

DEC 05 1935

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

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

1. DRILLING PERMIT NO. 95-95-N-173 - 200
Other IDWR No. _____

11. WELL TESTS:

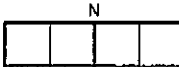
☐ Pump ☒ Bailer☒ Air ☐ Flowing Artesian

2. OWNER:

Name Larry Dershem
Address P.O.Box 1209
City Rathdrum State ID Zip 83858

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 52 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 28 1/4 NE 1/4 SW 1/4
10 acres 40 acres 160 acres
 Gov't Lot _____ County Kootenai
 Lat: : : Long: : :
 Address of Well Site Mt View Rd
 City rathdrum

Lt. _____ Blk. _____ Sub. Name Parcel I

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	6	overbore

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1	285	250	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

NE5W 28 52N 4W

FORWARD WHITE COPY TO WATER RESOURCES

11. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
20		280	2hrs

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encountered _____

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

[illegible]

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 Bronson Water Wells Firm No. 360

Firm Official HD Benson Date 7-24-55

and
Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

SCANNED
SEP - 8 2009