Form 238-7
6/95

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JAN 23 1996
NORTHERN REGION

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

POSTED

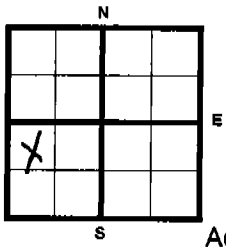
Starships Consulting and Management Services

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

1. DRILLING PERMIT NO. 95-95-N-0206-000
Other IDWR No. NWR

2. OWNER
Name BERG, GEORGE
Address 9229 RYAN DR
City HAYDEN LAKE State ID Zip 83835

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



Twp. 51 ☒ North or ☐ South
Rge. 03 ☐ East or ☒ West
Sec. 11 1/4 NW 1/4 SW 1/4
Gov't Lot ____ County KOOTENAI
Lat: : : Long: : :
Address of Well Site E HAYDEN LAKE RD
MOKINS BAY RD City
(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	18	3.5 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18
Was drive shoe seal tested? ☒ Y ☐ N How? Drove into rock

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	18	.250	STEEL	☒	☐	☐	☐
4	-5	320	160	PSI 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
280	320	1/8X4	140	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
110 ft. below ground Artesian pressure ____ lb.
Depth flow encountered ____ ft. Describe access port or control devices:

NWSW 11 51N 3W

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

Yield gal./min.	Drawdown	Pumping Level	Time
76+ 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	Water N
8	0	18	Granite Decomp. Brown	☐	☒
6	18	87	Granite Brown & white Medium	☐	☒
6	87	156	Granite White & black Medium	☐	☒
6	156	165	Granite Green Med soft 1/2 gpm	☒	☐
6	165	215	Granite White & Black Med	☐	☒
6	215	232	Granite White & Black W/Green	☐	☒
6	232	297	Granite White & Black	☐	☒
6	297	301	Granite White & Brown 6gpm	☒	☐
6	301	310	Granite White & Black med	☐	☒
6	310	315	Granite White & Black Fract 70+gpm	☒	☐
6	315	322	Granite White & Black Medium	☐	☒
	0	0	NOTE: 1 4X6 Formation Packer set @ 100'	☐	☐

Completed Depth ~~110'~~ 322 (Measurable)
Date: Started 12/20/95 Completed 12/21/95

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 H20 WellService, Inc. Firm No. 448
Firm Official [signature] Date 1-23-96
and
Supervisor or Operator [signature] Date 1-15-96
(Sign Once if Firm Official and Operator)