

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESUSE TYPEWRITER OR
BALLPOINT PEN

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.

ENT'D

1. WELL OWNER

Name Dale E. Pierce
Route 1, Box 183
Address Plummer, ID 83851
Owner's Permit No. 95-84-N-31

7. WATER LEVEL

Static water level 45 feet below land surface.
Flowing? ☐ Yes ☐ No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature _____ of. Quality _____
Describe artesian or temperature zones below.

2. NATURE OF WORK

- ☒
- New well
- ☐
- Deepened
- ☐
- Replacement
-
- ☐
- Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ OtherDischarge G.P.M. _____ Pumping Level _____ Hours Pumped _____
15 GPM - ESTIMATED AIRLIFT

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 _____ inches Diameter _____ inches From _____ feet To _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feetWas casing drive shoe used? ☒ Yes ☐ NoWas a packer or seal used? ☐ Yes ☒ NoPerforated? ☐ Yes ☒ NoHow perforated? ☐ Factory ☐ Knife ☐ Torch

Size of perforation _____ inches by _____ inches

Number _____ From _____ To _____
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feetWell 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 _____

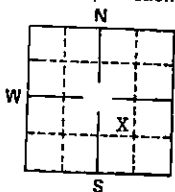
Placed from _____ feet to _____ feet

Surface seal depth 59 Material used in seal: ☐ Cement grout☒ Bentonite ☐ Pudding clay ☐ _____Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing☒ Overbore to seal depthMethod 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.



Subdivision Name _____

Lot No. _____ Block No. _____

County _____ Benewah

NW ¼ SE ¼ Sec. 15, T. 46N N/S, R. 4W E/W.

10.

Work started 7/14/84 finished 7/16/84

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name PONDEROSA DRILLING Firm No. 228

E. 6010 Broadway

Address Spokane, WA 99212 Date 7/16/84

Signed by (Firm Official) _____

and

(Operator) _____

W. Scott Barratt

Lynnwood Hendrick

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