

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0051905
DRILLING PERMIT NO. 846602
Water Right or Injection Well No. _____

ENTERED

2. OWNER:

Name Del High + Cindi L Dennis
Address 108 Upper Granite loop
City Arden State Id. Zip 83804

3. LOCATION OF WELL by legal description:

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

Twp. 54 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 22 1/4 SE 1/4 SE 1/4
Gov't Lot _____
County Kootenai
Lat: _____ Long: _____
Address of Well Site SAME 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 Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	23	500lbs	Pour

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 24
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6 +1	24	260	Steel		☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method VB - Electric Drill
Screen Type & Method of Installation Expanders (PVC liner)

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-6	303	1/8 inch	100	4"	PVC	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

98 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 99 ft. Describe access port or control devices: Welded CAP

12. WELL TESTS:

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>1</u>	<u>Total</u>	<u>285</u>	<u>3 hrs</u>

Water Temp. Cold Bottom hole temp. Cold

Water Quality test or comments: Good

Depth first Water Encounter 98

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
12	0	23	Clay + Dec. Granite		☒
6	23	303	Decomposed Granite	☒	
			Encounter Water at 98'		

RECEIVED
MAY 16 2007
IDWR/North

RECEIVED
JUL 0 2007
IDWR/North

SCANNED

JAN 31 2014

Completed Depth 303 (Measurable)

Date: Started 5-9-07 Completed 5-10-07

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 Disco Drilling Firm No. 638

Principal Driller Lenny R. Cowden Date 5-11-07

and Driller or Operator II _____ Date _____

Operator I _____ Date _____

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

54 N 3W 22