

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 0041263  
DRILLING PERMIT NO. PO Box 64  
Water Right or Injection Well No. 838842

2. OWNER:  
Name Tom Daniels  
Address PO Box 64  
City Harrison State ID Zip 83833

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. 4 East ☐ or West ☒  
Sec. 35 1 4 9/4/14 14/14  
Gov't Lot \_\_\_\_\_  
County Kootenai  
Lat: \_\_\_\_\_ Long: \_\_\_\_\_  
Address of Well Site 1594 Harlow Pt Rd  
City Harrison  
City \_\_\_\_\_  
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    | 20 | 105    | 15     | Pour                  |

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 138'  
Was drive shoe seal tested? ☒ Y ☐ N How? air

8. CASING/LINER:

| Diameter | From | To  | Gauge | Material | Casing                              | Liner                    | Welded                              | Threaded                 |
|----------|------|-----|-------|----------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 6        | +12  | 138 | 2.5   | Steel    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_  
Packer ☐ Y ☒ N Type \_\_\_\_\_

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method \_\_\_\_\_

Screen Type & Method of Installation \_\_\_\_\_

| From | To | Slot Size | Number | Diameter | Material | Casing                   | Liner                    |
|------|----|-----------|--------|----------|----------|--------------------------|--------------------------|
|      |    |           |        |          |          | <input type="checkbox"/> | <input type="checkbox"/> |

10. FILTER PACK

| Filter Material | From | To | Weight | Volume | Placement Method |
|-----------------|------|----|--------|--------|------------------|
|                 |      |    |        |        |                  |

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

34' ft. below ground Artesian pressure \_\_\_\_\_ lb.  
Depth flow encountered 50' Describe access port or control devices: COB

12. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

| Yield gal./min. | Discharge | Drawdown | Time  |
|-----------------|-----------|----------|-------|
| 50 +            |           |          | 2 hrs |

Water Temp. 51° Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: clear no odor

Depth first Water Encounter 50

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

| Bore Dia | From | To  | Remarks: Lithology, Water Quality & Temperature | Water | Y | N |
|----------|------|-----|-------------------------------------------------|-------|---|---|
| 8        | 0    | 80  | Broken Basalt                                   |       |   |   |
|          | 80   | 95  | Basalt soft                                     |       |   |   |
|          | 95   | 120 | Basalt w/Clay                                   |       |   |   |
|          | 120  | 150 | Sand Stone                                      |       |   |   |

SCANNED

JUN - 9 2006

RECEIVED  
MAY 23 2006  
IDWR/North

Completed Depth 170 (Measurable)

Date Started 3/22/06 Completed 3/23/06

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 Always Drilling Inc. Firm No. 810

Principal Driller Stanley K. Wolfe Date 5/21/06

Driller or Operator II Donna Date 5/21/06

Operator I \_\_\_\_\_ Date \_\_\_\_\_

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

47 N 4 W 35

FORWARD WHITE COPY TO WATER RESOURCES



SWNE 2

34

35

48N04W

SWNW

95

3

NENE 1

47N04W