

WOOD - Attach 7b

USE TYPEWRITER OR
BALLPOINT PEN



1. WELL OWNER Name <u>Chuck RASTINO</u> Address <u>537 WESTWOOD CT. JACARVILLE, CALIFORNIA 95688</u> Owner's Permit No. <u>95-83-N-104-1</u> 2. NATURE OF WORK ☐ New well ☐ Deepened ☐ Replacement ☒ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log) <u>Cleanout</u> 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 Existing casing Casing schedule: ☐ Steel ☐ Concrete ☐ Other _____ <table style="width: 100%;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ inches</td> <td>_____ inches + _____ feet</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> Was casing drive shoe used? ☐ Yes ☐ No Was a packer or seal used? ☐ Yes ☐ No Perforated? ☐ Yes ☐ No How perforated? ☐ Factory ☐ Knife ☐ Torch Size of perforation _____ inches by _____ inches <table style="width: 100%;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ 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 _____ Material used in seal: ☐ Cement grout ☐ Bentonite ☐ Pudding clay ☐ _____ 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 _____ 6. LOCATION OF WELL Sketch map location must agree with written location. N Subdivision Name _____ E S County <u>Kootenai</u> T R Lot No. _____ Block No. _____	Thickness	Diameter	From	To	_____ inches	_____ inches + _____ feet	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	7. WATER LEVEL Static water level <u>55</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 <u>60k</u> °F. Quality <u>Good</u> <i>Describe artesian or temperature zones below.</i> 8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table style="width: 100%;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td><u>5</u></td> <td><u>-</u></td> <td><u>8 hr</u></td> </tr> </tbody> </table> 9. LITHOLOGIC LOG <table style="width: 100%;"> <thead> <tr> <th>Bore Diam.</th> <th>Depth From To</th> <th>Material</th> <th>Water Yes No</th> </tr> </thead> <tbody> <tr> <td><u>10</u></td> <td><u>0</u> <u>400</u></td> <td><u>Granite Cuttings</u></td> <td><u>X</u></td> </tr> </tbody> </table> RECEIVED JAN 10 1983 Department of Water Resources Boise Idaho 83726 10. Work started <u>7-29-83</u> finished <u>7-29-83</u> 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>Associated Well Drillers Inc</u> Firm No. <u>Q45</u> Address <u>Box 743 C.D.A.</u> Date <u>7/29/83</u> Signed by (Firm Official) <u>[Signature]</u> and (Operator) <u>[Signature]</u>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>5</u>	<u>-</u>	<u>8 hr</u>	Bore Diam.	Depth From To	Material	Water Yes No	<u>10</u>	<u>0</u> <u>400</u>	<u>Granite Cuttings</u>	<u>X</u>
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USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

Form 238-7
6/89

POSTED

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

USE TYPEWRITER OR
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.

[illegible]

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