

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D0058194

Drilling Permit No. 8120212

Water right or injection well # _____

2. OWNER: PEGGY KELLY

Name _____

Address 7420 W. JOHANNSEN AVE.

City NINE MILE FALLS State WA. Zip 99026

3. WELL LOCATION:

Twp. S9 North ☒ or South ☐ Rge. 04 East ☐ or West ☒

Sec. 10 1/4 NW 1/4 SW 1/4

Gov't Lot _____ County BONNER

Lat. 48 ° 28 : 709 (Deg. and Decimal minutes)

Long. 116 ° 50 : 687 (Deg. and Decimal minutes)

Address of Well Site MISSOURI ST.

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

Lot. 7 Blk. 12 Sub. Name _____

4. USE:

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

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☐ Air Rotary ☐ Mud Rotary ☒ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method/procedure
<u>BENTONITE</u>	<u>0</u>	<u>38</u>		<u>TEMP CASING</u>

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
<u>6"</u>	<u>1</u>	<u>112</u>	<u>250</u>		☒	☐	☐	☒
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 112

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____

Manufactured screen ☒ Y ☐ N Type JOHNSON

Method of installation PULLBACK

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
<u>117</u>	<u>112</u>	<u>14</u>		<u>6"</u>	<u>SS</u>	

Length of Headpipe _____ Length of Tailpipe _____

Packer ☒ Y ☐ N Type K-PACKER

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method

11. FLOWING ARTESIAN:

Flowing Artesian? ☐ Y ☒ N Artesian Pressure (PSIG) _____

Describe control device _____

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 96' Static water level (ft) 83.5'

Water temp. (°F) _____ Bottom hole temp. (°F) _____

Describe access port _____

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
<u>5'</u>	<u>86 gpm</u>	<u>60</u>

Test method:

Pump ☐ Bailer ☒ Air ☐ Flowing artesian ☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
<u>10</u>	<u>0</u>	<u>40</u>	<u>2ft Top Soil SAND & Boulders</u>		☒
<u>6</u>	<u>0</u>	<u>40</u>	<u>SAME AS SURFACE SEAL</u>		☒
<u>6</u>	<u>40</u>	<u>50</u>	<u>FINE SAND</u>		☒
<u>6</u>	<u>50</u>	<u>60</u>	<u>FINE SAND</u>		☒
<u>6</u>	<u>60</u>	<u>70</u>	<u>FINE SAND</u>		☒
<u>6</u>	<u>70</u>	<u>80</u>	<u>FINE SAND</u>		☒
<u>6</u>	<u>80</u>	<u>90</u>	<u>FINE SAND 7 TO 8 THS AT 95'</u>	☒	
<u>6</u>	<u>90</u>	<u>100</u>	<u>7 TO 8 THS SAND</u>	☒	
<u>6</u>	<u>100</u>	<u>110</u>	<u>7 TO 8 THS SAND</u>	☒	
<u>6</u>	<u>110</u>	<u>117</u>	<u>10 THS + AT 111 TO 117</u>	☒	

RECEIVED

SEP 20 2010

IDWR / NORTH

Completed Depth (Measurable):

117'

Date Started: 9-9-10

Date Completed: 9-13-10

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 Carl Pitts + Sons Co. No. 1168

*Principal Driller Steve Pitts Date 9-15-10

*Driller [Signature] Date _____

*Operator II _____ Date _____

Operator I [Signature] Date Sep-15-2010

* Signature of Principal Driller and rig operator are required.

S9N 04W 10