

WELL DRILLER'S REPORT

RECEIVED

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

1. WELL TAG NO. D0028824 SEP 23 2003

Drilling Permit No: 806158

Other IDWR No. _____

IDWR/North

2. OWNER

Name ANDRES, JERRY

Well Number: 643

Address 10420 EMIG RD.

City HAYDEN State ID Zip 83835

3. LOCATION OF WELL by legal description

sketch map location must agree with written location

N			
			X
S			

W E

Twp. 52 ☒ North or ☐ South
Rge. 3 ☐ East or ☒ West
Sec. 32 1/4 NE 1/4 NE 1/4

Gov't Lot _____ County KOOTENAI

Lat: _____ Long: _____

Address of Well Site MEADOW CT.

BOOT HILL RD. City HAYDEN

(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	
DRY GRANULE				
BENTONITE	0	18	6 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 60'

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

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	60	.260	STEEL	☒	☐	☒	☐
4	-43	203	.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
-120	140	1.8 X 6	50	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

120 ft. below ground Artesian pressure _____ lb.

Depth flow encountered 141 ft. Describe access port or control devices: _____

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
1 1/2			1 HR

Water Temp. COLD Bottom Hole Temp COLD

Water Quality test or comments: COOL

Depth first Water encountered 120

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water	
				Y	N
8	0	2	Top Soil	☐	☐
8	2	29	Tan Clay	☐	☐
8	29	41	Brown Clay	☐	☐
8	41	59	Black Clay	☐	☐
8	59	60	Basalt	☐	☐
6	60	141	Basalt	☒	☐
6	141	146	Hard Gray Clay	☐	☐
6	146	156	Hard Brown Clay	☐	☐
6	156	194	Hard Black Clay	☐	☐
6	194	203	Soft Gray Clay	☐	☐

Completed Depth 203 (Measurable)
Date: Started 9/2/03 Completed 9/2/03

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 9-8-03

and Supervisor or Operator [Signature] Date 9-4-03

(Sign Once if Firm Official and Operator)

(Todd Morgan)

52N 3W 32