

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

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

1. WELL TAG NO. D0022780 OCT 08 2002

Drilling Permit No: 785973 IDWR/North
Other IDWR No.

2. OWNER

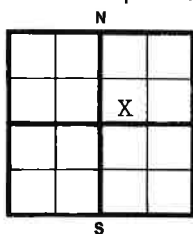
Name BOCKSTRUCK, ERIC Well Number: 473

Address 1304 S. CARPENTER LOOP

City POST FALLS State ID Zip 83854

3. LOCATION OF WELL by legal description

sketch map location must agree with written location



Twp. 50N ☒ North or ☐ South
Rge. 5W ☐ East or ☒ West
Sec. 18 1/4 SW 1/4 NE 1/4

Gov't Lot County KOOTENAI

Lat: : : Long: : :

Address of Well Site SAME AS ABOVE

City POST FALLS

(Give at least name of road + Distance to Road or Landmark)

Lt. Bk. 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 BAGS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 43'

Was drive shoe seal tested? ☐ Y ☐ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+2	43	.250	STEEL	☒	☐	☒	☐
4	-27	303	.160	PVC	☐	☒	☐	☐

Length of Headpipe Length of Tailpipe

9. PERFORATIONS/SCREENS

☒ Perforations Method SKILL SAW

☐ Screens Screen Type

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
-263	303	1/8 X 6	70	4	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

40 ft. below ground Artesian pressure lb.

Depth flow encountered 81 ft. Describe access port or control devices:

50 N 5W 18

11. WELL TESTS:

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
10			1 HR

Water Temp. COLD Bottom Hole Temp. COLD

Water Quality test or comments: CLEAR

Depth first Water encountered 65

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

				Water	
Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Y	N
8	0	3	Top Soil	☐	☐
8	3	19	Sandy Loam - Clay	☐	☐
8	41	43	Fractured Granite	☐	☐
6	43	47	Med. Granite	☐	☐
6	47	81	White w/Copper Soft Granite	☒	☐
6	81	112	White w/Black Granite	☐	☐
6	112	139	Black w/White Granite	☐	☐
6	139	145	White Granite	☐	☐
6	145	202	White w/Black Granite	☐	☐
6	202	261	Black w/White Granite	☐	☐
6	261	303	White w/Black	☐	☐

Completed Depth 303 (Measurable)
Date: Started 9/16/02 Completed 9/17/02

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 H2O Well Service, Inc. Firm No. 448

Firm Official Date 9-19-02

and

Supervisor or Operator Date 9-19-02

(Sign Once If Firm Official and Operator)

Todd Morgan