

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources within 30 days after the completion or abandonment of the well.

POSTED

JAN 30 1978

1. WELL OWNER Name <u>Leslie G. Murray</u> Address <u>2126 E. 2450 N.</u> <u>Oak Harbor, Wa. 98277</u> Owner's Permit No. _____		7. WATER LEVEL Static water level <u>140</u> feet below land surface Flowing? ☐ Yes ☒ No G.P.M. flow <u>0</u> Temperature _____ ° F. Quality _____ Artesian closed-in pressure _____ p.s.i. Controlled by ☐ Valve ☐ Cap ☐ Plug																																															
2. NATURE OF WORK <u>91-77-N-14-1</u> ☐ New well ☒ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____		8. WELL TEST DATA ☐ Pump ☐ Bailer ☐ Other Discharge G.P.M. _____ Draw Down _____ Hours Pumped _____ <u>21 GPM</u> <u>Est. Airlift</u>																																															
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Other (specify type) _____ ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection		9. LITHOLOGIC LOG <table border="1"><thead><tr><th rowspan="2">Hole Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8"</td><td>265</td><td>280</td><td>Broken Basalt</td><td></td><td>x</td></tr><tr><td></td><td>280</td><td>300</td><td>Red Clay</td><td></td><td>x</td></tr><tr><td></td><td>300</td><td>320</td><td>Broken Basalt</td><td>x</td><td></td></tr><tr><td></td><td>320</td><td>360</td><td>Red Clay</td><td></td><td>x</td></tr><tr><td></td><td>360</td><td>380</td><td>Broken Basalt</td><td>x</td><td></td></tr><tr><td></td><td>380</td><td>405</td><td>Red Clay</td><td></td><td>x</td></tr></tbody></table>		Hole Diam.	Depth		Material	Water		From	To	Yes	No	8"	265	280	Broken Basalt		x		280	300	Red Clay		x		300	320	Broken Basalt	x			320	360	Red Clay		x		360	380	Broken Basalt	x			380	405	Red Clay		x
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4. METHOD DRILLED ☐ Cable ☒ Rotary ☐ Dug ☐ Other		RECEIVED JAN 22 1978 Department of Water Resources Northern District Office																																															
5. WELL CONSTRUCTION Diameter of hole <u>8</u> inches Total depth <u>405</u> feet Casing schedule: ☒ Steel ☐ Concrete Thickness _____ Diameter _____ From _____ To _____ <u>1/2</u> inches <u>8</u> inches <u>+ 1</u> feet <u>20</u> feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet Was casing drive shoe used? ☐ Yes ☒ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>18'</u> Material used in seal ☐ Cement grout ☒ Pudding clay ☐ Well cuttings Sealing procedure used ☐ Slurry pit ☐ Temporary surface casing ☒ Overbore to seal depth																																																	
6. LOCATION OF WELL Sketch map location must agree with written location. <u>gh</u> <table border="1"><tr><td>N</td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td></tr></table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> <u>NW 1/4 NE 1/4 Sec. 35, T. 47 N/S, R. 3 NW</u>				N						W		E										S			10. Work started <u>3/31/77</u> finished <u>4/1/77</u>																								
N																																																	
W		E																																															
S																																																	
		11. DRILLERS CERTIFICATION Carman Development Co. Firm No. <u>228</u> E. 6010 Broadway, Spokane, Wa. 99206 Address _____ Date <u>11/30/77</u> Signed by (Firm Official) <u>John Carman</u> and <u>John Carman</u> (Operator)																																															

Parcel Number
47N03W351500

AIN
241108

Situs Address
7475 E GARNET DR, ST MARIES

Owner Information

Owner Name WILLSEY TEDDY L
Owner Address 7475 E GARNET DR
ST MARIES ID 83861
Transfer Date 02/27/2007
Document #
Deed Book/Page

Location / Description

Tax Authority 239000
Group
Situs Address 7475 E GARNET DR, ST MARIES
Acreage 40.0000

Current Legal SW-NE Section 34 Township 47N
Desc. Range 03W

Parcel Type

Property Class Code 548- NREV
Neighborhood Code 6060 BLACK LAKE TO HARRISON FLATS

Assessment Information

Appraisal Date

2000310

241108

AS 10

STATEMENT OF INTENT TO DECLARE
MANUFACTURED HOME REAL PROPERTYSTATE OF IDAHO
COUNTY OF KOOTENAI
AT THE REQUEST OF
First American Title Company

1. Owner Name(s): Exchange Services, Inc. KLEE, JASON W ETUX	
2. Mailing Address: P.O. Box 395, Potter Valley, CA 95469	
3. Property Address: 7475 E. Garnet Drive, St. Maries, ID 83861	
4. Legal Description: The West half of the Southwest quarter of the Northeast quarter of Section 35, Township 47 North, Range 3 W.B.M., Kootenai County, Idaho.	
5. Real Property Parcel #: 47N03W351430	6. Manuf. Home Parcel #: M-xx-73W-35-231-A
103219	218483
7. Land Ownership: ☐ Deed ☐ Recorded ☐ Contract of Sale ☐ Unrecorded	

2005 DEC -8 P 3:59

DANIEL J. ENGLISH

DEPUTY

FEES

12.00

8. Manufactured Home Description:		
Make: CHAM	Model: TL	Year: 1998
Serial #: 169812753538	Size: 66 X 28	Lien Holder, if any: None
The undersigned, being duly sworn, states that the above information is true and correct, and does hereby exercise a "STATEMENT OF INTENT", declaring the above referenced manufactured home to be real property according to Idaho Code Section 64-304. The undersigned further states that the running gear has been removed from the manufactured home and the manufactured home will be permanently affixed to the land owned or being purchased by the owner or purchaser of the manufactured home.		
9. Signature: <i>Jason W Klee</i>	Date: 9/28/05	Signature: <i>Tiffany L. Klee</i>
		Date: 9/28/05

STATE OF IDAHO

COUNTY OF Kootenai

On this, before me, the undersigned, personally appeared Jason W. Klee and Tiffany L. Klee, proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is (are) subscribed to this instrument and acknowledged that he (she) (they) executed the same.

S
E
A
L

see attached.
Notary Public
Commission Expires:

Signatures - Pursuant to Idaho Code Section 63-304

10. BUILDING & ZONING DEPARTMENT OR OTHER AUTHORIZED OFFICIAL

A. Removal of running gear

R. Sachs (R. Brickey) 11-15-05
Authorized Signature Date

B. Permanently affixed to the land.

(See the Idaho Manufactured Home Installation Standard.)

Steve Black 11/16/05
Authorized Signature Date

11. COUNTY ASSESSOR

Verified ownership of land and manufactured home and payment of sales tax on new manufactured home.

Thurso 11-16-05
Authorized Signature Date

12. CONSENT OF LIENHOLDER

Mountain West Bank 10/3/05
Name Date

Diane E. Reed 10/3/05
Authorized Signature Date

INSTRUCTIONS FOR
STATEMENT OF INTENT TO DECLARE MANUFACTURED HOME REAL PROPERTY