

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
1/4 _____	1/4 _____	1/4 _____	
Lat: _____	: _____	Long: _____	: _____

1. WELL TAG NO. D 0044950
 DRILLING PERMIT NO. 842663
 Water Right or Injection Well No. _____

2. OWNER:
 Name Andy Dalhman
 Address P.O. Box 11795
 City Spokane State WA Zip 99211

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 48 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 11 1/4 NW 1/4 SE 1/4
 Gov't Lot _____ County Kootenai
 Lat: _____ Long: _____
 Address of Well Site HWY 97

(Give at least name of road + Distance to Road or Landmark)
 City Coeur d'Alene
 Lt. 4 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 Material	From	To	Weight / Volume	Seal Placement Method
bentonite	0	18	350lbs	surface pipe

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 26
 Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	26	250	steel	☒	☐	☒	☐
4	-5	165	160	pvc	☐	☒	☒	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE
 Perforation Method saw
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
125	165	1/8x5	38	4	pvc	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

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

12. WELL TESTS:
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
12		160	3 1/2 hr

 Water Temp. cold Bottom hole temp. _____
 Water Quality test or comments: little cloudy

Depth first Water Encounter 120

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
8	0	18	tan clay&gravel			
6	18	24	tan clay&gravel			
	24	165	tan&grey shale with broken spots thru-out		x	

RECEIVED

SEP 26 2006

IDWR/North

Completed Depth 165ft (Measurable)
 Date: Started 7-17-06 Completed 7-18-06

14. DRILLER'S CERTIFICATION
 I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
 Company Name Bronson Water Wells Firm No. 360
 Principal Driller Clint Bronson Date 7/31/06
 and _____
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____

Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.