

WELL DRILLER'S REPORT

State 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.

POSTED

1. WELL OWNER

Name John W. Phelps, Jr.

Address 1301 Gilbert Ln. h. 83814

Owner's Permit No. 95-85-N-87

2. NATURE OF WORK

☒ New well

☐ Deepened

☐ Replacement

☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE

☒ Domestic

☐ Irrigation

☐ Test

☐ Municipal

☐ Industrial

☐ Stock

☐ Waste Disposal or Injection

☐ Other _____ (specify type)

4. METHOD DRILLED

☒ Rotary

☐ Air

☐ Hydraulic

☐ Reverse rotary

☐ Cable

☐ Dug

☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness 2.50 inches

Diameter 6 inches

From 2 feet

To 84 feet

_____ inches

_____ inches

_____ feet

_____ feet

_____ inches

_____ inches

_____ feet

_____ feet

_____ inches

_____ inches

_____ feet

_____ feet

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 24 Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☒ Cuttings

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 _____

6. LOCATION OF WELL

Sketch map location must agree with written location.

N

W

E

S

K

Subdivision Name _____

Lot No. _____ Block No. _____

County Kootenai

SE $\frac{1}{4}$ SE $\frac{1}{4}$ Sec. 26, T. 10 N., R. 3 E., S. 10

7. WATER LEVEL

Static water level 20 feet below land surface.

Flowing? ☐ Yes ☒ No G.P.M. flow _____

Artesian closed-in pressure _____ p.s.i.

Controlled by: ☐ Valve ☒ Cap ☐ Plug

Temperature cold F. Quality Good

Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump ☐ Bailor ☒ Air ☐ Other _____

Discharge G.P.M. 25

Pumping Level variable

Hours Pumped 1/2 hr

9. LITHOLOGIC LOG

Bore Diam.	Depth	Material	Water	
	From	To	Yes No	
<u>8</u>	<u>0</u>	<u>4</u>	<u>Topsoil</u>	<u>X</u>
	<u>4</u>	<u>14</u>	<u>Clay and Gravel</u>	<u>X</u>
	<u>14</u>	<u>56</u>	<u>Blue Clay</u>	<u>X</u>
	<u>56</u>	<u>77</u>	<u>Clay and Gravel</u>	<u>X</u>
<u>6</u>	<u>77</u>	<u>90</u>	<u>Gravel</u>	<u>X</u>

RECEIVED

DEC 26 1985

Department of Water Resources

RECEIVED

DEC 19 1985

Department of Water Resources

Northern District Office

MICROFILMED

10.

Work started 9/26/85 finished 9/26/85

11. DRILLERS CERTIFICATION

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

Associated Well

Firm Name Drillers Inc Firm No. 245

Address Box 723 CDA Date 9/27/85

Signed by (Firm Official) And Thornton

and

(Operator) Robert F. Dugan

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT