

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only			
Well ID No.			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

1. WELL TAG NO. D D 00399 L3
 DRILLING PERMIT NO. 831772
 Water Right or Injection Well No. _____

2. OWNER:
 Name Paul & Sheryl Platt
 Address PO Box 1104
 City Paulbo State wa Zip 98340

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 48 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 28 1/4 SW 1/4 N/4 1/4
 Gov't Lot _____ County Kootenai
 Lat: _____ Long: _____
 Address of Well Site 743 East Point Rd
 City Harrison
 (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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>-22</u>	<u>12 sacks</u>	<u>pour</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 128
 Was drive shoe seal tested? ☒ Y ☐ N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>-128</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-10</u>	<u>-175</u>	<u>160</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Drill
 Screen Type & Method of Installation _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>-115</u>	<u>175</u>	<u>1"</u>	<u>42</u>	<u>4"</u>	<u>PVC</u>	☐	☒

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

160 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered 225 ft. Describe access port or control devices: SSP

12. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
<u>15</u>			<u>1 1/2 hrs</u>

Water Temp. 52 Bottom hole temp. _____

Water Quality test or comments: clear no odor

Depth first Water Encounter 225

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>10</u>	<u>Clay Brown</u>		☒
	<u>10</u>	<u>35</u>	<u>Basalt Broken</u>		☒
	<u>35</u>	<u>40</u>	<u>Clay Gray/Blue</u>		☒
	<u>40</u>	<u>70</u>	<u>Sand</u>		☒
	<u>70</u>	<u>100</u>	<u>Clay Sand</u>		☒
<u>6"</u>	<u>100</u>	<u>120</u>	<u>Clay Brown</u>		☒
	<u>120</u>	<u>225</u>	<u>Decomposed Basalt</u>		☒

RECEIVED

SCANNED
DFC 05 2017

Completed Depth 275 (Measurable)

Date: Started 3/24/05 Completed 4/1/05

14. DRILLER'S CERTIFICATION

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

Company Name Always Drilling Inc Firm No. 510
 Principal Driller Stanley Wolfe Date 5/10/05
 and Don Kroll Date 5/10/05
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____

Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.