Form 238-7
7/98
Starships Consulting and Management Services

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

RECEIVED
OCT 14 1998
NORTHERN REGION
IDWR

77805

Office Use Only
Inspected by_____
Twp____Rge____Sec____
____1/4____1/4____1/4
Lat: : : Long: : :

1. WELL TAG NO. D5302
Drilling Permit No: 95-98-N-142
Other IDWR No.

2. OWNER **Well Number:** 767
Name GREINER, LEO
Address 16550 LOLO DR
City RATHDRUM State ID Zip 83858

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

POSTED

N / W / E / S — X

Twp. 52 ☑ North or ☐ South
Rge. 04 ☐ East or ☑ West
Sec. 28 ____ 1/4 NW 1/4 SW 1/4
Gov't Lot ____ County KOOTENAI
Lat: : : Long: : :
Address of Well Site Same as above
City Rathdrum
(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	18	2 sacks	Slurry

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	282	.250	STEEL	☑	☐	☑	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
☐ Perforations Method ____
☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
215 ft. below ground Artesian pressure ____ lb.
Depth flow encountered ____ ft. Describe access port or control devices: Bolt on Well Cap

52N 4W 28

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

Yield gal./min.	Drawdown	Pumping Level	Time
30		275	1 HR

Water Temp. COLD Bottom Hole Temp ____
Water Quality test or comments: CLEAR
Depth first Water encountered 270

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water Y	Water N
10	0	2	TOPSOIL	☐	☑
10	2	14	Sand Gravel & Boulders	☐	☑
10	14	18	Sand & Gravel	☐	☑
8	18	215	Sand & Gravel	☐	☑
8	215	282	Sand & Gravel	☑	☐

Completed Depth 282' (Measurable)
Date: Started 9/17/98 Completed 9/18/92

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 _____ Date 9/18/98
and
Supervisor or Operator _____ Date 9/18/98
(Sign Once if Firm Offical and Operator)
(Todd Morgan)