

Form 238-7
7/98
Starships Consulting and
Management Services

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

RECEIVED

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

4/20/00
1. WELL TAG NO. D0013059
Drilling Permit No: APR 14 2000
Other IDWR No. 763796
2. OWNER
Name Jai Nelson
Address 7325 Cody Road
City Coeur d'Alene State ID Zip 83814
3. LOCATION OF WELL by legal description
sketch map location must agree with written location

N			
S			

Twp. 48 ☒ North or ☐ South
Rge. 4 ☐ East or ☒ West
Sec. 5 1/4 NW 1/4 NW 1/4
Gov't Lot _____ County KOOTENAI
Lat: : : Long: : :
Address of Well Site HAMAKER PARCEL #.
City COEUR D'ALE

(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	
WELL SEAL				
BENTONITE	0	18	3 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	2	18	.250	STEEL	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

70 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

48 N 41 5

11. WELL TESTS:

☐ Pump	☐ Bailer	☒ Air	☐ Flowing Artesian
Yield gal./min.	Drawdown	Pumping Level	Time
1/2			

Water Temp. _____ Bottom Hole Temp _____

Water Quality test or comments: _____

Depth first Water encountered 70

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

				Water	
Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Y	N
8	0	8	TOPSOIL	☐	☒
8	8	18	Granite DECOMP	☐	☒
6	18	36	Granite SALT & PEPPER	☐	☒
6	36	45	Granite BLACK & GREEN	☐	☒
6	45	62	Granite WHITE & BROWN	☐	☒
6	62	75	Granite WHITE GREEN BROWN W/	☒	☐
6	75	420	Granite BLACK SOME WHITE	☐	☒
6	420	425	Granite SOFT W/WATER APX 2-3 G	☒	☒
6	425	635	Granite BLACK & WHITE HARD	☐	☒

Completed Depth 635 (Measurable)
Date: Started 3/30/00 Completed 4/4/00

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 R20 WellService Inc. Firm No. 448

Firm Official [Signature] Date 4-13-00

and Supervisor or Operator [Signature] Date 4-11-2000

(Sign Once If Firm Official and Operator)

Louie Hanner

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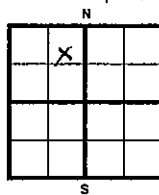
WELL DRILLER'S REPORT

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

1. WELL TAG NO. D0013328
Drilling Permit No. _____
Other IDWR No. 765378

2. OWNER
Name Jai Nelson Well #2
Address 7325 Cody Road
City Coeur d'Alene State ID Zip 83814

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



Twp. 48 ☒ North or ☐ South
Rge. 4 ☐ East or ☒ West
Sec. 5 1/4 NW 1/4 NW 1/4

Gov't Lot _____ County KOOTENAI

Lat. : : Long: : :

Address of Well Site HAMAKER PARCEL #38
City COEUR D'ALE

(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	
well seal				
BENTONITE	0	18	4 bags	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
4	-5	300	.160	PVC	☐	☒	☐	☐
6	2	18	.250	steel	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method skill saw

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
260	300	1/8x6	170	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

100 ft. below ground Artesian pressure _____ lb.

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

48N 4W 5

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>5</u>		<u>300</u>	<u>1 hour</u>

Water Temp. cold Bottom Hole Temp cold

Water Quality test or comments: _____

Depth first Water encountered 115

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

				Water	
Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Y	N
8	0	13	Clayish soil tan	☐	☒
8	13	18	Decomposed granite	☐	☒
8	18	115	Granite black & white	☐	☒
8	115	118	Granite black & green	☒	☐
8	118	300	Granite black & white soft spots	☐	☒

Completed Depth 300 (Measurable)
Date: Started 6/22/00 Completed 6/22/00

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 H2O Well Service, Inc. Firm No. 448

Firm Official [Signature] Date 6-26-00

and Supervisor or Operator [Signature] Date 6-26-00

(Sign Once if Firm Official and Operator)

Louie Hanner

Once Lt. Fire Chief and Operator
Mike Halterman