cobbles	
6	337	364	Cobbles, sand, gravel	

4. USE:
☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:
☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	30	600 lb	Pour

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) Ring Bit
Was drive shoe seal tested? ☒ Y ☐ N How? Air pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6 + 1	369	220		Steel	☒	☐	☒	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method _____

Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
359	269	1/4 x 3/16	16	6	Steel	☒	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

Completed Depth 369 (Measurable)
Date: Started 9-11-07 Completed 11-27-07

14. DRILLER'S CERTIFICATION

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

Company Name Disgo Drilling Firm No. 63
Principal Driller Lenny Rendon Date 11-27-
and _____
Driller or Operator II _____ Date _____
Operator I _____ Date _____
Principal Driller and Rig Operator Required.

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