

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D DOO 45124
DRILLING PERMIT NO. 841976
Water Right or Injection Well No. _____

2. OWNER:

Name ROBERT Courtemanche
Address 18100 E 1st ST
City CATALDO State ID Zip 83810

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 48 North ☒ or South ☐
Rge. 2 East ☐ or West ☒
Sec. 13 1/4 N/E 1/4 S/W 1/4
Gov't Lot _____
County KOOTENAI
Lat: _____ Long: _____

Address of Well Site 18147 E 1st ST
City CATALDO

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
<u>Bentonite</u>	<u>0</u>	<u>56</u>	<u>105X</u>	<u>Pour Around P.p</u>

Was drive shoe used? ☒ N ☐ Shoe Depth(s) 56

Was drive shoe seal tested? ☒ N ☐ How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+4</u>	<u>-56</u>	<u>750</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-10</u>	<u>-362</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☒ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill

Screen Type & Method of Installation

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>-302</u>	<u>-342</u>	<u>3/4</u>	<u>34</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
<u>none</u>				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

58 ft. below ground Artesian pressure _____ lb
Depth flow encountered 218 ft. Describe access port or control devices: well cap
48N 2W 13

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

12. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Pumping Level	Time
<u>5 1/2 gpm</u>	<u>Airlift from</u>	<u>362</u>	

Water Temp. 65° Bottom hole temp. _____

Water Quality test or comments: clear no odor

Depth first Water Encounter 15

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>10</u>	<u>Clay Tan</u>		
	<u>10</u>	<u>15</u>	<u>Shale Broken</u>		
	<u>15</u>	<u>18</u>	<u>Shale w/ water</u>		
	<u>18</u>	<u>42</u>	<u>5 gpm Shale Broken</u>		
	<u>46</u>	<u>56</u>	<u>Shale Gray</u>		
	<u>6"</u>	<u>56</u>	<u>218 Shale Gray</u>		
	<u>218</u>	<u>220</u>	<u>Shale Gray w/ water</u>		
			<u>4 gpm</u>		
	<u>220</u>	<u>307</u>	<u>Shale Gray</u>		
	<u>307</u>	<u>308</u>	<u>Shale Gray w/ water</u>		
			<u>1 1/2 gpm</u>		
	<u>308</u>	<u>362</u>	<u>Shale Gray</u>		

RECEIVED
NOV 22 2006
IDWR/North

RECEIVED
NOV 22 2006
IDWR/North

RECEIVED
NOV 01 2006
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Completed Depth 362 (Measurable)

Date: Started 9-6-06 Completed 9-8-06

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 ACTION Drilling inc Firm No. 618

Principal Driller ALVIN CARRIS Date 9-5-06

Driller or Operator II _____ Date _____

Operator I Alvin Carris Date 9-5-06

Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.