

WELL DRILLER'S REPORT

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

1. WELL TAG NO. D0028013

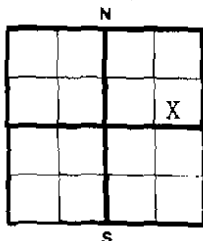
Drilling Permit No: 788824
Other IDWR No. _____

2. OWNER

Name FOSTER, BOB Well Number: 504
Address 1400 W. IRONHORSE #35
City POST FALLS State ID Zip 83854

3. LOCATION OF WELL by legal description

sketch map location must agree with written location



Twp. 50 ☒ North or ☐ South
Rge. 5 ☐ East or ☒ West
Sec. 4 1/4 SE 1/4 NE 1/4

Gov't Lot _____ County KOOTENAI

Lat: _____ Long: _____

Address of Well Site SAME

City POST FALLS

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

Lt. _____ Bk. _____ Sub. Name _____

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	18	10 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 153

Was drive shoe seal tested? ☐ y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	153	.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:

90 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 155 ft. Describe access port or control devices: _____

50 N 5 W 4

11. WELL TESTS:

Pump _____ Bailer _____ ☒ Air _____ Flowing Artesia _____
Yield gal./min. _____ Drawdown _____ Pumping Level _____ Time _____
20 _____
Water Temp. COLD Bottom Hole Temp. COLD
Water Quality test or comments: CLEAR
Depth first Water encountered 153

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
8	0	18	Gravels, Sand & Cobbles	Y	N
8	18	145	3/4" Gravels w/some clay	Y	N
8	145	153	Gravel & Sand	Y	N
6	153	155	Gravel & Sand	Y	N

SCANNED
NOV 27 2002
RECEIVED
NOV 22 2002
IDWR North

Completed Depth 155 (Measurab
Date: Started 11/11/02 Completed 11/12

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 H2O Well Service, Inc. Firm No. 44
Firm Official [Signature] Date 11-16
and
Supervisor or Operator [Signature] Date 11/12
(Sign Once if Firm Official and Operator)

(Jim McLeslie)