

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

TYPEWRITER OR
BALLPOINT PEN

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

N

1. WELL OWNER Name <u>TEROME TUTTLE</u> Address <u>2016 WASHINGTON ST. MARIES, ID.</u> Owner's Permit No. <u>83861</u>	7. WATER LEVEL Static water level <u>abt. 100'</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____																																																				
2. NATURE OF WORK <u>95-79-N-78</u> ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe method of abandoning) _____	8. WELL TEST DATA ☐ Pump ☐ Bailer ☒ Air ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td><u>1 1/2 - 2 G.P.M.</u></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>1 1/2 - 2 G.P.M.</u>																																																
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Hole Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>0</td> <td>10</td> <td>SOFT CLAY + BROWN BASALT</td> <td></td> <td>X</td> </tr> <tr> <td></td> <td>10</td> <td>19</td> <td>HARD BROWN BASALT</td> <td></td> <td>X</td> </tr> <tr> <td></td> <td>19</td> <td>45</td> <td>SOFT BROWN BASALT</td> <td></td> <td>X</td> </tr> <tr> <td></td> <td>45</td> <td>155</td> <td>MED BASALT</td> <td></td> <td>X</td> </tr> <tr> <td></td> <td>155</td> <td>174</td> <td>SOFT BASALT</td> <td>X</td> <td></td> </tr> <tr> <td></td> <td>174</td> <td>258</td> <td>MED BASALT</td> <td></td> <td>X</td> </tr> <tr> <td></td> <td>258</td> <td>256</td> <td>BROWN CLAY</td> <td></td> <td>X</td> </tr> </tbody> </table>	Hole Diam.	Depth		Material	Water		From	To	Yes	No	8	0	10	SOFT CLAY + BROWN BASALT		X		10	19	HARD BROWN BASALT		X		19	45	SOFT BROWN BASALT		X		45	155	MED BASALT		X		155	174	SOFT BASALT	X			174	258	MED BASALT		X		258	256	BROWN CLAY		X
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4. METHOD DRILLED ☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	RECEIVED NOV 30 1979 Department of Water Resources Northern District Office RECEIVED NOV 30 1979 Department of Water Resources																																																				
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>250</u> inches</td> <td><u>6</u> inches</td> <td><u>1</u> feet</td> <td><u>59</u> feet</td> </tr> <tr> <td><u>125</u> inches</td> <td><u>4" PVC</u> inches</td> <td><u>42</u> feet</td> <td><u>256</u> feet</td> </tr> </tbody> </table> Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☒ Yes ☐ No <u>ALL</u> How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation <u>3/16</u> inches by <u>3/16</u> inches <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>40</u> perforations</td> <td><u>236</u> feet</td> <td><u>246</u> feet</td> </tr> <tr> <td><u>20</u> perforations</td> <td><u>136</u> feet</td> <td><u>141</u> feet</td> </tr> </tbody> </table> Well screen installed? ☐ Yes ☒ No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No ☐ Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>20</u> Material used in seal: ☐ Cement grout ☒ Puddling clay ☒ Well cuttings Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing ☒ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent ☐ Cemented between strata Describe access port _____	Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>59</u> feet	<u>125</u> inches	<u>4" PVC</u> inches	<u>42</u> feet	<u>256</u> feet	Number	From	To	<u>40</u> perforations	<u>236</u> feet	<u>246</u> feet	<u>20</u> perforations	<u>136</u> feet	<u>141</u> feet	10. Work started <u>9/12/79</u> finished <u>9/19/79</u>																															
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6. LOCATION OF WELL Sketch map location must agree with written location. N <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center;">W</td> <td style="width:33%; text-align: center;">E</td> </tr> <tr> <td style="text-align: center;"> </td> <td style="text-align: center;"> Subdivision Name _____ Lot No. _____ Block No. _____ </td> </tr> </table> County <u>BENNEWAH</u> <u>SW</u> 1/4 <u>SE</u> 1/4 Sec. <u>28</u>, T. <u>46</u> N., R. <u>3</u> W.	W	E		Subdivision Name _____ Lot No. _____ Block No. _____	11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>AQUA DRILLING INC</u> Firm No. <u>356</u> Address <u>P.O. BOX 69 HAYDEN LAKE, IDAHO</u> Date <u>9/19/79</u> Signed by (Firm Official) <u>David H. Mann</u> and (Operator) <u>David H. Mann</u>																																																
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