

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTLocation Corrected by IDWR To:
T47N R03W Sec. 34 SENESW
By: mciscell 2013-10-181. WELL TAG NO. D D0056494
Drilling Permit No. 887547

Water right or injection well # _____

2. OWNER: Timothy M. Ritchey
Name _____Address 238 S. 10th St.City St. Maries State ID Zip 83861

3. WELL LOCATION:

Twp. 47 North ☒ or South ☐ Rge. 3 East ☐ or West ☒Sec. 34 1/4 N/W 1/4 N/E 1/4Gov't Lot _____ County _____
Lat. N 47° 22.557 (Deg. and Decimal minutes)Long. W 116° 42.319 (Deg. and Decimal minutes)Address of Well Site 5622 E. Holiday Rd.
City Harrison

(Give at least name of road + Distance to Road or Landmark)

Lot. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection
☐ Other _____

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
Granular	0	-60	18 Sacks	Pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6"	12	-58	.250	Steel	☐	☐	☐	☒
4"	-20	-300	160	PVC Plastic	☐	☒	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method DrillManufactured screen ☐ Y ☒ N Type _____Method of installation Set with Drill

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
-240	-300	3/4	60	4"	PVC Plastic	160 Psi

Length of Headpipe N/A Length of Tailpipe N/APacker ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
N/A				
N/A				

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____Describe control device Well Cap47N 03W 34

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 175 Static water level (ft) 226Water temp. (°F) 52° Bottom hole temp. (°F) _____Describe access port Well Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	2 Gpm	1 hour

Test method:

Pump ☐ Bailer ☐ Air ☒ Flowing artesian ☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
10	0	3	Clay		
	3	20	Broken Soft basalt		
	20	45	Broken Med basalt		
	45	60	Med Basalt		
6	60	140	med Basalt		
	140	160	med Basalt		
	160	175	med Basalt		
	175	180	med Basalt		
	180	195	med Basalt		
	195	220	Hard Basalt		
	220	240	Hard Basalt		
	240	260	Med Basalt		
	260	280	Soft Basalt		
	280	300	Soft Basalt w/clay		

RECEIVED

OCT 08 2009

IDWR/North

ENTERED

Completed Depth (Measurable): 300Date Started: 9-2-09 Date Completed: 9-4-09

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 Action Drilling Co. No. 618*Principal Driller Alvin Carris Date _____*Driller Alvin Carris Date _____*Operator II Matt Hansen Date 10-2-09

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.