



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region, 7600 N. Mineral Drive, Suite 100 • Coeur d'Alene, Idaho 83815

Phone: (208) 762-2800 • Fax: (208) 762-2819 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

DAVID R. TUTHILL, JR.
Director

March 15, 2008

Ms. Ellen Larsen
6734 W Sturgeon RD
Rathdrum, ID 83858

Dear Ms. Larsen:

Thanks for the information you have provided to the Idaho Department of Water Resources (IDWR) concerning Water Right Permits 95-8998, 95-8999, and 95-9120. Enclosed is a Point of Diversion (POD) photo for Permit 95-9120 taken during my August 2007 Field Exam and information about the domestic wells that we discussed during my visit on March 14, 2007.

The attached photograph, taken in August 2007, shows a dug-out spring entering the Permit 95-9120 pond shown in the background. I believe this is the Point of Diversion; or source of water; for the pond instead of the unnamed stream that we discussed on March 14th. I did not see a stream that travels several hundred feet or more through a heavily forested area to fill the pond.

Please contact me as soon as it is possible to obtain access to the Permit 95-9120 pond, POD and irrigation system or the Permit 95-8999 domestic and irrigation system. I will confirm the POD location, pond storage and irrigated area for Permit 95-9120. I will also confirm the characteristics for the 95-8999 domestic and irrigation systems. A person familiar with the systems must be present.

Enclosed are Well Drillers Reports for the two new domestic wells that we discussed. Owners of small domestic use wells that are used for a single residence and not more than ½ acre of irrigation may not be required to obtain an Idaho Water Right. The Report for Tag D0041489 indicates this well produces 20 Gallons Per Minute. Wells with this volume are often used to supply more than one residence and to irrigate more than ½ acre. I recommend that you contact IDWR for assistance before deciding against application for an Idaho water right and/or filing on these wells under the North Idaho Adjudication. Please call me at (208) 762.2816 with any questions.

Sincerely,

Shaun Maxey
Idaho Department of Water Resources, Northern Region
7600 Mineral DR, Ste. 100
Coeur d'Alene, ID 83815

Enclosure(s)

95-8998

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only			
Well ID No. _____			
Inspected by _____			
Twp _____	Rge _____	Sec _____	
1/4 _____	1/4 _____	1/4 _____	
Lat: _____	_____	Long: _____	_____

1. WELL TAG NO. D 0041489
 DRILLING PERMIT NO. 840747
 Water Right or Injection Well No. _____

2. OWNER: Per & Ellen Larsen
 Name _____
 Address 6734 W. Sturgeon rd.
 City Rathdrum State Id. Zip 83858

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 52 North ☒ or South ☐
 Rge. 4 East ☐ or West ☒
 Sec. 19 1/4 SE 1/4 SE 1/4
 Gov't Lot _____
 County Kootenai
 Lat: _____ Long: _____
 Address of Well Site Same as above
 City Rathdrum
 (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 Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>19</u>	<u>200 lbs</u>	<u>overbore</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 19'
 Was drive shoe seal tested? ☒ Y ☐ N How? Air Pressure

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+1</u>	<u>-19</u>	<u>250</u>	<u>Steel</u>	☒	☐	☒	☐
<u>4"</u>	<u>-6</u>	<u>377</u>	<u>220</u>	<u>PVC</u>	☐	☒	☐	☐

Length of Headpipe _____ Length of Tailpipe _____
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Sawcut
 Screen Type & Method of Installation N/A

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>306</u>	<u>377</u>	<u>1/8x6</u>	<u>140</u>	<u>4</u>	<u>Pvc.</u>	☐	☒

10. FILTER PACK N/A

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
110 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices:
6" Bolted Well Cap
500' 200' 19'

12. WELL TESTS:
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>20</u>			

Water Temp. Cool Bottom hole temp. Cool
 Water Quality test or comments: Good

13. LITHOLOGIC LOG: (Describe repairs or abandonment) Depth first Water Encounter 170'

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
<u>8"</u>	<u>0</u>	<u>19</u>				
<u>6"</u>	<u>19</u>	<u>377</u>				
	<u>0</u>	<u>235</u>	<u>Granite</u>		☒	
	<u>235</u>	<u>377</u>	<u>Hard Granite</u>		☒	

RECEIVED
 AUG 25 2006
 IDWR/North

 **AQUA DRILLING
& EXPLORATION INC.**
 PO BOX 2850
 HAYDEN, ID 83835-2850

Completed Depth 377' (Measurable)
 Date: Started 7-10-06 Completed 7-11-06

14. DRILLER'S CERTIFICATION
 I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
AQUA DRILLING & EXPLORATION INC.
 Company Name Scott M. Brown Firm No. 163
 Principal Driller Wayne Miller Date 7-11-06
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____
 Principal Driller and Rig Operator Required.

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

1. WELL TAG NO. D 0051748

DRILLING PERMIT NO

Water Right or Injection Well No.

2. OWNER:

Name PER LARSON

Address 6734 W. STURGEON

City RATHDRUM State ID Zip 83858

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. Or Directions to Well.

Twp. 52 North ☒ or South ☐Rge. 04 East ☐ or West ☒

Sec. 19 1/4 NE 1/4 NE 1/4

Gov't Lot County KOOTENAI

Lat: N47:50:660 Long: W116:52:406

Address of Well Site 1 mile in Sturgeon

Road on left City Rathdrum

Lt. Blk. Sub. Name

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

5. TYPE OF WORK check all that apply

☒ New Well ☐ Modify ☐ Abandonment ☐ Other

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other

7. SEALING PROCEDURES

Seal Material	From	To	Weight/Volume	Seal Placement Method
BENTONITE	0	18	200 LBS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18'Was drive shoe seal tested? ☒ Y ☐ N How? AIR PRESSURE

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	18'	1/4	STEEL	☒	☐	☐	☐
4"	7	960	SCH40	PVC	☐	☒	☐	☐

Length of Headpipe 20' Length of Tailpipe 953'

Packer ☐ Y ☒ N Type

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method	SKIL SAW						
Screen Type & Installation	From	To	Slot Size	Number	Diameter	Material	Casing
	900'	960'	1/4X6'	200	4"	PVC	☒

10. FILTER PACK

Filter Material	From	To	Weight/Volume	Placement Method
N/A				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

170 Ft. below ground Artesian pressure lb.

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

CAP. WELDED

Office Use Only			
Well ID No.			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat:	:	Long:	:

12. Well Tests:

☐ Pump ☐ Baller ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
3 GPM		960'	

Water Temp. COLD Bottom hole temp COLD

Water Quality test or comments: APPEARS CLEAR W/ NO SMELL

Depth first Water Encounter 170'

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	15	TOP SOIL BROKEN GRANITE		
8	15	18	SOLID GRANITE (SET 6" CASING)		
6	18	130	SOLID GRANITE		
6	460	150	DECOMPOSED GRANITE & MICA		
6	150	170	SOLID GRANITE		
6	170	174	DECOMPOSED GRANITE & MICA 1 GPM	X	
6	174	180	SOLID GRANITE		
6	180	190	DECOMPOSED GRANITE 2-3 GPM	X	
6	190	220	SOLID GRANITE		
6	220	245	DECOMPOSED GRANITE & MICA		
6	245	270	SOLID GRANITE		
6	270	274	DECOMPOSED GRANITE & MICA		
6	274	283	SOLID GRANITE		
6	283	295	DECOMPOSED GRANITE 1-2 GPM	X	
6	295	312	SOLID GRANITE		
6	312	320	DECOMPOSED GRANITE & MICA		
6	320	335	SOLID GRANITE		
6	335	365	DECOMPOSED GRANITE & MICA		
6	365	395	SOLID GRANITE		
6	395	405	DECOMPOSED GRANITE & MICA		
6	405	417	SOLID GRANITE		
6	417	425	DECOMPOSED GRANITE 1-2 GPM	X	
6	425	435	SOLID GRANITE		
6	435	460	DECOMPOSED GRANITE & MICA		
6	460	477	SOLID GRANITE		
6	477	487	BROKEN GRANITE		
6	487	510	BROKEN DECOMPOSED GRANITE 2-3 GPM	X	
6	510	605	DECOMPOSED GRANITE		

Completed Depth 960' (Measurable)

Date: Started 5/14/07 Completed 5/17/07

14. DRILLER'S CERTIFICATION

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

Company Name AMERICAN WELL DRILLING Firm No. 675

Principal Driller Date 7-16-07

And Driller or Operator II Date 7-16-07

Operator I Date

Principal Driller and Rig Operator Required
Operator I must have signature of Driller/Operator II

62N 4W 19

WELL DRILLER'S REPORT

1. WELL TAG NO. D 0051748
 DRILLING PERMIT NO _____
 Water Right or Injection Well No. _____

2. OWNER:

Name PER LARSON
 Address 6734 W. STURGEON
 City RATHDRUM State ID Zip 83858

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. Or Directions to Well.

Twp. 52 North ☒ or South ☐
 Rge. 04 East ☐ or West ☒
 Sec. 19 $\frac{1}{4}$ NE $\frac{1}{4}$ (40 acres) NE $\frac{1}{4}$ (160 acres)

Gov't Lot _____ County KOOTENAI

Lat: _____ Long: _____

Address of Well Site 1 MILE IN STURGEON

ROAD ON LEFT _____ City RATHDRUM

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight/Volume	Seal Placement Method
BENTONITE	0	18	200 LBS	OVERBORE

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 18'

Was drive shoe seal tested? ☒ Y ☐ N How? AIR PRESSURE

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	18'	1/4	STEEL	☒	☐	☐	☐
4"	7	960	SCH40		☐	☒	☐	☐

Length of Headpipe 20' Length of Tailpipe 953'
 Packer ☐ Y ☒ N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method	SKILL SAW						
Screen Type & Installation	From	To	Slot Size	Number	Diameter	Material	Casing
	900'	960'	200	4"	PVC	PVC	☐
							☒

10. FILTER PACK

Filter Material	From	To	Weight/Volume	Placement Method
N/A				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

170 Ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: STEEL.
 CAP, WELDED

Office Use Only

Well ID No. _____
 Twp 1/4 Rge 1/4 Sec 1/4
 Lat: _____ Long: _____

12. Well Tests:

☐ Pump ☐ Baller ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
3GPM			

Water Temp. COLD Bottom hole temp COLD

Water Quality test or comments: APPEARS COLD W/NO SMELL

Depth first Water Encounter 170'

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
6	605	630	SOLID GRANITE		
6	630	672	DECOMPOSED GRANITE & MICA		
6	672	675	SOLID GRANITE		
6	675	705	DECOMPOSED GRANITE		
6	705	720	SOLID GRANITE (CHANGED BIT 5 7/8)		
5 7/8	720	727	SOLID GRANITE		
5 7/8	727	735	DECOMPOSED GRANITE & MICA		
5 7/8	735	850	SOLID GRANITE MOSTLY QUARTZ 75%		
5 7/8	850	860	DECOMPOSED GRANITE W/ 60% MICA		
			VERY SOFT		
5 7/8	860	960	SOLID GRANITE		

RECEIVED

JUL 25 '07

IDWR/North

Completed 960' (Measurable)

Depth _____
 Date: Start 5/14/2007 Completed 5/17/2007

14. DRILLER'S CERTIFICATION

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

Company Name AMERICAN WELL DRILLING Firm No. 675
 Principal Driller _____ Date 7/16/07

And
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____

Principal Driller and Rig Operator Required
 Operator I must have signature of Driller/Operator II