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Form 238-7 3/95

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT 097890

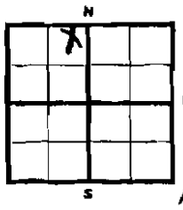
Use Typewriter or Ballpoint Pen

Office Use Only
Inspected by _____
Twp ____ Rge ____ Sec ____
____ 1/4 ____ 1/4 ____ 1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. 95-96-N-103-200
Other IDWR No. State

2. OWNER **Well Number:** 476
Name KOSEWIC, TOM #2
Address RT 2 BOX 257
City HAYDEN LAKE State ID Zip 83835

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



Twp. 51 ☒ North or ☐ South
Rge. 03 ☐ East or ☒ West
Sec. 11 1/4 NE 1/4 NW 1/4
Gov't Lot ____ County KOOTENAI
Lat: : : Long: : :
Address of Well Site MOKINS BAY
City ____
(Give at least name of road + Distance to Road or Landmark)
Lt. ____ 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 Replacem

6. DRILL METHOD
☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other ____

7. SEALING PROCEDURES

SEAL/FILTER PACK Material	From	To	AMOUNT Sacks or Pounds	METHOD
BENTONITE	0	18	6 Sacks	Dry

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18
Was drive shoe seal tested? ☐ Y ☐ N How? ____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	18	.250	STEEL	☒	☐	☒	☐
4	-5	100	.160	PVC	☐	☒	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
☒ Perforations Method SKILLSAW
☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-80	100	1/8X6	60	4	PVC	☐	☒

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

NENW 11 51N 3W

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

Yield gal./min.	Drawdown	Pumping Level	Time
6			

Water Temp. ____ Bottom Hole Temp ____
Water Quality test or comments: ____
____ Depth first Water encountered ____

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water Y	Water N
8	0	18	Granite Gray	☐	☒
6	18	60	Granite Gray	☐	☒
6	60	83	Granite Brown	☐	☒
6	83	100	Granite Gray	☒	☐

Completed Depth 100' (Measurable)
Date: Started 10/03/96 Completed 10/03/96

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 [signature] Date ____
and
Supervisor or Operator [signature] Date 10/9/96
(Sign Once if Firm Official and Operator)