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Form 1159
MAY 20 1999

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

076535

Office Use Only

Inspected by

Twp. _____ Rge. _____ Sec. _____
1/4 1/4 1/4

Lat. : : Long. : :

☒ Air ☐ Flowing Artesian

IDWR/North

1. WELL TAG NO. D D00010009DRILLING PERMIT NO. 94-99-N-15

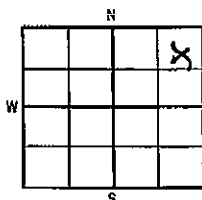
Other IDWR No. _____

2. OWNER:

Name Fred Christensen
Address 3705 Buckle Rd.
City Wallace State ID Zip 83873

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

Twp. 47N North ☒ or South ☐
Rge. 3W East ☐ or West ☒
Sec. 1 1/4 NE 1/4 NE 1/4
Gov't Lot 5 County Kootenai
Lat. : : Long. : :Address of Well Site Blackhawk Killmac
City St. Maries

Lt. _____ Blk. _____ 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		
<u>Bentonite</u>	<u>0</u>	<u>78</u>	<u>400#</u>		<u>Run dry</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 78"Was drive shoe seal tested? ☒ Y ☐ N How? Nil

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>12</u>	<u>78</u>	<u>280</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>75</u>	<u>175</u>	<u>140</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe N/A Length of Tailpipe N/A

9. PERFORATIONS/SCREENS

Perforations Method Drill
Screens Screen Type N/A

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>115</u>	<u>155</u>	<u>1/4</u>	<u>100</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

60 ft. below ground Artesian pressure N/A lb.Depth flow encountered 132 ft. Describe access port or control devices: Well seal

11. WELL TESTS:

☐ Pump ☐ Bailor

Yield gal./min.	Drawdown	Pumping Level	Time
<u>20</u>			<u>2 hr.</u>

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

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

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>9</u>	<u>Top soil</u>		☒
	<u>9</u>	<u>11</u>	<u>basalt</u>		☒
	<u>11</u>	<u>12</u>	<u>Clay brown</u>		☒
	<u>12</u>	<u>15</u>	<u>Clay grey</u>		☒
	<u>15</u>	<u>19</u>	<u>Clay yellow</u>		☒
	<u>19</u>	<u>24</u>	<u>Clay grey</u>		☒
	<u>24</u>	<u>27</u>	<u>clay brown</u>		☒
	<u>27</u>	<u>74</u>	<u>Clay grey</u>		☒
	<u>74</u>	<u>91</u>	<u>basalt soft</u>		☒
	<u>91</u>	<u>95</u>	<u>basalt broken</u> <u>5 gpm</u>	☒	
	<u>95</u>	<u>118</u>	<u>basalt soft</u>		☒
	<u>118</u>	<u>122</u>	<u>basalt broken</u> <u>5 gpm</u>	☒	
	<u>122</u>	<u>132</u>	<u>basalt soft</u>		☒
	<u>132</u>	<u>145</u>	<u>basalt broken</u> <u>10 gpm</u>	☒	
	<u>145</u>	<u>150</u>	<u>basalt soft</u>		☒

Completed Depth 150' (Measurable)
Date: Started 5-13-99 Completed 5-14-99

13. DRILLER'S CERTIFICATION

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

Company Name Allways Drilling Inc. Firm No. 500Firm Official Stanley Wolf Date 5/14/99and Driller or Operator [Signature] Date 5-14-99

(Sign once if Firm Official & Operator)

47N 3W 1

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