



RECEIVED

WELL DRILLER'S REPORT

State 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. SEP 9 1975

1. WELL OWNER

Name Marvin Lang
Address 112 Spokane St. Post Falls, Id
Owner's Permit No. 95-75-N-54

7. WATER LEVEL

Department of Water Resources
Northern District Office
Static water level 47 feet below land surface
Flowing? ☐ Yes ☒ No G.P.M. flow _____
Temperature _____ ° F. Quality _____
Artesian closed-in pressure _____ p.s.i.
Controlled by ☐ Valve ☐ Cap ☐ Plug

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe method of abandoning)

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Other Air Blow
Discharge G.P.M. _____ Draw Down _____ Hours Pumped _____

3. PROPOSED USE

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

4. METHOD DRILLED

☐ Cable ☒ Rotary ☐ Dug ☐ Other

5. WELL CONSTRUCTION

Diameter of hole 6 inches Total depth 125 feetCasing schedule: ☒ Steel ☐ Concrete

Thickness	Diameter	From	To
<u>14</u> inches	<u>6</u> inches	<u>1</u> feet	<u>19</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☐ Yes ☒ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ TorchSize of perforation _____ inches by _____ inches
Number _____ From _____ To _____
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feetWell 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 _____ feetGravel packed? ☐ Yes ☒ No Size of gravel _____
Placed from _____ feet to _____ feetSurface seal depth 19-ft Material used in seal ☐ Cement grout
☒ Pudding clay ☒ Well cuttings
Sealing procedure used ☐ Shallow pit ☐ Temporary surface casing
☒ Overbore to seal depth

10.

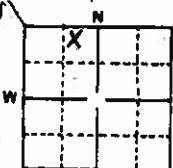
Work started 9-8-75 finished 9-8-75

11. DRILLERS CERTIFICATION

Firm Name Enterprise Drilling Co. Firm No. _____Address Box 404 Post Falls, Id Date 9-7-75Signed by (Firm Official) [Signature]and
(Operator) [Signature]

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____ Block No. _____

County KootenaiNE 1/4 NW 1/4 Sec. 15 T. 50 N. S. R. 5 E. (W)