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

IDAHO DEPARTMENT OF WATER RESOURCES

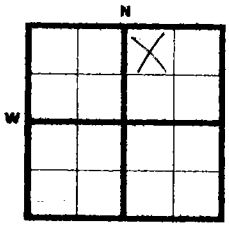
WELL DRILLER'S REPORT

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

1. WELL TAG NO. D0040274
Drilling Permit No: 833955
Other IDWR No.

2. OWNER **Well Number:** 978
Name WRIGHT, ANDY
Address 4392 S SCHILLING LOOP
City POST FALLS State ID Zip 83854

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



Twp. 52 ☑ North or ☐ South
Rge. 05 ☐ East or ☑ West
Sec. 29 1/4 NW 1/4 NE 1/4
Gov't Lot ____ County KOOTENAI
Lat: : : Long: : :

Address of Well Site NELSON LOOP RD
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	58	400 LBS	POURED

Was drive shoe used? ☑ Y ☐ N Shoe Depth(s) 58
Was drive shoe seal tested? ☐ Y ☑ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	58	.250	STEEL	☑	☐	☑	☐
4	-5	600	SCH 40	PBC	☐	☑	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
☑ Perforations Method SKIL SAW
☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
570	600	1.8 X 6	70	4	PVC	☐	☑

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

52N 5W 29

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

Yield gal./min.	Drawdown	Pumping Level	Time
5			2 HRS

Water Temp. COLD Bottom Hole Temp COLD
Water Quality test or comments: CLEAR
Depth first Water encountered 93'

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water Y	Water N
8	0	2	TOP SOIL	☐	☑
8	2	14	CLAY BROWN	☐	☑
8	14	31	GRANITITE, DECOMPOSED BROWN	☐	☑
8	31	41	GRANITE, WHITE BLACK	☐	☑
8	41	58	GRANITE, DECOMPOSED BROWN	☐	☑
6	58	93	GRANITE, WHITE, BLACK	☐	☑
6	93	96	GRANITE, WHITE, BLACK FRAC	☑	☐
6	96	230	GRANITE, WHITE, BLACK	☐	☑
6	230	236	GRANITE, WHITE, BROWN FRAC	☑	☐
6	236	484	GRANITE, WHITE, BLACK	☐	☑
6	484	490	GRANITE, WHTE, BLACK FRAC	☐	☑
6	490	571	GRANITE, WHITE, BLACK	☐	☑
6	571	590	GRANITE, WHITE, BLACK FRAC	☑	☐
6	590	600	GRANITE, WHITE, BLACK	☐	☑

RECEIVED
AUG 15 2005
IDWR-North

Completed Depth 600 (Measurable)
Date: Started 6/10/2005 Completed 6/15/2005

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 H20 WellService, Inc. Firm No. 448
Firm Official [signature] Date 6-16-05
and
Supervisor or Operator [signature] Date 06/15/05
ROBERT KERN (Sign Once if Firm Offical and Operator)