

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0057307

Drilling Permit No. _____

Water right or injection well # _____

2. OWNER

Name Marti Kast

Address 15923 E. 21st Street

City Spokane Valley State WA Zip 99037

3. WELL LOCATION:

Twp. 49 North ☒ or South ☐ Rge. 2 East ☒ or West ☐

Sec. 34 1/4 SW 1/4 NE 1/4

Gov't Lot _____ County Shoshone

Lat. 47 ° 37.568 (Deg. and Decimal minutes)

Long. 116 ° 11.280 (Deg. and Decimal minutes)

Address of Well Site Cedar Island - Lot 11

City Kingston

(Give at least name of road • Distance to Road or Landmark)

Lot _____ Blk. _____ Sub. Name _____

4. USE:

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

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES

Seal material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method/procedure
Grout	8	45	9.5 ft³	Tremmie Pipe
Granular Bentoinite	0	8	200 lbs	Dry Pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6	+2	100	.250	Steel	☒	☐	☐	☒
4	-20	120	.200	PVC	☐	☒	☐	☐

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

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method Air Perforator and Drill

Manufactured screen ☐ Y ☒ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
90	100	1/4 x 1	100	6"	Steel	.250
80	120	3/8" R	120	4"	PVC	.200

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device Steel Cap Welded

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 18 Static water level (ft) 18

Water temp. (°F) _____ Bottom hole temp. (°F) _____

Describe access port 3/4" Plug

Well test:

Test method:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
100 %	10+	1 Hour	☐	☐	☒	☐

Water Quality test or comments: Clear, Cold, No Smell

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water Y N
12	0	1	Topsoil	X
12	1	28	Clay mix with sand and gravel	X
12	28	45	Silt and clay with a trace of gravel	X
8	45	62	Silt and clay brown	X
8	62	67	Broken shale gravels	X
8	67	82	Shale brown/tan soft	X
8	82	100	Shale blue/gray medium	X
6	100	120	Shale gray/blue medium	X

RECEIVED

JAN 04 2010

SCANNED IDWR / NORTH

MAR 31 2010

UNITED CROWN
PUMP & DRILLING
3125 W Hayden Ave. Hayden ID 83835
Office (800) 682-9641 (208) 772-7867

Completed Depth (Measurable) 120

Date: Started 12-21-09 Completed 12-23-09

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 United Crown Pump & Drilling Co. No. 636

*Principal Driller Jason Beckham Date 12-28-09

*Driller Jason Beckham Date 12-29-09

*Operator II _____ Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.