Form 238-7
7/98
Starships Consulting and Management Services

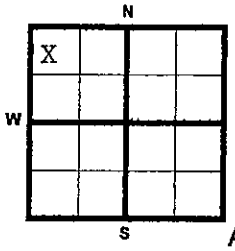
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Inspected by_____
Twp_____Rge_____ Sec_____
_____1/4_____1/4_____1/4
Lat: : : Long: : :

1. WELL TAG NO. D0028965
Drilling Permit No:
Other IDWR No.

2. OWNER **Well Number:** 663
Name OLSON, RICHARD
Address 1252 N. 173RD
City SHORELINE State WA Zip 98133

3. LOCATION OF WELL by legal description
sketch map location must agree with written location



Twp. 50N ☑ North or ☐ South
Rge. 4W ☐ East or ☑ West
Sec. 8 ____ 1/4 NW 1/4 NW 1/4
Gov't Lot ____ County KOOTENAI
Lat: : : Long: : :
Address of Well Site EBTIDE DR.
HARBOR ISLAND City CDA
(Give at least name of road + Distance to Road or Landmark)
Lt. 4 Blk. ____ 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 Material	From	To	AMOUNT Sacks or Pounds	METHOD
DRY GRANULE				
BENTONITE	0	20	18 BAGS	OVERBORE

Was drive shoe used? ☑ Y ☐ N Shoe Depth(s) 102'
Was drive shoe seal tested? ☐ Y ☑ N How? ____

8. CASING/LINER:

Diameter	From	To	Gauge	Materi	Casing	Liner	Welded	Threaded
6	+2	102	.250	STEEL	☑	☐	☑	☐
4	-10	170	.160	PVC	☐	☑	☑	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
☑ Perforations Method PERFORATOR
☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
50	63	1/4 X 2	120	6	STEEL	☑	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
45 ft. below ground Artesian pressure ____ lb.
Depth flow encountered 149 ft. Describe access port or control devices: ____

11. WELL TESTS:
☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
15			1 HR

Water Temp. COLD Bottom Hole Temp COLD
Water Quality test or comments: GOOD
Depth first Water encountered 45

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water Y	Water N
8	0	68	Soil w/ Sand & Gravel 10gpm @ 45'	☑	☐
8	68	102	Dark Brown & Gray Clay 3 gpm @1	☑	☐
6	102	170	Dark Gray Basalt 3 gpm @149'	☑	☐

COPY

Completed Depth 170 (Measurable)
Date: Started 9/28/03 Completed 9/29/03

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 **H20 WellService, Inc.** Firm No. **448**
Firm Official ____ Date ____
and
Supervisor or Operator ____ Date ____
(Sign Once if Firm Offical and Operator)

(Louie Hanner)