JUL 13 1998

11/97

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

77746

NORTHERN REGION IDWR

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

1. WELL TAG NO. D D0003860
DRILLING PERMIT NO. 95-98-N-83
Other IDWR No. _____

2. OWNER:
Name Thomas Winters
Address 444 Madison
City Coalinga State CA Zip 93210

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

POSTED

N / W / E / S

Twp. 49 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 5, ____ 1/4 NW 1/4 NW 1/4 (10 acres / 40 acres / 160 acres)
Gov't Lot ____ County Kootenai
Lat: : : Long: : :
Address of Well Site Mica Flats
City CdA
(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	7	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) _____
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	-43	103	160	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
Perforations Method saw
Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
83	103	1/8x4	14			☐	☒
						☐	☐
						☐	☐

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

49N 4W 5

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

Yield gal./min.	Drawdown	Pumping Level	Time
20		100	1½hr

Water Temp. cold Bottom hole temp. _____
Water Quality test or comments: _____
Depth first Water Encounter 64

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	50	sand&brown clay		
	50	58	decomposed granite		
6	58	64	firm salt/pepper granite		
	64	103	soft broken granite	X	

Completed Depth 103ft (Measurable)
Date: Started 6-15 Completed 6-16-98

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

Company Name Bronson Water Wells Firm No. 360
Firm Official Clint Bronson Date 6-22-98
and
Driller or Operator _____ Date _____
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES