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Form 238-7
11/97

JUL 24 2002

IDWR/North07

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Inspected by _____
Twp ____ Rge ____ Sec ____
____ 1/4 ____ 1/4 ____ 1/4
Lat ____ Long ____

1. WELL TAG NO. D 22407
DRILLING PERMIT NO 27850.9
Other IDWR No. _____

2. OWNER:
Name Paul Kopczynski
Address 668 South Essex Drive
City Post Falls State ID Zip 83854

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

N / W / E / S — X

Twp. 50 North ☒ or South ☐
Rge. 5 East ☐ or West ☒
Sec. 30, SE 1/4 (10 acres) NE 1/4 (40 acres) ____ 1/4 (160 acres)
Gov't Lot ____ County Kootenai
Lat ____ Long ____
Address of Well Site Carpenter Loop Road
City _____
(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
Casing Seal	0	27.5'	15sacks	Dry

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 27.5'
Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	1.5'	27.5'	.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:
90' ft. below ground Artesian pressure ____ lb.
Depth flow encountered 432' ft. Describe access port or control devices: _____

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

Yield gal/min	Drawdown	Pumping Level	Time
6-7			

Water Temp _____ Bottom hole temp _____
Water Quality test or comments _____
Depth first Water Encountered 432'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
10"	0	1	Topsoil		X
10"	1	27	Granite, decomposed, tan		X
6"	27	75	Granite, tan, soft		X
6"	75	95	Granite, tan, broken		X
6"	95	112	Granite, black, med		X
6"	112	145	Granite, white, fractured		X
6"	145	175	Granite, black, med		X
6"	175	234	Granite, salt & pepper, hard		X
6"	234	236	Granite, white, fractured		X
6"	236	280	Granite, salt & pepper, med		X
6"	280	360	Granite, salt & pepper, fractured		X
6"	360	372	Granite, white, hard		X
6"	372	432	Granite, salt & pepper, med		X
6"	432	436	Granite, salt & pepper, fractured w/water	X	
6"	436	460	Granite, salt & pepper, med		X

Completed Depth 460' (Measurable)
Date: Started 6/11/2002 Completed 6/13/2002

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

Company Name Vermillion Well Drilling Firm No 467
Firm Official Kristina Vermillion Date 7/6/2002
and
Driller or Operator _____ Date 7/7/2002
(Signatures of Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

50N 3W 30

SCANNED
DEC 11 2013