Form 238-7
3/95

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NORTHERN REGION
DWR

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

096985

Office Use Only
Inspected by _____
Twp ____ Rge ____ Sec ____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. ~~94-96-N-0004-000~~ 91-96-N-4-0004 (Should be Incorrect Basin)
Other IDWR No. _____

2. OWNER:
Name Glenn - Emma McLaughlin
Address HC03 15 N
City ST Maries State Id Zip 83861

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

N / W / E / S — X

Twp. 46 North ☒ or South ☐
Rge. 2 East ☐ or West ☒
Sec. 16, ____ 1/4 SW 1/4 NE 1/4 (10 acres / 40 acres / 160 acres)
Gov't Lot ____ County Benewah
Lat: : : Long: : :
Address of Well Site West Meadowhurst Drive 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 Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	0	30	11 sks	Pour

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	83	.250	Steel	☒	☐	☒	☐
4	-10	250	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
170	250		60	½"	Pvc	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
38 ft. below ground Artesian pressure _____ lb.
Depth flow encountered ~~83~~ 196 ft. Describe access port or control devices: Well Pump Cap

SW NE 16 46N 2W

11. WELL TESTS:
☒ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
15			2 hrs

Water Temp. Cold Bottom hole temp. _____
Water Quality test or comments: No odor, Clear
Depth first Water Encountered 150

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	4	Brown Shale with Clay		
	4	78	Brown Soft Shale		
	78	83	Grey Shale		
6	83	250	" "	X	

Completed Depth 250 (Measurable)
Date: Started 2/22/96 Completed 2/23/96

13. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Firm Name All-Ways Drilling Inc Firm No. 510
Firm Official Stanley Kwolek Date 3/4/96
and
Supervisor or Operator R. Voigt Date 3/4/96
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES