

Bureau of Land Management

Coeur d'Alene District Office

3815 N. Schreiber Way

Coeur d'Alene, Idaho 83815

Phone: 208-769-5000

Fax: 208-769-5050

BLM



Fax Cover Sheet

To: Michele Edl - IDWR

Phone: _____ Fax: 208 287-6700

Office: _____

From: Brian White

Phone: 208 769-5031

Number of pages including cover sheet: 4

Remarks: _____

WELL TEST DATA SHEET

DURATION OF 12 HRS.

CUSTOMER NAME: <u>Blackwell Island Recreation Site</u>							
ADDRESS:							
WELL LOCATION: <u> Hwy 95 Coeur d'Alene </u> RECOVERY TIME: <u>0</u>							
COUNTY: <u>Kootenai</u> STATIC WATER LEVEL PRIOR TO PUMPING: <u>11'</u>							
DATE: <u>8-24-02</u> PUMP ON: <u>12 PM</u> PUMP OFF: <u>12 AM</u>							
INITIALS	START TIME	SWL	PWL =	DRAWDOWN	/ GPM =	SPEC CAP	QUALITY
RCM	12:00 PM	11'		0	15		cloudy
	12:01	11'		0	18		"
	12:02	11'		0	22		"
	12:03	11'		0	26		"
	12:04	11'		0	34		clear
	12:05	11'		0	36		"
	12:10	11'		0	37.1		"
	12:20	11'		0	37.8		"
	12:30	11'		0	37.8		"
	12:40	11'		0	37.8		"
	12:50	11'		0	37.8		"
	1:00	11'		0	37.8		"
	1:15	11'		0	37.8		"
	1:30	11'		0	37.8		"
	1:45	11'		0	37.8		"
	2:00	11'		0	37.8		"
	2:30	11'		0	37.8		"
	3:00	11'		0	37.8		"
	4:00	11'		0	37.8		"
	5:00	11'		0	37.8		"
	6:00	11'		0	37.8		"
	7:00	11'		0	37.8		"
	8:00	11'		0	37.8		"
	9:00	11'		0	37.8		"
	10:00	11'		0	37.8		"
	11:00	11'		0	37.8		"
	12:00	11'		0	37.8		"
37.8 GPM Represents test pump maximum output. Well capable of producing 60+ GPM							
TEST PERFORMED BY: <u>David McCarty</u> Average Pumping Rate: <u>37.8 @ 11' ft. SWL</u>							

McCarty Drilling & Pump

10035 N. Memory Lane, Rathdrum Idaho 83858

Phone (208) 687-9170 FAX (208) 687-4395 TOLL FREE 888-513-8000

Tested @ 150 psi ± 5 psi

Installed 8/30/02



Blackwell Island
Parks & Rec. Project

STA-RITE Irrigation Pump

OWNERS MANUAL

INSTALLATION AND OPERATING INSTRUCTIONS

U.S. Patent 5,133,639

Signature 2000®

Stainless Steel Series

Composite Series

4" SUBMERSIBLE PUMPS

Two and Three Wire

Single and Three Phase

1/2 through 10 H.P.

60 Hz

Record the following information from the motor and pump nameplates for future reference:

Pump Model No. LS0P4JH-03

Pump Serial No. 1E01

Motor Model No. 23413175202

Motor Serial No. 02F18 24-2965

H.P. Volts/Hz/Ph 5HP 230V 60Hz 3P

Rated Amp Draw 15.9 - 17.8

STA-RITE INDUSTRIES, INC.,

DELAN, WISCONSIN 53115

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S280 (Rev. 2/12/02)

Form 238-7
3/02IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT1. WELL TAG NO. D 00226A1
Drilling Permit No. _____
Water Right or Injection Well No. _____2. OWNER:
Name Bureau of Land Management
Address 1808 N. 3rd Street
City Coeur d'Alene State ID Zip 838143. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 50 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 14 1/4 1/4 1/4 NW 1/4
Gov't Lot 4 County Kootenai
Lat: _____ Long: _____
Address of Well Site Blackwell Island Recreation Site
Blackwell Island & Hwy 95 City Coeur d'Alene
(Show if well is on road - otherwise it must be located)
Ch. _____ 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
Bentonite 0 18 700# dry granular
Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 24'
Was drive shoe seal tested? ☐ Y ☐ N How? _____8. CASING/LINER:
Diameter From To Gauge Material Casing Liner Welds Threading
6" +3 24 250 Steel ☒ ☐ ☐ ☐
Length of Headpipe 2' Length of Tailpipe none
Packer ☐ Y ☐ N Type _____9. PERFORATIONS/SCREENS PACKER TYPE
Perforation Method _____
Screen Type & Method of Installation S.S. Telescoping
From To Slot Size Number Diameter Material Casing Liner
24 29 40 _____ S.S. ☐ ☐10. FILTER PACK
Filter Material From To Weight/Volume Placement Method

_____11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
11 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describes access port or control device: _____Office Use Only
Well ID No. _____
Inspected by _____
Twp. _____ Rge. _____ Sec. _____
1/4 1/4 1/4
Lat: _____ Long: _____

12. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
<u>60+</u>	<u>0</u>		<u>12 hrs.</u>

Water Quality test or comments: _____
Bottom hole temp. _____

13. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Core Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>12</u>	<u>0</u>	<u>1</u>	<u>Topsoil, sand, coarse</u>		☒
	<u>1</u>	<u>3</u>	<u>Sand, silt, brown</u>		☒
	<u>3</u>	<u>9</u>	<u>Gravel, fine, silt, boulder</u>		☒
	<u>9</u>	<u>11</u>	<u>Sand, coarse, silt, boulder</u>		☒
	<u>11</u>	<u>16</u>	<u>Sand, coarse, cobbles</u>	☒	
	<u>16</u>	<u>18</u>	<u>Sand, gravel</u>	☒	
	<u>18</u>	<u>19</u>	<u>Silt, tan, sand, coarse</u>	☒	
	<u>19</u>	<u>23</u>	<u>Sand, silt</u>	☒	
	<u>23</u>	<u>26</u>	<u>Sand, cemented w/silt</u>		☒
	<u>26</u>	<u>29</u>	<u>Sand, coarse, w/ silt</u>		☒

Developed well screen with
air jetting tool 11 hours.Completed Depth 29' (Measurable)
Date Started 08/20/02 Completed 08/23/02

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 McCarty Drilling & Pump Inc. Firm No. 586
Principal Driller [Signature] Date 8-26-02
and _____ Date _____
Driller or Operator II _____ Date _____
Operator I _____ Date _____Principal Driller and Rig Operator Required.
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES