

RECEIVED

Form 228-7
11/97

OCT 10 2001

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

IDWR/North

1. WELL TAG NO. D0017853

DRILLING PERMIT N

Other IDWR No

2. OWNER:

Name **Bob Robertson**

Address 7881 E Bunco

City Athol

State ID

Zip 83801

3. LOCATION OF WELL by legal description:

N		Twp	53N	North	✓	or	South
W		Rge	03W	East		or	West
E		Sec	27	1/4	SW	1/4	SW 1/4
S		Gov't Lot		10 Ac	40 Ac	160 Ac	
		County	Kootenai				
		Lat		Long			

7881 E Bunco Road 1.3 on left

Lot Blk

City 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	18	8 sacks	pour in

Drive Shoe Used? Y ✓ N Shoe Depth(s)

Drive Shoe Seal Tested? Y ✓ N How?

8. CASING/LINER

Diam	From	To	Gauge	Material	Casing	Liner	Weld	Thrded
6	1	179	0.250	Steel	✓		✓	
4	120	500	0.165	PVC		✓		

Length Headpipe Length Tailpipe

9. PERFORATIONS/SCREENS

Perforations? Method

✓ Screens? Screen Type PVC

From	To	Slot	Nmbr	Diam	Material	Casing	Liner
460	500	.250		4	PVC		✓

10. STATIC WATER LEVEL or ARTESIAN PRESSURE

220 ft. below ground. Artesian pressure lb.

Depth flow encountered 305, 365 ft. Describe access port or

control devices: steel cap welded

11. WELL TESTS:

Pump	Bailer	✓ Air	Flowing Artesian
Yield gal./min.	Drawdown	Pump Level	Time
4 gpm	100%	499	1 hr.

Water Temp. cold Bottom hole temp. cold

Water Quality test or comments: (below) Depth first Water Encountered 305
clear, cold, no smell

12. LITHOLOGIC LOG (Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality and Temperature	Water
8	0	18	Sand & gravel - 3/4" minus	Y N
6	18	65	Sand & gravel - 3/4" minus	✓
6	65	167	Sand & gravel w/cobbles & boulders	✓
6	167	179	granite - black/white/green/peach med.	✓
6	179	190	granite - black/white/green/peach med.	✓
6	190	197	granite - black/white/green/peach soft	✓
6	197	295	granite - black/white/green/peach hard	✓
6	295	308	granite - black/white/green/peach soft	✓
			1.5 gpm @ 305	✓
6	308	360	granite - black/white/green/peach hard	✓
6	360	365	granite - black/white/green/peach soft	✓
			2.5 gpm @ 363	✓
6	365	408	granite - black/white/green/peach hard	✓
6	408	500	granite - black/white/green/peach med	✓

RECEIVED

MAR - 1 2002

Department of Water Resources

Completed Depth 500 (Measurable)
Date: Started 10/3/01 Completed 10/5/01

13. DRILLERS CERTIFICATION

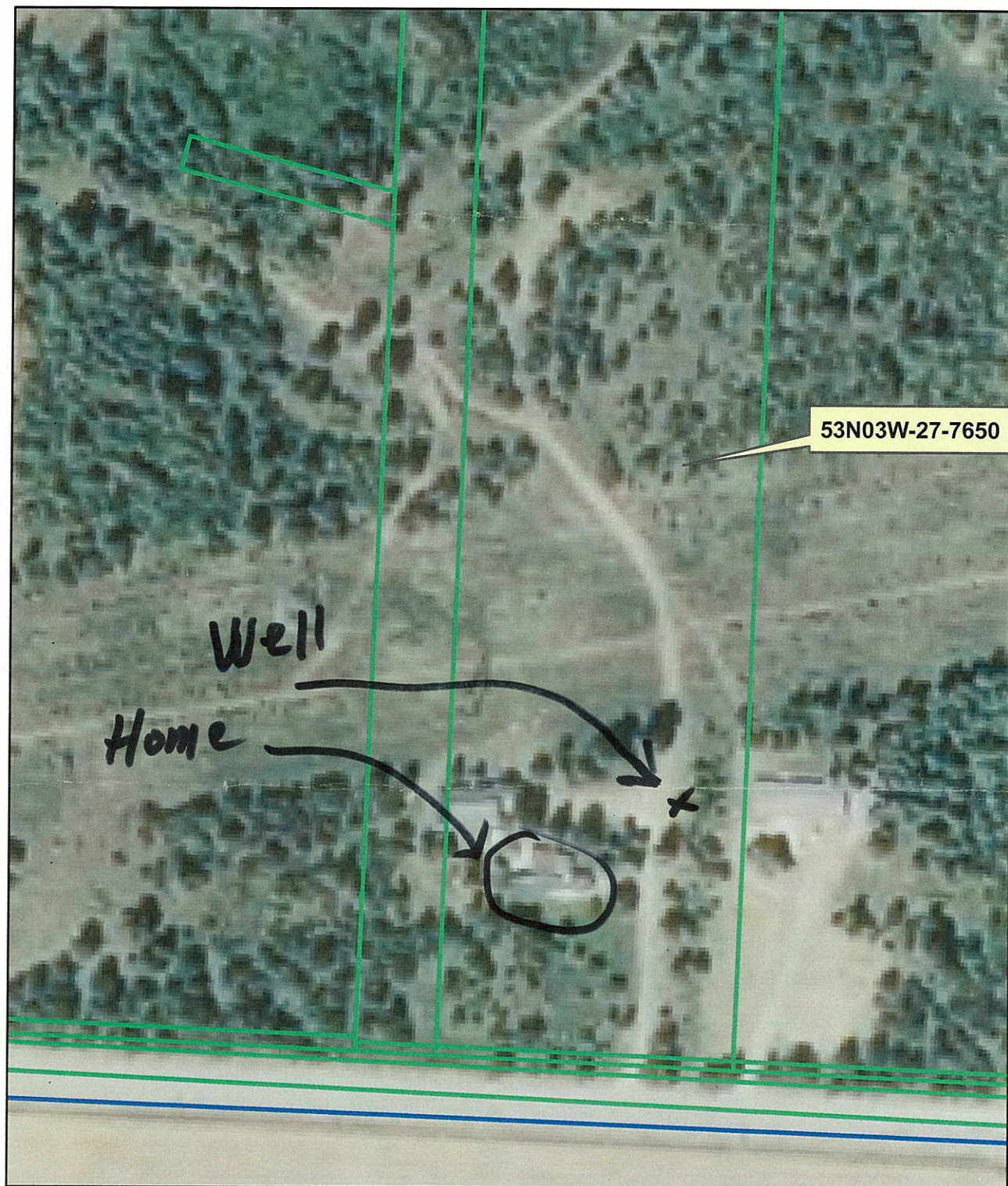
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name United Drilling Inc. Firm No 414
Firm Official *Jason C. Beckham* Date 10/8/01
and
Supervisor or Operator Jason C. Beckham Date 10/8/01

FORWARD WHITE COPY TO WATER RESOURCES

53 N 3 W 27

ROBERTSON PIN 53N03W-27-7650



AFFIDAVIT OF OWNER - OCCUPIED PRIMARY RESIDENCE

Single Family Dwelling.....[]

Multi - Family Dwelling.....[]

Apartment or Condominium.....[]

Mobile Home.....[✓]

(Do you own your own land ____*Yes ____No)

*(If YES, do you have a detached garage ____Yes ____No)

Commercial Improvement with Living Quarters.....[]

FOR OFFICIAL USE ONLY
Homeowner's Exemption <u>1996</u>
Effective Year
<u>lh</u> Deputy's Initials

Robertson Robert (Etux)
Name of Owner (print last name first)

Telephone Number

7875 P.O. Box 487
Mailing Address

Site Address

Post Falls 83854
City State Zip

Parcel Number

Subdivision Name

Lot

Block

53ND3W-27-7650

Legal Description

Section

Township

Range

I CERTIFY THAT I WAS THE OWNER / OCCUPANT AS OF 8 / 1 / 95.
Month Day Year

I AM THE OWNER, OR AM PURCHASING, AND OCCUPY AS MY PRIMARY DWELLING THE RESIDENTIAL IMPROVEMENT AS DESCRIBED ABOVE AND HEREBY GRANT PERMISSION TO ANY GOVERNMENT AGENCY AND / OR CONTRACTOR TO CONFIRM MY STATUS RELATIVE TO IDAHO STATE RESIDENCY, AND TO RELEASE, TO THE KOOTENAI COUNTY ASSESSOR WHATEVER INFORMATION IS NECESSARY TO DO SO.

6-13-95
Date of Application

Robert S. Robertson
Signature of Owner

TOM MOORE, KOOTENAI COUNTY ASSESSOR
501 GOVERNMENT WAY
P.O. BOX 9000
COEUR D'ALENE, IDAHO 83816-9000
PHONE 769-4400 EXT. 459

For additional information see reverse.

BUILDING PERMIT

CALL FOR INSPECTIONS 769-4401

KOOTENAI CO., IDAHO

No. 24824

Owner : ROBERTSON, ROBERT E ETUX
Address: PO BOX 487 POST FALLS, ID83854

Phone: (208) 777-9755

Serial : 178728

Plan:

Date: 6/09/95

Parcel#: 53N03W-27-7650

S 27 T 53N R 03W

Legal : E 260' OF W2-E2-SE-SE, W2-SE-NE- SE, SW-NE-SE LYING S & E OF RR R
/W, EX RR R/W, EX R/W

Contrtr: DICK'S MOBILE HOME SERVICE #023 Phone: (208) 773-5765

Address: E 5450 SELTICE WAY #B POST FALLS ID 83854

Job Add: 7875 E BUNCO RD ATHOL 83801

Directs: HWY 95 N, E ON BUNCO RD APPROX 1.3 MI TO SITE ON N SIDE

Value :	Permit:	30	Plan Chk:	30	Total:	60
Size : 14 X 70 CHAMPION 1981						
OCC Typ: 16 SETTING			OCC Group:	OCC Load:		
Constro:			NWEC:			
Zoning : RURAL			Health: 12083	6/13/95		

Comment: 21.688 AC, (49 \$20)