

PAGE 1
DATE 6/03/2006

VALUATION SUMMARY SHEET

TIME: 11:27:12
PROCESS NUMBER: 41

002500100110A

EFFECTIVE DATE: 01/01/2006
EXPIRATION DATE: 00/00/0000

NAME: NELSON, CHAD E

TAX CODE AREA: 9260000

LEGAL: 1995 MARLETTE
27X52

ADDRESS: 20 BUTLER DR

ST MARIES ID 83861 OLD PARCEL #: MH002500100110T

CAI-SHI	SY	QUANTITY	UN-MARKET VALUE	HO VALUE	HO EXEMPT	CB VALUE	OTHER EXEMP
46	2005		23,180	23,180	11,590		
47	2006		1,560	1,560	780		

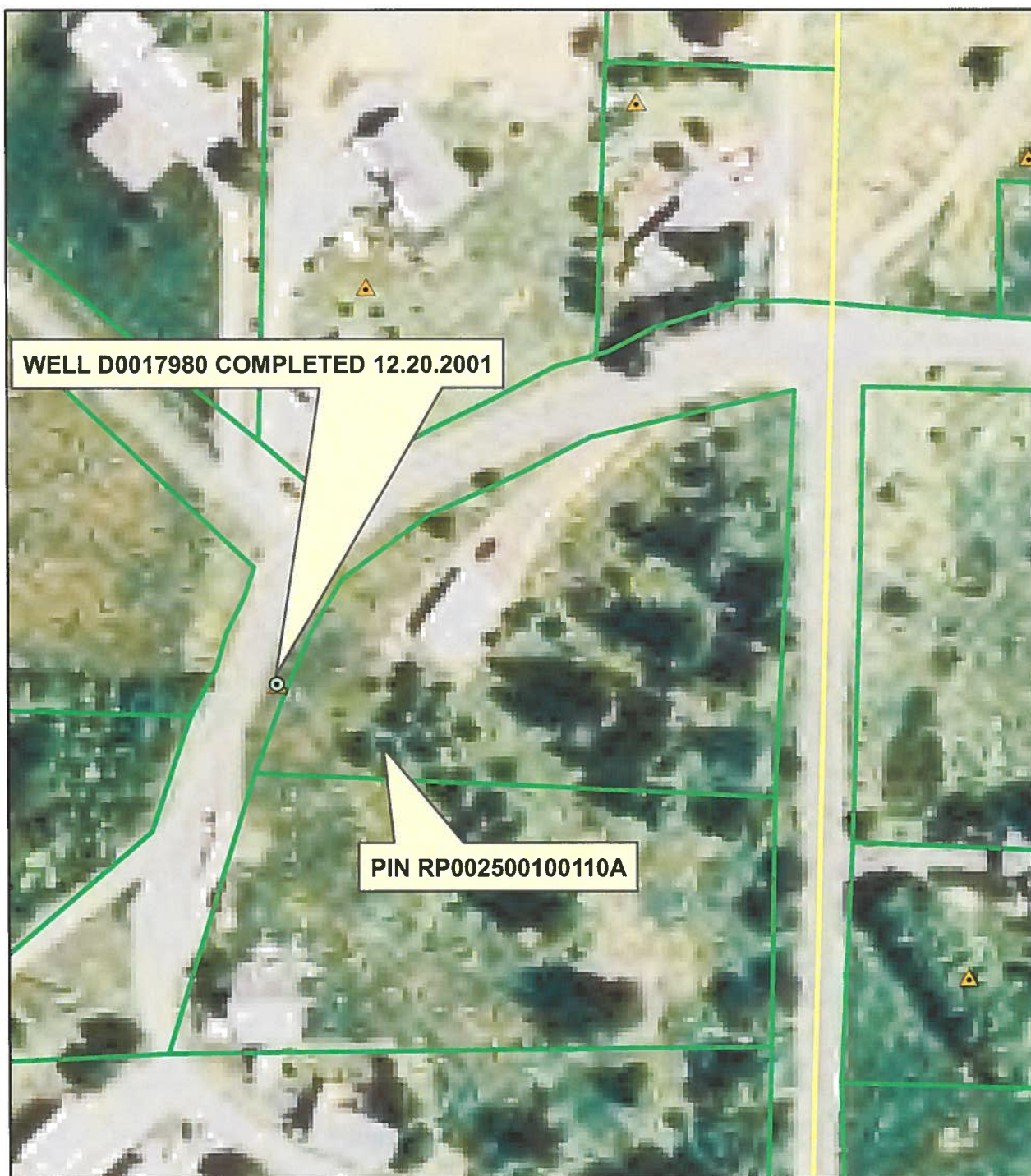
TOTALS: 24,740 24,740 12,370

COMMENTS:
CHANGED/OLD#> MH46N02W366000T
KAREN

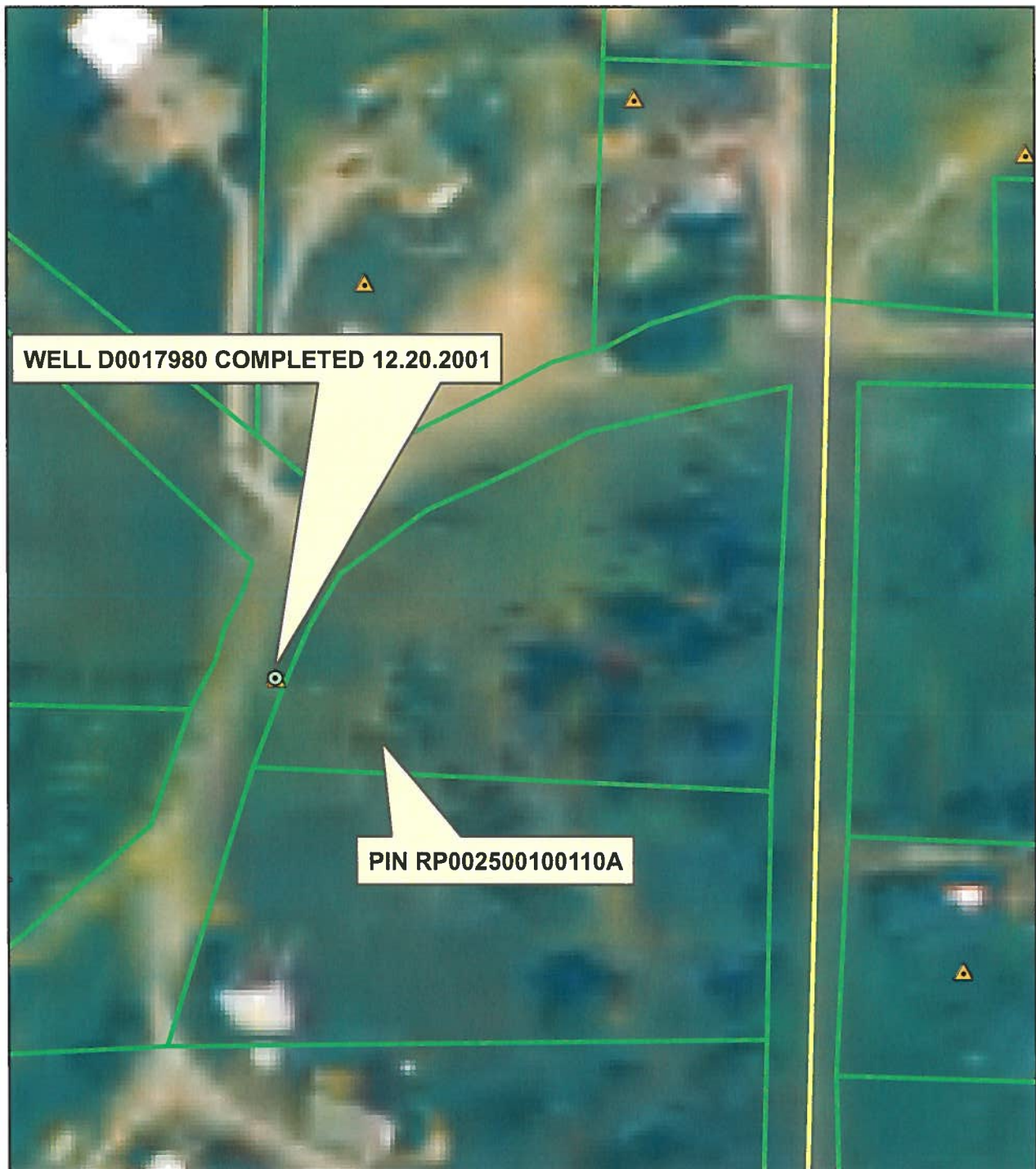
DEED REFERENCES: 1
DATE: 03/18/2005
MUELLER, B
TITLE CERT
CAMA AREA #: 11
RELATED PARCELS: RP002500100110A
SUB-SYS: HOMEOWNERS: YES
ZONING:
PHOTO NUMBER:
MAP NUMBER:
INSP YEAR: 2006
PARCEL TYPE: SL
LOCATION CODE: 0001
SW UNITS:
SW TYPES:

TAX SPECIALS:
995

91-7460 (2006) NELSON PIN RP002500100110A



91-7460 (2004) NELSON PIN RP002500100110A



IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

RECEIVED

JAN 30 2002

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

1. WELL TAG NO. D D0017980
DRILLING PERMIT NO. 772528
Other IDWR No. _____

11. WELL TESTS:

☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Pumping Level	Time
100 g.p.m.	Air lift from 330		

Water Temp. 54° Bottom hole temp. _____

Water Quality test or comments: Clear no odor

Depth first Water Encounter 325

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8"	0	1	Top Soil		
	1	14	Clay-Tan		
	14	20	Sand-Tan		
	20	57	Clay-Tan-Sandy		
	57	60	Clay-Tan-Sandy w/ Basalt		
	60	70	Clay-Tan-Sandy		
	70	118	Clay-Tan-Sandy w/ a little Basalt		
	118	160	Clay-Brown w/ Basalt		
6"	160	177	Basalt Gray		
	177	290	Clay-Gray w/ Basalt		
	290	325	Clay-Soft-Gray		
	325	330	Gravel-Course		X
			100 g.p.m.		

2. OWNER: Jim Arrhenius
Name _____
Address 69 Milwaukee Rd.
City St. Maries State ID Zip 83861



3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
W X E
S
Twp. 46 North ☒ or South ☐
Rge. 2 East ☐ or West ☒
Sec. 16 1/4 SW 1/4 NW 1/4
Gov't Lot _____ County Benevolence
Lat: _____ Long: _____
Address of Well Site Cottonwood Drive
+ Butler Drive City St. Maries
(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Bk. _____ 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	
Bentonite	0	45	135x	Pour Around Pipe

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 160

Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	2 -160	250	Steel	☒	☐	☒	☐
4"	5 -330	160	PVC	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

Perforations Method Drill
Screens Screen Type _____

From To	Slot Size	Number	Diameter	Material	Casing	Liner
-290-330	1/2	40	4"	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

62' ft. below ground Artesian pressure _____ lb.

Depth flow encountered 325 ft. Describe access port or control devices: Well Cap

46N 2W 16

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 At-ways Drilling Inc. Firm No. 510

Firm Official Stanley Wolf Date 12-22-02

and Driller or Operator Alvin Carr Date 12-21-01

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES