

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.

1. WELL OWNER Name <u>Jim Ratliff Jr</u> Address <u>Hwy 12 Box 461</u> Owner's Permit No. <u>Hayden Lake 83835</u>	7. WATER LEVEL Static water level <u>60</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 _____ °F. Quality _____ <i>Describe artesian or temperature zones below.</i>																																								
2. NATURE OF WORK <u>95-86-N-90</u> ☒ New well ☐ Deepened ☐ Replacement ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☒ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>2</u></td> <td></td> <td style="text-align: center;"><u>2 hrs</u></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>2</u>		<u>2 hrs</u>																																		
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>8"</td> <td>0</td> <td>40</td> <td>Clay + Broken granite</td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td>4"</td> <td>40</td> <td>60</td> <td>Broken granite</td> <td style="text-align: center;">X</td> <td></td> </tr> <tr> <td>6"</td> <td>60</td> <td>210</td> <td>Decomposed granite</td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td>4"</td> <td>210</td> <td>360</td> <td>Solid sandstone</td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td></td> <td>360</td> <td>375</td> <td>Broken granite</td> <td></td> <td style="text-align: center;">X</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	8"	0	40	Clay + Broken granite		X	4"	40	60	Broken granite	X		6"	60	210	Decomposed granite		X	4"	210	360	Solid sandstone		X		360	375	Broken granite		X
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	10. RECEIVED SEP 10 1986 Department of Water Resources Northern District Office																																								
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>.250</u> inches</td> <td></td> <td><u>1 1/2</u> feet</td> <td><u>40</u> feet</td> </tr> <tr> <td>_____ inches</td> <td></td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td></td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td></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 border="1" style="width: 100%; border-collapse: collapse;"> <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 <u>40'</u> 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 _____	Thickness	Diameter	From	To	<u>.250</u> inches		<u>1 1/2</u> feet	<u>40</u> feet	_____ inches		_____ feet	_____ feet	_____ inches		_____ feet	_____ feet	_____ inches		_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	11. RECEIVED SEP 15 1986 Department of Water Resources								
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6. LOCATION OF WELL Sketch map location <u>must</u> agree with written location. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">N</td> <td colspan="2"></td> <td style="text-align: center;">E</td> </tr> <tr> <td style="text-align: center;">W</td> <td style="text-align: center;">X</td> <td style="text-align: center;">S</td> <td></td> </tr> </table> Subdivision Name _____ Lot No. _____ Block No. _____ County _____ <u>S/W</u> <u>1/4</u> <u>S/W</u> <u>1/4</u> Sec. <u>8</u> T. <u>490</u> N. S. R. <u>4</u> E/W	N			E	W	X	S		10. WORK Work started <u>8/26</u> finished <u>8/29/86</u>																																
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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>H2O Well Service</u> Firm No. <u>448</u> Address <u>Hayden Lake</u> Date <u>9/4/86</u> by (Firm Official) <u>John Wheeler</u> and (Operator) <u>Caroline Skulge</u>	12. SCAN JAN 09																																								

USE ADDITIONAL SHEETS IF NECESSARY -- FORWARD THE WHITE COPY TO THE DEPARTMENT