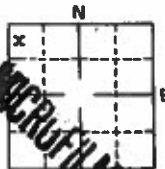


WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

POSTED

1. WELL OWNER Name <u>Clara E. Olden & Roger D. Mann</u> Address <u>P.O. Box 1842, Coeur D'Alene, Ida. 83814</u> Owner's Permit No. <u>95-80-N-85</u>	7. WATER LEVEL Static water level <u>243</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____																																																																											
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____	8. WELL TEST DATA ☐ Pump ☒ Bailer ☐ Air ☐ Other _____ <table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td>24</td><td>255 ft.</td><td>2hrs.</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>	Discharge G.P.M.	Pumping Level	Hours Pumped	24	255 ft.	2hrs.																																																																					
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1"><thead><tr><th>Hole Diam.</th><th>Depth From</th><th>To</th><th>Material</th><th>Water Yes No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>2</td><td>top soil</td><td>x</td></tr><tr><td>8</td><td>2</td><td>20</td><td>sand gravel</td><td>x</td></tr><tr><td>6</td><td>20</td><td>73</td><td>sand & gravel 4 in. minus boulders</td><td>x</td></tr><tr><td> </td><td>73</td><td>77</td><td>boulders</td><td>x</td></tr><tr><td> </td><td>77</td><td>120</td><td>sand & gravel</td><td>x</td></tr><tr><td> </td><td>120</td><td>130</td><td>cemented sand & gravel</td><td>x</td></tr><tr><td> </td><td>130</td><td>194</td><td>sand & gravel 3 in. minus</td><td>x</td></tr><tr><td> </td><td>194</td><td>208</td><td>sand & gravel 4 in. minus</td><td>x</td></tr><tr><td> </td><td>208</td><td>212</td><td>boulders</td><td>x</td></tr><tr><td> </td><td>212</td><td>232</td><td>sand & gravel 4 in. minus</td><td>x</td></tr><tr><td> </td><td>232</td><td>234</td><td>boulders</td><td>x</td></tr><tr><td> </td><td>234</td><td>249</td><td>sand & gravel (water 240')</td><td>x</td></tr><tr><td> </td><td>249</td><td>254</td><td>sand</td><td>x</td></tr><tr><td> </td><td>254</td><td>287</td><td>sand & gravel 1 in. minus</td><td>x</td></tr></tbody></table>	Hole Diam.	Depth From	To	Material	Water Yes No	8	0	2	top soil	x	8	2	20	sand gravel	x	6	20	73	sand & gravel 4 in. minus boulders	x		73	77	boulders	x		77	120	sand & gravel	x		120	130	cemented sand & gravel	x		130	194	sand & gravel 3 in. minus	x		194	208	sand & gravel 4 in. minus	x		208	212	boulders	x		212	232	sand & gravel 4 in. minus	x		232	234	boulders	x		234	249	sand & gravel (water 240')	x		249	254	sand	x		254	287	sand & gravel 1 in. minus	x
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4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dug ☐ Other _____	RECEIVED AUG 11 1980 Department of Water Resources Northern District Office RECEIVED AUG 15 1980 Department of Water Resources																																																																											
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ Thickness <u>250</u> inches Diameter <u>6</u> inches From <u>2</u> feet To <u>287</u> feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☒ Yes ☐ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ perforations _____ feet _____ feet perforations _____ feet _____ feet perforations _____ feet _____ feet Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>20'</u> Material used in seal: ☐ Cement grout ☒ Puddling clay ☐ Other _____ Sealing procedure used: ☐ Slurry pit ☒ Temporary surface sealing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port _____																																																																												
6. LOCATION OF WELL Sketch map location must agree with written location.  Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Kootenai</u> NW 1/4 NW 1/4 Sec. 28, T. 52, N. 1/4, R. 4, W. 1/4	11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>E. A. Holman Drilling</u> Firm No. <u>105</u> Address <u>601 So. Pines Rd.</u> <u>Spokane, Wa. 99210</u> Date <u>5/19/80</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>[Signature]</u>																																																																											

38-651-8

(File) out 6/17/82

PANHANDLE HEALTH DISTRICT
INDIVIDUAL SEWAGE DISPOSAL INSTALLATION PERMIT

PERMIT FEE \$40.00

PERMIT NO. 1792 PAID ☒ CASH ☒ CHECK ☒ NO FEE ☐ DATE May 29, 1979
 INSTALLATION FOR (NAME) Roger Dale Mann SIZE OF LOT 5 Acres FT. X FT.
 LEGAL DESCRIPTION OF PROPERTY (Parcel 2) - The E $\frac{1}{2}$ of the NW $\frac{1}{4}$ of the NW $\frac{1}{4}$ of the NW $\frac{1}{4}$ of Sec. 28
T 52N, R 4W
 LOCATION OF INSTALLATION End of Fowler - Tamarack Road 4th lot

NO. LIVING UNITS 1 BEDROOMS 2 BATHS 1 PEOPLE SERVED 3 OTHER MOBILE HOME

SEPTIC TANK 1,000 GALS. - DISTANCE TO DWELLING FOUNDATION 5' min WELL 50' min WATER LINE 10' min
 SURFACE WATER 50' min TYPE OF TANK: CEMENT ☒ METAL ☐ OTHER ☐

DISPOSAL AREA: DRAIN FIELD ☒ ABSORPTION BED ☐ OTHER ☐ DIMENSIONS 150x3

PERK RATE MIN/IN. SOIL PROFILE FT.

DISTANCE: PROPERTY LINES:
 FRONT 5' min FT. BACK 5' min FT. SIDE 5' min FT. DWELLING FOUNDATION 20' min FT.
 WELL 100' min FT. SURFACE WATER 300' min FT. SEPTIC TANK NA FT. NEIGHBOR'S WELL 100' min FT.
 DEPTH TO GROUND WATER FT. WELL LOG ☐ YES ☐ NO

I UNDERSTAND THAT THIS PERMIT IS NON-TRANSFERABLE AND IS VALID FOR 1 YEAR FROM THE DATE OF APPLICATION. DRAINFIELD MUST NOT EXCEED 3 FEET IN DEPTH.

APPLICANT'S SIGNATURE Jaw O. Mann APPLICANT IS: ☒ OWNER ☐ CONTRACTOR ☐ OTHER

MAILING ADDRESS Box 1342 Coeur d'Alene Id PHONE NO. 687-0536

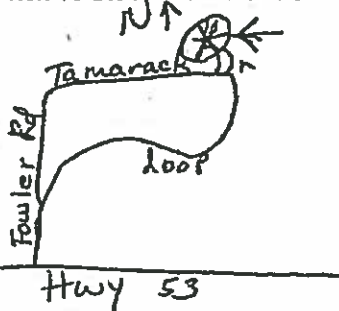
REMARKS

COPY TO: ☐ Fm. HA ☐ Fed. HA ☐ VA ☐ Other

PLOT PLAN SUBMITTED Date APPROVED 29 May 79 DISAPPROVED Date

PERMIT ISSUED BY QB Fuller REMARKS Community Services Approval #7875 5/7/79

VICINITY MAP
(Show How To Get There From This Office)



PLOT PLAN
(Show House, Other Buildings, Proposed Sewage Layout, Wells, Water Lines, Roads, Streams, Lakes and Distances Between)

SEE ATTACHED PLOT PLAN

THIS OFFICE MUST BE NOTIFIED FOR FINAL INSPECTION 24 HOURS BEFORE COVERING SYSTEM

INSPECTION - SYSTEM COVERED APPROVED Date NOT APPROVED Date

INSPECTED BY Name INSTALLED BY Name DATE DATE

REMARKS

COMPANION SHEET FOR LAND NOT SUBDIVIDED

TOWNSHIP	RANGE	SECTION	PARCEL NO.	GRANTOR	GRANTEE	REMARKS	DEED TYPE	DATE	BOOK & PAGE	SURVEY REF. NO.
52N 04W	28	3200		Opal CHASTAIN	Roger D. & Jan O. MAW	Name / Add. chg. C-B	MC	10/6/85		
52N 04W	28	3200		MANN / OLDEN J.O. & B.C. JACOBS	J.O. & B.C. JACOBS D. & P. KLINGE	WRITE CHG. C-B WRME / ADD CHG.	W C	129 324 83 303 22 130 84 661		
				Benjamin C Jacobs	Jan O Jacobs	Plat Elog - Fee	C	5/22/90	1183236	
				Jan O. (Jacobs) Tucker	Jeanette (Jan) O. Tucker	contractors missing for 5 years Mc to etal to get tax bill to for				
				Douglas & Patricia Klingge Hild	Jan O. Tucker Jan O. & Benjamin C. Jacobs Hild	Nm. chg - Marriage - see attachment nm. chg. Removes "etal" (84)	1/3 92 C 1/17 95 C	VC. See below 1284855 1284856		