

RECEIVED

FEB 26 2018

02/09/2018

DEPARTMENT OF
WATER RESOURCES

NOTICE OF ERROR
REPLY

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: March 30, 2018

Water right number: 95-13701

CATHERINE CONLEY
7553 S GREENSFERRY RD
COEUR D ALENE ID 83814
Telephone Number: 2086670151

NED HORNER
7553 S GREENSFERRY RD
COEUR D ALENE ID 83814
Telephone Number: 2086670151

1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

Priority Date

2. Describe the changes you wish to make in the proposed recommendation:

change priority date from 09/09/86 to
09/15/1982

3. Give a brief explanation as to why you disagree with these portions:

Our well ~~was~~ was drilled and pump tested on 09/15/82
Please see attached IDWR well driller report.

☐ I AGREE with this proposed recommendation: no changes need to be made.

DATE: *2/21/2018* SIGNATURE: *Ned Horner*
Please print your name: *Ned Horner*

1/78

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESUSE TYPEWRITER OF
BALLPOINT PEN

WELL DRILLER'S REPORT

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.

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MAY 18 1983

1. WELL OWNER

Name Ned HornerAddress 2450 S. Greenferry Road CDA, IdahoOwner's Permit No. 95-82-N-45 83814

7. WATER LEVEL

Static water level 80 feet below land surface.Flowing? ☐ Yes ☒ No G.P.M. flow _____

Artesian closed-in pressure _____ p.s.i.

Controlled by: ☐ Valve ☐ Cap ☐ PlugTemperature cold °F. Quality good

2. NATURE OF WORK

☒ New well ☐ Deepened ☐ Replacement☐ Abandoned (describe method of abandoning) _____

8. WELL TEST DATA

☐ Pump ☐ Bailer ☒ Air ☐ Other _____

Discharge G.P.M.

Pumping Level

Hours Pumped

5+ G.P.M.

3. PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal☐ Industrial ☐ Stock ☐ Waste Disposal or Injection☐ Other _____ (specify type)

4. METHOD DRILLED

☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary☐ Cable ☐ Dug ☐ Other _____

5. WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
<u>.250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>40</u> feet
<u>P.V.C. 40</u> inches	<u>4</u> inches	<u>5</u> feet	<u>220</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☐ Yes ☒ NoWas a packer or seal used? ☐ Yes ☒ NoPerforated? ☒ Yes ☐ No P.V.C.How perforated? ☐ Factory ☐ Knife ☐ Torch sawSize of perforation 1/8 inches by 6 inches

Number	From	To
<u>100</u> perforations	<u>105</u> feet	<u>205</u> feet
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet

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 18 Material used in seal: ☐ Cement grout☒ Puddling clay ☐ Well cuttingsSealing procedure used: ☐ Slurry pit ☐ Temp. surface casing☒ Overbore to seal depthMethod of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

Weld

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
6	0	2	clay top soil with sand		X
6	2	35	clay sand light brown		X
6	35	39	decomp. granite		X
6	39	76	soft black & white granite		X
6	76	81	very decomp granite		X
6	81	83	white soft decomp granite	X	
6	83	86	sem. hard white granite		X
6	86	122	seams decomp & black & white		X
6	122	140	semi hard b&w granite		X
6	140	143	soft black & white granite		X
6	143	148	decomp black & white granite	X	
6	148	225	hard & soft B & W granite	X	

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Department of Water Resources
Northern District Office

☐ Abandoned (describe method of abandoning) _____

PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal
☐ Industrial ☐ Stock ☐ Waste Disposal or Injection
☐ Other _____ (specify type)

METHOD DRILLED

☒ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary
☐ Cable ☐ Dug ☐ Other _____

WELL CONSTRUCTION

Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____

Thickness	Diameter	From	To
.250 inches	6 inches	+ 1 feet	40 feet
V.C. 40 inches	4 inches	5 feet	220 feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used? ☐ Yes ☒ No
Was a packer or seal used? ☐ Yes ☒ No
Perforated? ☒ Yes ☐ No P.V.C.
How perforated? ☐ Factory ☐ Knife ☐ Torch saw
Size of perforation 1/8 inches by 6 inches

Number	From	To
100 perforations	105 feet	205 feet
_____ perforations	_____ feet	_____ feet
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Well screen installed? ☐ Yes ☒ No
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Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing

☒ Overbore to seal depth

Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent

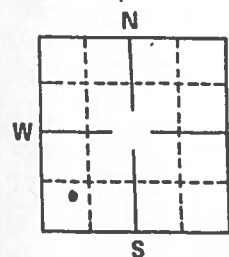
Weld

☐ Cemented between strata

Describe access port none

LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name _____

Lot No. _____ Block No. _____

County Kootenai

SW 1/4 SW 1/4 Sec. 30, T. 50 (N) S. R. 4 W EMP.

Discharge G.P.M.

Pumping Level

Hours Pumped

5+ G.P.M.

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
6	0	2	clay top soil with sand		x
6	2	35	clay sand light brown		x
6	35	39	decomp. granite		x
6	39	76	soft black & white granite		x
6	76	81	very decomp granite		x
6	81	83	white soft decomp granite	x	
6	83	86	sem. hard white granite		x
6	86	122	seams decomp & black & white		x
6	122	140	semi hard b&w granite		x
6	140	143	soft black & white granite		x
6	143	148	decomp black & white granite	x	
6	148	225	hard & soft B & W granite	x	

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Northern District Office

10.

Work started 9/14/82 finished 9/15/82

11. DRILLERS CERTIFICATION

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

Firm Name Murphy Drilling Co. Firm No. 269

Address 17220 Linke Rd. Date 10/17/82

Signed by (Firm Official) BO Murphy

and

(Operator) BO Murphy