

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D D0061203
Drilling Permit No. 8607220

Water right or Injection well # _____

2. OWNER: Jimmy & Rhonda Duggan
Name Jimmy & Rhonda Duggan
Address 11004 E Wood Duck Lane
City St. Maries State ID Zip 83861

3. WELL LOCATION:

Twp. 47 North ☒ or South ☐ Rge. 2 East ☐ or West ☒
Sec. 18 1/4 N/E 1/4 S/E 1/4

Gov't Lot _____ County Kootenai
Lat. N 47 ° 25 196 (Deg. and Decimal minutes)
Long. W 116 ° 37 780 (Deg. and Decimal minutes)
Address of Well Site 11004 E Wood Duck Drive
City St Maries

(Give at least name of road - Distance to Road or Landmark)
Lot _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection
☐ Other _____

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
<u>Bentonite</u>	<u>0</u>	<u>38</u>	<u>14 sq</u>	<u>Pour Around Pipe</u>

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
<u>6</u>	<u>+2</u>	<u>38</u>	<u>250</u>	<u>Steel</u>	☒	☐	☐	☒
<u>4</u>	<u>20</u>	<u>210</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 38

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method Drill

Manufactured screen ☐ Y ☒ N Type _____

Method of installation N/A

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
<u>150</u>	<u>210</u>	<u>3/4</u>	<u>36</u>	<u>3/4</u>	<u>PVC</u>	<u>160</u>

Length of Headpipe none Length of Tailpipe none

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
<u>none</u>				

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device well cap

47N 02W 18

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 60 Static water level (ft) 20

Water temp. (°F) 50 Bottom hole temp. (°F) _____

Describe access port Well Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
<u>2 gpm</u>	<u>Air 1:45</u>	<u>1 hr</u>

Test method:

Pump ☐ Baller ☐ Air ☒ Flowing artesian ☐

Water quality test or comments: clear no odor

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
<u>10</u>	<u>0</u>	<u>1</u>	<u>Top Soil</u>		
	<u>1</u>	<u>13</u>	<u>Clay Tan</u>		
	<u>13</u>	<u>17</u>	<u>Clay Gray</u>		
	<u>17</u>	<u>38</u>	<u>Basalt Gray</u>		
<u>6</u>	<u>38</u>	<u>60</u>	<u>Basalt Gray</u>		
	<u>60</u>	<u>62</u>	<u>Basalt Gray w/ water</u>		
			<u>2 gpm</u>		
	<u>62</u>	<u>210</u>	<u>Basalt Gray</u>		

RECEIVED

Nov 13 2012

IDWR / NORTH

Completed Depth (Measurable): 210

Date Started: 10-9-12 Date Completed: 10-12-12

14. DRILLER'S CERTIFICATION:

We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Action Drilling Incc Co. No. 618

*Principal Driller Alvin Carris Date 11-9-12

*Driller Alvin Carris Date 11-9-12

*Operator II Alvin Carris Date 11-9-12

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.

House Well 7.1-2015