

3/95 AUG 22 1997

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

096829

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

NORTHERN REGION

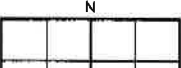
1. DRILLING PERMIT NO. 95-97-N-88
Other IDWR No. D0003194

2. OWNER:

Name **GALE PAT AKERS**
Address **5054 MEADOWBROOK RD.**
City **Coeur d'Alene** State **ID** Zip **83814**

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp **48N** North ☒ or South ☐
 Rge **6W** East ☐ or West ☒
 Sec. **12** 1/4 **S/E** 1/4 **S/E** 1/4
 Gov't Lot _____ County **Kootenai** 10 acres 40 acres 160 acres
 Lat: : : Long: : :
 Address of Well Site **ELDER RD / WELLER RD L**
 City **FIRST RD ON LEFT**
 (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			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	-18	6 sacks	Pour in

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"	+1	-99	.025	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ * Perforations Method **air perforator**

☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Linear
-60	-80	1 inch	200		Steel		☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

50 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 80/75 ft. Describe access port or
control devices: steel cap welded

SESE 12 48N 6W

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
28 GPM	100%	98	2 hrs.

Water Temp. **cold** Bottom hole temp **cold**

Water Quality test or comments: **clear, cold, no smell**

Depth first Water Encountered **60**_____

12. LITHOLOGIC LOG: (Describe repairs or abandonment) _____

[illegible]

13. DRILLER'S CERTIFICATION

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

Firm Name **United Drilling Inc.** Firm No. **414**

Firm Official Sam Williams Date 8/18/97

Supervisor or Operator: **Jason C. Beckham** Date: **8/18/97**

(Sign once if Firm Official & Operator)