

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTUSE TYPEWRITER 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>ROBERT R. WEBB</u> Address <u>W 5101 PRESLEY RD</u> <u>COEUR D'ALENE, ID 83814</u> Drilling Permit No. <u>95-91-N109</u> Water Right Permit No. _____	7. WATER LEVEL Static water level <u>115</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 _____ °F. Quality _____ <i>Describe artesian or temperature zones below.</i>																																																										
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Well diameter increase ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width:100%"><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr><tr><td><u>2-3 1/2</u></td><td><u>810</u></td><td><u>1</u></td></tr><tr><td>ESTIMATED</td><td></td><td></td></tr></table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>2-3 1/2</u>	<u>810</u>	<u>1</u>	ESTIMATED																																																			
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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" style="width:100%"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>9</td><td>TOP SOIL</td><td></td><td>X</td></tr><tr><td></td><td>9</td><td>22</td><td>DECOMPOSED GRANITE</td><td></td><td>X</td></tr><tr><td></td><td>22</td><td>39</td><td>B&W GRANITE</td><td></td><td>X</td></tr><tr><td>6</td><td>39</td><td>210</td><td>MEDIUM HARD GRANITE</td><td>X</td><td></td></tr><tr><td></td><td>210</td><td>460</td><td>HARD B&W GRANITE</td><td></td><td>X</td></tr><tr><td></td><td>460</td><td>510</td><td>BROKEN SOFT GRANITE</td><td>X</td><td></td></tr><tr><td></td><td>510</td><td>610</td><td>HARD B&W GRANITE</td><td></td><td>X</td></tr><tr><td></td><td>610</td><td>810</td><td>HARD B&W GRANITE W/QUARTZ</td><td></td><td>X</td></tr></tbody></table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	9	TOP SOIL		X		9	22	DECOMPOSED GRANITE		X		22	39	B&W GRANITE		X	6	39	210	MEDIUM HARD GRANITE	X			210	460	HARD B&W GRANITE		X		460	510	BROKEN SOFT GRANITE	X			510	610	HARD B&W GRANITE		X		610	810	HARD B&W GRANITE W/QUARTZ		X
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	RECEIVED JUL 25 1991 Department of Water Resources RECEIVED JUL 22 1991 NORTHWESTERN IDWR																																																										
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width:100%"><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 ☐ Gun 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 ☒ 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	10. Work started <u>7/16/91</u> finished <u>7/19/91</u>																																						
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6. LOCATION OF WELL: Sketch map location must agree with written location. <table border="1" style="width:100%"><tr><td style="text-align: center;">N</td><td></td><td></td></tr><tr><td style="text-align: center;">W</td><td style="text-align: center;">X</td><td style="text-align: center;">E</td></tr><tr><td style="text-align: center;">S</td><td></td><td></td></tr></table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>KOOTENAI</u> SW ¼ SE ¼ Sec. <u>32</u> T. <u>50N</u> S. <u>4</u> R. <u>4W</u> W. ☐	N			W	X	E	S			11. DRILLERS CERTIFICATION <u>ee</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> P.O. BOX 2499 Address <u>CDA, ID 83814</u> Date <u>7/19/91</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>Tim Volking</u>																																																	
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