

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

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

1. WELL TAG NO. D0017131

Drilling Permit No: _____

Other IDWR No. 768731

2. OWNER

Name Don & Susan Wornelduff

Well Number: 214

Address 10955 Burnet Avenue

City Mission Hills State CA Zip 91345

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

	X			

Twp. 50 ☒ North or ☐ South

Rge. 03 ☐ East or ☒ West

Sec. 17 1/4 NE 1/4 NW 1/4

Gov't Lot _____ County KOOTENAI

Lat. : : _____ Long. : : _____

Address of Well Site 3925 E Fernan Hill Ro

City Coeur d'Alene

(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			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
BENTONITE	0	18	13 sacks	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 183

Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	-183	.250	steel	☒	☐	☒	☐
4	-165	-225	.160	pvc	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☒ Perforations Method skill saw

☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-185	-225	1/8x6	100	4	pvc	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

140 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
est 35-40			1 hour

Water Temp. cold Bottom Hole Temp cold

Water Quality test or comments: clear

Depth first Water encountered 202

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

				Water	
Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Y	N
8	0	2	Topsoil	☐	☒
8	2	41	Brown clay w/gravel	☐	☒
8	41	59	Clay w/basalt broken	☐	☒
8	59	66	Clay tan	☐	☒
8	66	109	Clay white & tan	☐	☒
8	109	182	Clay brown	☐	☒
8	182	183	Basalt broken	☐	☒
6	183	202	Basalt	☐	☒
6	202	212	Basalt fractured	☒	☐
6	212	225	Basalt	☐	☒

Completed Depth 225 (Measurable)

Date: Started 4/27/01 Completed 5/1/01

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 H2O WellService, Inc. Firm No. 448

Firm Official [Signature] Date 5-2-01

and

Supervisor or Operator [Signature] Date 5-1-01

(Sign Once If Firm Official and Operator)

Todd Morgan

SCANNED

NOV 16 2016

50N 3W 17