

FEB 14 1996



IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

Office Use Only
Inspected by TDK
Twp. 50N Rge. 04W Sec. 08
1/4 SW 1/4 NW 1/4
Lat: : : Long: : :

1. DR. IDWR FEB 11 1995 95-95-N-153-000
Other IDWR No.

2. OWNER

Name Jim E. Wilson
Address 2650 Shoreline CT
City Cornwall State CT Zip 06031

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

Twp. 50 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 8 NE $\frac{1}{4}$ NE $\frac{1}{4}$ $\frac{1}{4}$
 Gov't Lot _____ County Hood $\frac{1}{4}$ 160 acres
 Lat: : : Long: : :

Address of Well Site 2650 Shoreline Ct
City CoEUR D'Alene

(Give at least name of road + Distance to Road or Landmark)

Lt. 6 Blk. _____ Sub. Name Harbor Island
2nd addition
(ex deiller)

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	25	600	Overlaid

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	0	80	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:

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

NE NE 8 SON 4w

11. WELL TESTS:

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
111	4		

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encountered

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

[illegible]

Completed Depth 82 (Measurable)
Date: Started 8 26 Completed 8 27

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 McGraw-Hill Drilling DBA Blue Water Drilling Firm No. 452

Firm Official John Carlson Date 8 27 91
and

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)