Form 238-7
6/02

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Well ID No.
Inspected by
Twp ____ Rge ____ Sec ____
____ 1/4 ____ 1/4 ____ 1/4
Lat: : : Long: : :

1. WELL TAG NO. D 0033767
DRILLING PERMIT NO. 8/6070 **RECEIVED**
Water Right or Injection Well No. ____
JUN 21 2004

2. OWNER:
Name John & Debra Jones IDWR/North
Address P.O.Box 280
City Spirit Lake State ID Zip 83869

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 54 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 30, ____ 1/4 NE 1/4 NE 1/4
Gov't Lot ____ County Bonner
Lat: : : Long: : :
Address of Well Site 71 St Germaine Rd
City Spirit 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 Material	From	To	Weight / Volume	Seal Placement Method
bentonite	0	18	500lbs	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 435
Was drive shoe seal tested? ☐ Y ☒ N How? ____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1½	435	250	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe 3'6" Length of Tailpipe ____
Packer ☒ Y ☐ N Type K-packer

9. PERFORATIONS/SCREENS PACKER TYPE
Perforation Method ____
Screen Type & Method of Installation telescoping/stainless

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
435	440	30		6	steel	☐	☐
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

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

54N 4W 30

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

Yield gal./min.	Drawdown	Pumping Level	Time
12		435	2hr

Water Temp. cold Bottom hole temp. ____
Water Quality test or comments: clear
Depth first Water Encounter 390

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	18	sand&gravel		
6	18	295	sand&gravel		
	295	318	tan clay		
	318	334	sand&gravel,clay tan		
	334	386	sand&gravel,clay blue		
	386	440	sand&gravel	x	

Completed Depth 440ft (Measurable)
Date: Started 6-2 Completed 6-7-04

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

Company Name Bronson Water Wells Firm No. 360
Principal Driller Clint Bronson Date 6/10/04
and
Driller or Operator II ____ Date ____
Operator I ____ Date ____
Principal Driller and Rig Operator *Required.*
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES