

Use Typewriter
or
Ball Point Pen

092258

Other IDWR No. _____

Name Dayton Lingle
Address P.O. Box 315
City Rathdrum State ID Zip 83858

Sketch map location must agree with written location.

T. 52 North ☒ or South ☐
 E. R. 4 East ☐ or West ☒
 Sec. 22 $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ NE $\frac{1}{4}$
10 acres 40 acres 160 acres
 Gov't Lot _____ County Kootenai

Address of Well Site N 2595 Ramsey Rd

(Give at least Direction + Distance to Road or Landmark)

Lot No. _____ Block No. _____ Subd. Name _____

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

☒ New Well ☐ Modify or Repair ☐ Replacement ☐ Abandonment

☐ Mud Rotary ☒ Air Rotary ☐ Cable ☐ Other

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
bentonite	0	50	6	water mix

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

Diameter	From	To	Gauge	Casting	Liner	Steel	Plastic	Welded	Threaded
6	+1	305	250			☒	☐	☒	☐
						☐	☐	☐	☐
						☐	☐	☐	☐
						☐	☐	☐	☐

Final location of shoes...

Top Packer or Headpipe _____ Bottom Tailpipe _____

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/Pipe Size	Casting	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐

SENE ZZ 5ZN 4W

Department of Water Resources

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Depth	Time
15		305	3hr

Temperature of water _____. Was a water analysis done? Yes ☐ No ☒

By whom? _____

Water Quality (odor, etc.)

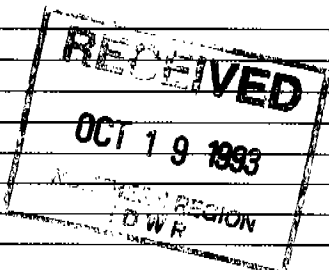
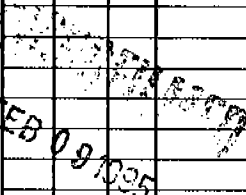
Bottom Hole Temperature

268 ft. below surface Depth artesian flow found

Artesian pressure _____ lb. Describe access port _____

Describe Controlling Devices: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	GPM	SW
8	1	50	sand, gravel & boulders		
6	50	180	cemented gravel, brown clay		
	180	190	large gravel		
	190	305	sand, gravel & clay		
NOTE: See Remarks in Data base for additional information					
					
					
Date: Started 10-11-93 Completed 10-13-93					

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

Firm Name Bronson Water Wells Firm No. 360

Firm Official A. D. R... Date 10-15-93

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES