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IDAHO DEPARTMENT OF WATER RESOURCES

DEC 17 1997

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

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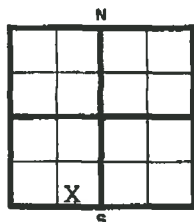
Office Use Only			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat	Long		

1. DRILLING PERMIT NO. NORTHERN REGION TAG# D0003452
Other IDWR No. 95-97-N-133

2. OWNER Castleberry, Bob Well Number: 634

Address 2955 Packsaddle
City CDA State ID Zip 83814

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



Twp. 50 ☒ North or ☐ South
Rge. 02 ☐ East or ☒ West
E Sec. 29 1/4 SE 1/4 SW 1/4

Gov't Lot _____ County KOOTENAI

Lat: : : Long: : :

Address of Well Site Wolf Lodge Ranch

City CDA

(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	6 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 25

Was 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	-5	300	.160	PVC	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method SKILLSAW

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
260	0		0	0		☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

230 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
1-2 GPM			

Water Temp. _____ Bottom Hole Temp _____

Water Quality test or comments: _____

_____ Depth first Water encountered _____

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
	0	0		☐	☐
8	0	25	Clayish Topsoil W/Gravel	☐	☒
6	25	70	Shale Brown Decomposed With Water	☒	☐
6	70	115	Shale Bluish Gray	☐	☒
6	115	245	Shale Gray & White	☐	☒
6	245	300	Shale Greenish Gray W/Water 1 1/2 gp	☒	☐
	0	0	1- Bolt on 6" Cap	☐	☐

Completed Depth 300' (Measurable)

Date: Started 12/3/97 Completed 12/3/97

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 [Signature] Date 12/3/97

and Supervisor or Operator [Signature] Date 12/3/97

(Sign Once if Firm Official and Operator)

(Louie Hanner)

SESW 29 50N 2W

SCANNED

MAR 19 2015