Form 238-7
11/97

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

RECEIVED
NOV 19 1999
IDWR/North

77146

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

1. WELL TAG NO. D 10876
DRILLING PERMIT NO. ____
Other IDWR No. 96-99-N-271

2. OWNER:
Name Al and Daryl Kyle
Address E. 9105 Bunco Rd.
City Athol State Id Zip 83801

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

POSTED

Twp. 53 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 35 NE 1/4 (10 acres) SW 1/4 (40 acres) NE 1/4 (160 acres)
Gov't Lot ____ County Kootenai
Lat: : : Long: : :
Address of Well Site 9105 E Bunco
City Athol
(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 Material	From	To	AMOUNT (Sacks or Pounds)	METHOD
Bentonite	0	20	5	Overbored

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 47'
Was drive shoe seal tested? ☒ Y ☐ N How? Air Pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8"	+1	47	.250	Steel	☒	☐	☒	☐
4"	-10	275	SDR 35	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
Perforations Method Saw Cut
Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
275	190	18x6	40	4	PVC	☐	☒
						☐	☐
						☐	☐

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

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

Yield gal./min.	Drawdown	Pumping Level	Time
60			4 Hours

Water Temp. ____ Bottom hole temp. ____
Water Quality test or comments: ____
Depth first Water Encounter 70

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
10	0	8	Soil and Gravel		
10	8	39	Loose Gravel		
10	39	45	Decomposed Granite		
10	45	47	Weathered Granite		
6	47	70	Granite		
6	70	72	Fractured Granite		
6	72	192	Granite		
6	192	193	Fractured Granite		
6	193	227	Granite		
6	227	232	Fractured Granite		
1			with Fractured Quartz	35	
6	232	295	Granite		
6	295	247	Fractured Granite	25	
6	247	275	Granite		

Completed Depth 275 (Measurable)
Date: Started 10-25-99 Completed 10-27-99

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

Company Name Hester Well Drilling Inc Firm No. 528
Firm Official ____ Date 11-16-99
and
Driller or Operator C Mark Hawley Date 11-2-99
(Sign once if Firm Official & Operator)

53 N 3 W 35 FORWARD WHITE COPY TO WATER RESOURCES

SCANNED
APR 15 2009