

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 96.- 94.- N. 376 .

Other IDWR No.

2. OWNER:

2. OWNER:
Name HAROLD MORRIS

Address 12100 E. NUNN RD.

City **ATHOL** State ID Zip **83801**

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
 W E
 Twp. 53N North ☒ or South ☐
 Rge. 2W East ☐ or West ☒
 Sec. 31 1/4 NW 1/4 NE 1/4
 Gov't Lot 10 acres County KOOTENAI 160 acres

Address of Well Site 1/4 ML PAST END OF
City

Lt.	Blk.	Sub. Name
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4. PROPOSED USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

6. DRILL METHOD

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	180	20	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 180'

Was drive shoe seal tested? Y ☐ N ☒ How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	0	180	250	STEEL	☒	☐	☒	☐
4"	180	500	40PSI	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

X Perforations Method 3/8" DRILL

☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Linear
500	440	3/8"	300	4"	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

80 ft. below ground Artesian pressure lb.

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

NWNE 31 53N 2W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
12 EST.	100%	500'	1 HR.

Water Temp. COLD Bottom hole temp. COLD

Water Quality test or comments: CLEAN & CLEAR

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

[illegible]

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 **UNITED DRILLING INC.** Firm No. **414**

Firm Official: Jim R. Callahan Date 10-27-94

and

Supervisor or Operator Clint Tenney Date 10/26/94

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES