Form 238-7
9/82

C

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

USE TYPEWRITER OR
BALLPOINT PEN

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

N

1. WELL OWNER

Name MATT & LYNDA PFEIFFER
Address 12700 S. ROSE CREEK RD
HARRISON, ID.
Owner's Permit No. 94-92-N-15

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement
☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other ________ (specify type)

4. METHOD DRILLED

☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other ________

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other ________

Thickness		Diameter		From		To	
.250	inches	6	inches	+3	feet	57	feet
	inches		inches		feet		feet
	inches		inches		feet		feet
PVC	inches	4	inches	200	feet	250	feet

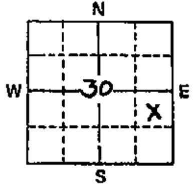
Was casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? PVC ☒ Yes ☐ No DRILL
How perforated? ☐ Factory ☐ Knife ☐ Torch
Size of perforation 3/8 inches by 3/8 inches

Number		From		To	
500	perforations	190	feet	250	feet
	perforations		feet		feet
	perforations		feet		feet

Well screen installed? ☐ Yes ☒ No
Manufacturer's name ________
Type ________ Model No. ________
Diameter ____ Slot size ____ Set from ____ feet to ____ feet
Diameter ____ Slot size ____ Set from ____ feet to ____ feet
Gravel packed? ☐ Yes ☒ No ☐ Size of gravel ________
Placed from ________ feet to ________ feet
Surface seal depth 57 Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐
Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth
Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld
☐ Cemented between strata
Describe access port NONE

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name ________
Lot No. ________ Block No. ________
County KOOTENAI
NE ¼ SE ¼ Sec. 30, T. 49N N/S, R. 1W E/W.

7. WATER LEVEL

Static water level 23 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow ________
Artesian closed-in pressure ________ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature COLD °F. Quality GOOD
Describe artesian or temperature zones below.

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other ________

Discharge G.P.M.	Pumping Level	Hours Pumped
10	247	1

9. LITHOLOGIC LOG 081732

Bore Diam.	Depth From	Depth To	Material	Water Yes	Water No
8	0	8	SOIL		X
	8	17	GRAVEL	X	
	17	26	CLAY TAN		X
	26	57	DEC. SHALE		X
6	57	93	DEC. SHALE	X	
	93	124	SHALE GRAY		X
	124	127	SHALE BROKEN	X	
	127	250	SHALE GRAY	X	

RECEIVED
SEP 30 1992
Department of Water Resources

SEP 10 1992

MICROFILMED
DEC 04 1992

10. Work started 7-30-92 finished 8-3-92

11. DRILLERS 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. No. 414
Address P.O.BOX 2499 Date 8-3-92
CDA, ID 83814
Signed by (Firm Official) V.P.
and
(Operator)

TDK

USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT