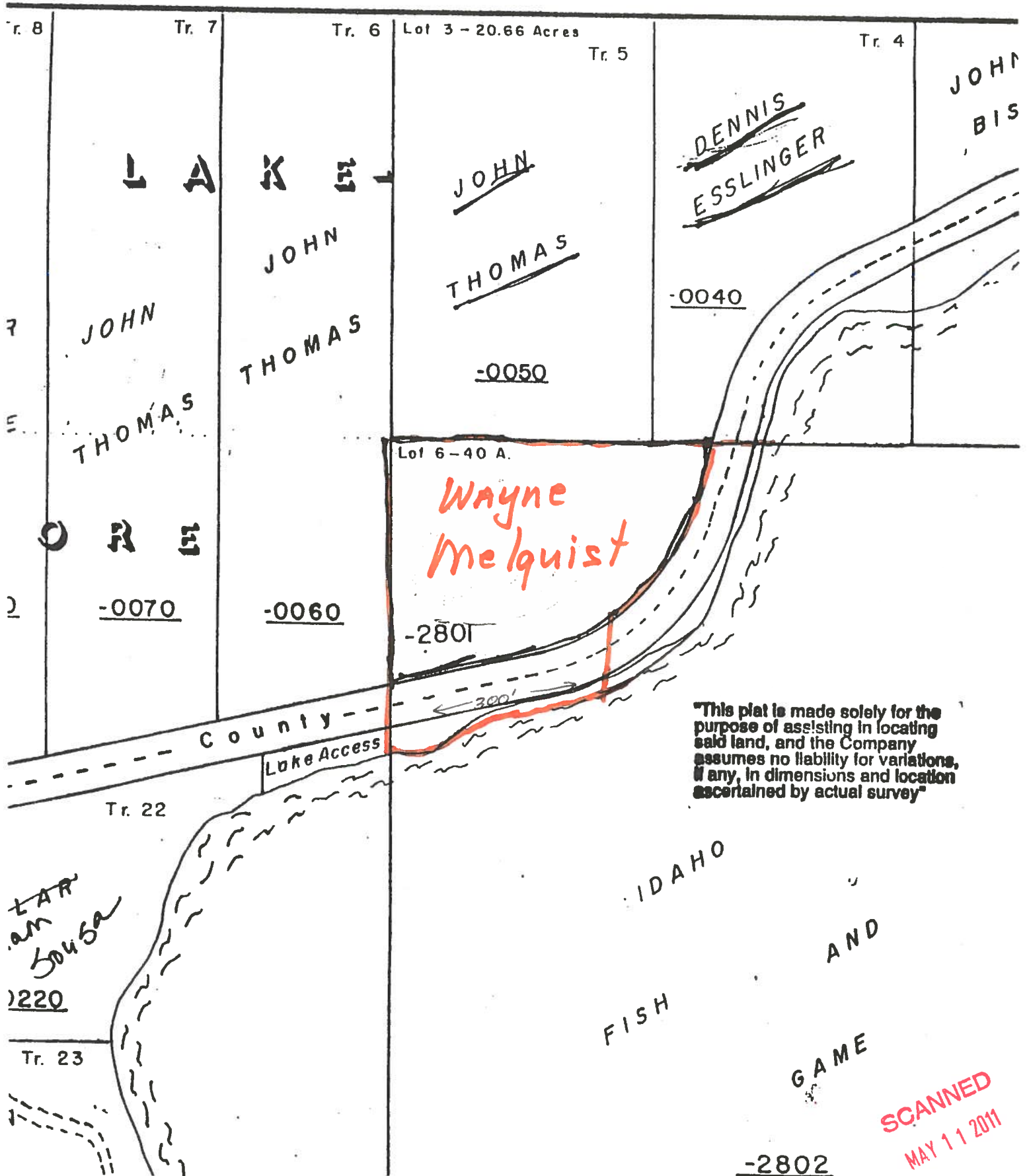


Township 46 N



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 D 00 22 812
DRILLING PERMIT NO. 787-383
Other IDWR No. _____

2. OWNER: Wayne Melquist
Name _____
Address 600 S. Walnut Rd. Box 25
City Boise State ID Zip 83707

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

N		X		E	
W		X		E	
S		X		E	

Twp. 46 North ☒ or South ☐
Rge. 3 East ☐ or West ☒
Sec. 3 1/4 NW 1/4 NE 1/4
Gov't Lot 6 County Benewah
Lat: _____ Long: _____
Address of Well Site 1611 Round Lake Rd. City St. Maries
(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			AMOUNT		METHOD
Material	From	To	Sacks or Pounds		
<u>Bentonite</u>	<u>0</u>	<u>19</u>	<u>65X</u>		<u>Pour Around Pipe</u>

Was drive shoe used? ☒ N Shoe Depth(s) 19
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+1</u>	<u>-19</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-5</u>	<u>-500</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

Perforations _____ Method Drill
Screens _____ Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>-460</u>	<u>-480</u>	<u>1"</u>	<u>10</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

91 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 375 ft. Describe access port or control devices: well cap

46 N 3 W 3 FORWARD WHITE COPY TO WATER RESOURCES

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>109pm</u>	<u>Airlift from 500'</u>		

Water Temp. 50° Bottom hole temp. _____
Water Quality test or comments: Clear no odor
144 ← Depth first Water Encounter

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>12</u>	<u>Clay Tan w/shale</u>		
	<u>12</u>	<u>19</u>	<u>Shale - Gray</u>		
<u>6"</u>	<u>19</u>	<u>47</u>	<u>Shale - Gray</u>		
	<u>47</u>	<u>118</u>	<u>Shale - Tan</u>		
	<u>118</u>	<u>144</u>	<u>Shale - Gray</u>		
			<u>1 gal @ 144</u>		☒
	<u>144</u>	<u>167</u>	<u>Shale - Gray</u>		
	<u>167</u>	<u>235</u>	<u>Shale - Gray - Hard</u>		
	<u>235</u>	<u>246</u>	<u>Shale - Tan</u>		
	<u>246</u>	<u>285</u>	<u>Shale - Gray</u>		
	<u>285</u>	<u>297</u>	<u>Shale - Tan - Broken</u>		
	<u>297</u>	<u>375</u>	<u>Shale - Gray</u>		
	<u>375</u>	<u>385</u>	<u>Shale - Gray - Broken</u>		☒
			<u>With Water to gal</u>		
	<u>385</u>	<u>476</u>	<u>Shale Gray</u>		
	<u>476</u>	<u>478</u>	<u>Shale Gray w/water</u>		☒
			<u>3 gal</u>		
	<u>478</u>	<u>500</u>	<u>Shale Gray</u>		

RECEIVED

NOV - 2002

IDWR/North

Completed _____ Depth 500 (Measurable)
Date: Started 10-2-02 Completed 10-8-02

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 All-Ways Drilling Inc. Firm No. 510
Firm Official Paul K. Kuehl Date 10-27-02
and
Driller or Operator Alvin Carris Date 10-27-02
(Sign once if Firm Official & Operator)