

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

076789

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

DEC 17 1999

1. WELL TAG NO. D10368

Drilling Permit No:

Other IDWR No.

IDWR/North

2. OWNER

Name BRILES, CHET

Well Number:

983

Address 9775 MOBBS RD

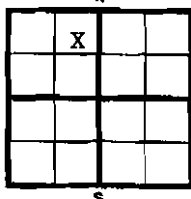
City POST FALLS

State ID

Zip 83854

3. LOCATION OF WELL by legal description

sketch map location must agree with written location



Twp. 51



North or



South

Rge. 06



East or



West

Sec. 01

1/4 NE 1/4 NW 1/4

Gov't Lot

County

KOOTENAI

Lat:

Long:

Address of Well Site SAME AS ABOVE

City HAUSER LAKE

(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

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	8 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18Was 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	-10	-400	.160	PVC	☐	☒	☐

Length of Headpipe

Length of Tailpipe

9. PERFORATIONS/SCREENS

☒ Perforations Method OVERBORE☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-380	-400	1/8X6	44	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

200 ft. below ground Artesian pressure lb.

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

51N 6W 1

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
5			

Water Temp. Bottom Hole Temp

Water Quality test or comments:

Depth first Water encountered 230'

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
8	0	2	Topsoil	☐	☒
8	2	16	Granite Brown Soft	☐	☒
6	16	45	Granite Brown Medium	☐	☒
6	45	125	Granite Gray Medium	☐	☒
6	125	150	Granite Brown Medium	☐	☒
6	150	230	Granite Gray & White Medium	☐	☒
6	230	237	Brown Granite Soft 1.5 GPM	☒	☐
6	237	285	Granite Gray	☐	☒
6	285	323	Granite Light Gray & White	☐	☒
6	323	335	Granite Rose	☒	☐
6	335	400	Granite Gray Medium	☐	☒

Completed Depth 400' (Measurable)
Date: Started 12/7/99 Completed 12/8/99

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 McLeslie Service, Inc. Firm No. 448

Firm Official [Signature] Date 12/8/99

and

Supervisor or Operator [Signature] Date 12/8/99

(Sign Once if Firm Official and Operator)

(Jim McLeslie)