

7/98

Starships Consulting and
Management Services

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Office Use Only			
Inspected by _____			
Twp. _____	Rge. _____	Sec. _____	
1/4 _____	1/4 _____	1/4 _____	
Lat. : : _____	Long. : : _____		

1. WELL TAG NO. 767566Drilling Permit No: D0013956

Other IDWR No. _____

2. OWNER

Name Camp Lutherhaven Site Director's Well Number: 162Address 3000 W Lutherhaven Rd ResidenceCity Coeur d'Alene State ID Zip 83814

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

N	
X	
S	

Twp. 49 ☒ North or ☐ SouthRge. 04 ☐ East or ☒ WestSec. 11 1/4 SW 1/4 NW 1/4Gov't Lot _____ County KOOTENAI

Lat. : : _____ Long. : : _____

Address of Well Site 3000 W LutherhavenCity Coeur d'Alene

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

Lt. _____ Bk. _____ Sub. Name _____

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/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0'	20'	11 sacks	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 275Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	-275	.250	steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method torch☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-270	-275	1/4x8	20	6	steel	☒	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

180 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
estimate 15			

Water Temp. cold _____ Bottom Hole Temp. cold _____

Water Quality test or comments: _____

Depth first Water encountered 210

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
10	0	2	Topsoil	☐	☒
10	2	18	Clay tan some small gravels	☐	☒
8	18	55	Clay tan	☐	☒
8	55	130	Clay brown some broken Basalt	☐	☒
8	130	185	Basalt soft	☐	☒
8	185	210	Basalt occasional layers of clay	☐	☒
8	210	260	Basalt soft w/H2O fractured apx 5 gpm	☒	☐
8	260	280	Basalt fractured w/H2O apx 15 gpm	☒	☐

RECEIVED
DEC 29 2000
IDWR/NorthCompleted Depth 275 (Measurable)Date: Started 12/23/00 Completed 12/26/00

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 H2O Well Services, Inc. Firm No. 448Firm Official Jim McLeslie Date 12-26-00and Supervisor or Operator Jim McLeslie Date 12/27/00

(Sign Once if Firm Official and Operator)

Jim McLeslie

8/20/09 - Water Table from 190-270

49 N 4 W 11