

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
_____ 1/4	_____ 1/4	_____ 1/4	
Lat: _____		Long: _____	

1. WELL TAG NO. D D0040134
 DRILLING PERMIT NO. _____
 Water Right or Injection Well No. _____

2. OWNER:

Name Warren J Harmon
 Address 29894 So. Bow Rd.
 City St. Maries State ID Zip 83861

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 47 North ☒ or South ☐
 Rge. 2 East ☐ or West ☒
 Sec. 20 1/4 SW 1/4 SW 1/4
 Gov't Lot _____ County Kootenai
 Lat: _____ Long: _____
 Address of Well Site 29894 So. Bow Rd.
 City St. Maries
 (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 Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	50	175X	Pour Around Pipe

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 308
 Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	12	208	250	Steel	☒	☐	☒	☐
4"	12	440	160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
375	415	3/4	40	4"	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
none				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

+ 2 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered 340 ft. Describe access port or control devices:
well cap

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
8 gpm	Air lift	from 440'	

Water Temp. 48° Bottom hole temp. _____
 Water Quality test or comments: Clear no odor
 Depth first Water Encounter 34

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8"	0	3	Clay Brown		
	3	18	Basalt Broken		
	18	32	Clay Gray		
	32	34	Clay - Sandy w/water		
			5 gpm - Sandy - Dirty		
	34	55	Clay - Gray		
	55	67	Clay - Tan		
	67	90	Basalt - Gray		
	90	125	Clay - Tan w/shale		
	125	154	Clay - Gray		
	154	180	Clay - Brown w/shale		
	180	308	Shale - Brown + Gray		
6"	308	328	Shale - Brown + Gray		
	328	330	Shale - Brown + Gray		
			w/water 19gpm		
	330	365	Shale - Gray		
	365	366	Shale - Gray w/water		
			2 gpm		
	366	422	Shale - Gray		
	422	424	Shale - Gray w/water		
			5 gpm		
	424	440	Shale - Gray		
8 gpm Total					

Completed Depth 440 (Measurable)
 Date: Started 5-12-05 Completed 5-23-05

14. DRILLER'S CERTIFICATION

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

Company Name Action Drilling Inc. Firm No. 618

Principal Driller Alvin Carris Date 5-20-0

Driller or Operator II _____ Date _____

Operator I Alvin Carris Date 5-20-0

Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.