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IDWR/North

Form 238-7
11/97

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT 076450

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

1. WELL TAG NO. D 0005685
DRILLING PERMIT NO. 92-99-N-1
Other IDWR No. _____

POSTED

2. OWNER:
Name Thomas & Ruth Klansky
Address 1018 North Polk
City Moscow State ID Zip 83543

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

N / W / E / S — X

Twp. 44 North ☒ or South ☐
Rge. 02 East ☐ or West ☒
Sec. 23, NW 1/4 (10 acres) NW 1/4 (40 acres) ____ 1/4 (160 acres)
Gov't Lot ____ County Benewah
Lat: : : Long: : :
Address of Well Site Charley Creek Rd
City Emida
(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	35	300#	Dry

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 35
Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	-2	33	0250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
Perforations Method Slotted
Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
78	58	3/16	60	4	PVC	☐	☒
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
24 ft. below ground Artesian pressure ____ lb.
Depth flow encountered 65 ft. Describe access port or control devices: _____

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

Yield gal./min.	Drawdown	Pumping Level	Time
40			

Water Temp. 46 Bottom hole temp. _____
Water Quality test or comments: Good
Depth first Water Encounter ~~XX~~ 65

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	20	Brown Clay		x
8	20	35	Brown Broken Bslt		x
6	35	60	Black Bslt		x
6	60	70	Black Green Bslt	x	
6	70	78	Black Bslt		x

Completed Depth 78 (Measurable)
Date: Started 1-7-99 Completed 1-8-99

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

Company Name JRU Well Drilling Firm No. 539
Firm Official Jim R Nehling Date 1-11-99
and
Driller or Operator _____ Date _____
(Sign once if Firm Official & Operator)

44 N 2 W 23 FORWARD WHITE COPY TO WATER RESOURCES