Form 238-7
9/82

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

USE TYPEWRITER OR BALLPOINT PEN

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.

POSTED

96B N

1. WELL OWNER

Name EMBER TALBOT

Address RT 2 Box 280 St. Maries Id. 83861

Owner's Permit No. 94-87-N-007

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 +	1 feet	370 feet
inches	inches	feet	feet
inches	inches	feet	feet
inches	inches	feet	feet

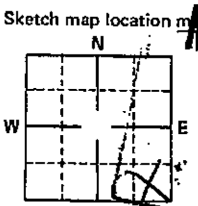
Was casing drive shoe used? ☒ Yes ☐ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☐ Yes ☒ No
How perforated? ☐ Factory ☐ Knife ☐ Torch
Size of perforation ____ inches by ____ inches

Number	From	To
perforations	feet	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 20 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 ________

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name ________

Lot No. ____ Block No. ____

County Kootenai

SE ¼ SE ¼ Sec. 1, T. 47 N/S, R. 3 E/W.

MICROFILMED
OCT 17 1988

7. WATER LEVEL

Static water level 90 feet below land surface.
Flowing? ☐ Yes ☒ No G.P.M. flow —
Artesian closed-in pressure ____ p.s.i.
Controlled by: ☐ Valve ☐ Cap ☐ Plug
Temperature ____ °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
30+	450	1 hr.

9. LITHOLOGIC LOG

Bore Diam.	Depth From	Depth To	Material	Water Yes	Water No
8	0	80	Sand & Clay		X
	80	92	Basalt Soft		X
8	92	184	Brown Clay		X
6	184	370	Clay 7 Silt		X
6	370	450	Shale & Decomposed Granet	X	

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Department of Water Resources

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Department of Water Resources
Northern District Office

G06750

10.

Work started 7/5/87 finished 7/8/87

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. Firm No. 414

Address P. O. BOX 2499 CD'A ID. 83814 Date 7/28/87

Signed by (Firm Official) [signature]

and

(Operator) Tim Volking

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