

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTState 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.

MAY 06 1988

1. WELL OWNER

Name RICHARD JOHNSON
Address RT. 2 Box 84 WARDEN IDAHO 83876
Owner's Permit No. 95-88-N-15

7. WATER LEVEL

Department of Water Resources

Static water level 50 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 Good
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 ☐ Other _____Discharge G.P.M. 15 GPM Pumping Level 90' Hours Pumped _____

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
10	0	15	RED CLAY & COBBLES		X
10	15	40	TAN CLAY - FIRM		X
8	40	65	GRAY CLAY - HARD		X
8	65	70	BROWN SAND & WATER	X	
8	70	90	GRAY CLAY - HARD		X
8	90	136	TAN CLAY - HARD		X
6	136	144	RTZ SAND, MICA & WATER	X	
6	144	150	TAN CLAY - FIRM		X
6	150	160	RTZ SAND, MICA & WATER	X	

4. METHOD DRILLED

☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____Thickness 250 inches 6 inches + 1 feet 19 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 _____ 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 3/8" PEAPlaced from 120' feet to 160' feetSurface seal depth 20' Material used in seal: ☐ Cement grout☒ Bentonite ☐ Puddling clay ☐ _____Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing☒ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld

☐ Cemented between strataDescribe access port 1/4" OPENING

6. LOCATION OF WELL

Sketch map location must agree with written location.

N
W E
S
Subdivision Name _____
Lot No. _____ Block No. _____County KOOTENAINE 1/4 Sec. 19, T. 48 N, R. 4 E

10.

Work started 4/13 finished 4/14/88

11. DRILLERS CERTIFICATION

I/We certify that all minimum well construction standards were
complied with at the time the rig was removed.Firm Name S. J. MILLER, INC. Firm No. 319Address 35613 LINKE RD.Date 4/18/88Signed by (Firm Official) [Signature]

and

(Operator) [Signature]

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

BEN CARPENTER