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NORTHERN REGION

Form 238-7
3/95

IDAHO DEPARTMENT OF WATER RESOURCES

(POSTED)

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

097929

Office Use Only
Inspected by ______
Twp ____ Rge ____ Sec ____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. 92-97-N-8

Other IDWR No. ______

2. OWNER:
Name Dane Spröed
Address Rt 4 Box 220 AA
City St maries State Id Zip 83861

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

Twp. 44 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 35 G4C46+E2 1/4 SE 1/4 (10 acres, 40 acres, 160 acres)
Gov't Lot 5 County Benewah
Lat: : : Long: : :
Address of Well Site off 1-46 take Sanders Rd to Santa Creek Rd - go 3/4 mi on L. Emida
(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 Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	1	20	400 lb	Tremmie

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 40
Was drive shoe seal tested? ☒ Y ☐ N How? Pound

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	1	40	.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:
5 ft. below ground Artesian pressure — lb.
Depth flow encountered — ft. Describe access port or control devices: —

11. WELL TESTS:
☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
EST 8	By air lift		

Water Temp. cold Bottom hole temp. cold
Water Quality test or comments: ______
Depth first Water Encountered ______

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	1	3	Top Soil		✓
8	3	40	Brown Clay		✓
6	40	200	Hard Shale		✓
6	200	265	Med Shale		✓
6	265	325	Fractured Shale	✓	

Completed Depth 325 (Measurable)
Date: Started 11-7-97 Completed 11-10-97

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 Precision Drilling Firm No. 558

Firm Official [signature] Date 11-10-97
and
Supervisor or Operator [signature] Date 11-10-97
(Sign once if Firm Official & Operator)

SE 35 44N 3W

FORWARD WHITE COPY TO WATER RESOURCES