

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTTYPEWRITER 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 <u>Tim Bruya</u> Address <u>S. 3249 High Drive</u> <u>Spokane, Washington 99203</u> Owner's Permit No. <u>95-89-N-25</u>		7. WATER LEVEL Static water level <u>28</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ of. Quality <u>good</u> <i>Describe artesian or temperature zones below.</i>																								
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		8. WELL TEST DATA ☐ Pump ☐ Bailor ☐ Air ☐ Other _____ <table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td><u>2 gpm</u> <u>estimated</u></td><td><u>200</u></td><td><u>1 1/2 hr</u></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>2 gpm</u> <u>estimated</u>	<u>200</u>	<u>1 1/2 hr</u>																	
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th rowspan="2">Water Yes No</th></tr><tr><th>From</th><th>To</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>40</td><td>clay broken granite</td><td>X</td></tr><tr><td>6</td><td>40</td><td>306</td><td>black & white granite</td><td>X</td></tr></tbody></table>		Bore Diam.	Depth		Material	Water Yes No	From	To	8	0	40	clay broken granite	X	6	40	306	black & white granite	X						
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____		RECEIVED MAY 10 1989 NORTHERN REGION IDWR RECEIVED MAY 22 1989 Department of Water Resources																								
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>.250</u> inches</td><td><u>6</u> inches</td><td><u>1</u> feet</td><td><u>40</u> feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet 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 <u>20</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding 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 _____				Thickness	Diameter	From	To	<u>.250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>40</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet			
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6. LOCATION OF WELL Sketch map location must agree with written location. <table border="1"><tr><td>N</td><td></td><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td>X</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td><td></td><td></td></tr></table> County <u>Kootenai</u> Subdivision Name _____ Lot No. <u>1</u> Block No. _____ T. <u>51</u> N. S. R. <u>Q3</u> W.		N					W		X		E											S				
N																										
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11. DRILLERS CERTIFICATION <u>22</u> I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>United Drilling Inc</u> Firm No. <u>414</u> <u>212</u> P.O. Box 2499 Address <u>Coeur d' Alene, Id</u> Date <u>8/9/89</u> Signed by (Firm Official) <u>Ellen Walker</u> and (Operator) <u>Tim Vanking</u>																										

SCANNED

AUG - 7 2009

95-13209