

RECEIVED

IDAHO DEPARTMENT OF WATER RESOURCES

MAR 27 1997

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

096896

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

1. DRILLING PERMIT NO. 94-96-N-015-000

Other IDWR No. _____

2. OWNER

Name NELSON, JOHN

Well Number:

535

Address HC03 BOX 36

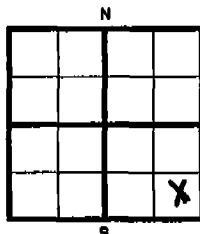
City ST MARIES

State ID

Zip 83861

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

Twp. 47 ☒ North or ☐ SouthRge. 02 ☐ East or ☒ WestSec. 07 1/4 SE 1/4 SE 1/4

Gov't Lot _____ County KOOTENAI

Lat: : : Long: : :

Address of Well Site MM 100 HWY 2

City _____

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

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	
BENTONITE	0	25	8 SACKS	CRUMBLES

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 25Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	25	.250	STEEL	☒	☐	☒	☐
4	-10	220	.160	PVC	☐	☒	☐	☐

Length of Headpipe _____

Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method SAWCUT☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
180	220	1/16	60	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

168 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
5 TO 6 GPM			1.5 HR

Water Temp. COLD Bottom Hole Temp. COLD

Water Quality test or comments: GOOD & CLEA

Depth first Water encountered 140'

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
8	0	2	Topsoil Brown Soft	☐	☒
8	2	20	Clays Brownish Tan	☐	☒
8	20	25	Clays W/Shale Tan Gray	☐	☒
8	25	80	Shale W/Clays Gray Medium	☐	☒
6	80	140	Shale Black Medium	☐	☒
6	140	148	Shale Black Fractured	☒	☐
6	148	188	Shale Black Medium	☐	☒
6	188	195	Shale Black Fractured	☒	☐
6	195	220	Shale Black Medium	☐	☒
	0	0	1x6" Bolt on Cap	☐	☐

Completed Depth 220' (Measurable)

Date: Started 07/12/96 Completed 07/15/96

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 H2O WellService/ Inc. Firm No. 448

Firm Official *John WellService* Date 3-24-96

and

Supervisor or Operator *Mark J. Lee* Date 3/24/96

(Sign Once if Firm Official and Operator)

SESE 7 47N 2W