

RECEIVED

OCT 11 2001

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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

IDWR/North
1. WELL TAG NO. D0017731

DRILLING PERMIT N 770910

Other IDWR No _____

2. OWNER:

Name John R Anderson

Address 19570 Hidden Springs Road

City West Linn State OR Zip 97068

3. LOCATION OF WELL by legal description:

N		Twp 50N	North ☒ or South ☐
Rge 04W		East ☐ or West ☒	
Sec 31		1/4 NE 1/4 SW 1/4	
Gov't Lot		10 Ac 40 Ac 160 Ac	
Lat		County Kootenai	
Long			

8611 W Eagle Ridge Road

City Coeur d'Alene

Lot _____ Blk _____ Sub. Name (see next line)

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/Lbs	
Bentonite	0	19	3 sacks	dry

Drive Shoe Used? ☐ Y ☒ N Shoe Depth(s) _____Drive Shoe Seal Tested? ☐ Y ☒ N How? _____

8. CASING/LINER

Diam	From	To	Gauge	Material	Casng	Liner	Weld	Thrded
6	1	19	0.250	Steel	☒	☐	☐	☐
4	20	560	0.165	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length Headpipe _____ Length Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations? Method Drilled liner
☐ Screens? Screen Type _____

From	To	Slot	Nmbr	Diam	Material	Casng	Liner
500	560		600	3/8"	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

75 ft. below ground. Artesian pressure _____ lb.

Depth flow encountered 525 ft. Describe access port or

control devices: Steel cap, welded

11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pump Level	Time
15+	100%	555	1 hr.

Water Temp. _____ cold Bottom hole temp. _____ cold

Water Quality test or comments: (below) Depth first Water Encountered 133
clear, cold, no smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality and Temperature	Water	
				Y	N
8	0	4	Topsoil		☒
8	4	13	Decomposed granite		☒
8	13	19	Granite - salt & pepper		☒
6	19	133	Granite - salt & pepper		☒
6	133	137	Granite - broken	☒	
6	137	374	Granite - salt & pepper		☒
6	374	376	Granite - broken		☒
6	376	525	Granite - salt & pepper		☒
6	525	545	Granite - green/white - soft - broken	☒	
6	545	560	Granite - salt & pepper		☒

Completed Depth 560 (Measurable)
Date: Started 9/6/01 Completed 9/10/01

13. DRILLERS CERTIFICATION

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

Firm Name	United Drilling Inc.	Firm No	414
Firm Official and	<i>Curtis S. Hammond</i>	Date	9/11/01
Supervisor or Operator	Curtis S. Hammond	Date	9/11/01

50N 4W 31 FORWARD WHITE COPY TO WATER RESOURCES