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IDWR

Form 238-7
8/95

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

POSTED

Use Typewriter or Ballpoint Pen

097155

Office Use Only
Inspected by _____
Twp____ Rge____ Sec____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. 97 - 96 - N - 0053 - ____
Other IDWR No. _____

2. OWNER:
Name Ronald L. and R. Maudelle Carlson
Address HCO 5 Box 49
City Priest River State ID Zip 83856

3. LOCATION OF WELL by legal description:
Sketch map location must agree with written location.

N / W / E / S — x

Twp. 57 North XX or South ☐
Rge. 05 East ☐ or West ☒
Sec. 26, ____ 1/4 NE 1/4 SW 1/4
(10 acres / 40 acres / 160 acres)
Gov't Lot ____ County Bonner
Lat: : : Long: : :
Address of Well Site Pine Creek
City Priest River
(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.)
XX New Well ☐ Modify ☐ Abandonment ☐ Other ____

6. DRILL METHOD
☒ Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other ____

7. SEALING PROCEDURES

SEAL/FILTER PACK Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	0	19	3sacks	Overbore

Was drive shoe used? ☒Y ☐ N Shoe Depth(s) ____
Was drive shoe seal tested? ☐Y ☐N How? ____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1	255	250	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe ____ Length of Tailpipe ____

9. PERFORATIONS/SCREENS
☐ Perforations Method ____
☐ Screens Screen Type ____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
200 ft. below ground Artesian pressure ____ lb.
Depth flow encountered 60 ft. Describe access port or control devices: ____

NESW 26 57N 5W

11. WELL TESTS:
☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
5 gpm		255'	1 hr.

Water Temp. 51F Bottom hole temp. ____
Water Quality test or comments: clear
Depth first Water Encountered 60'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	19	Gray clay w/fine sand		
			lenses		x
6	19	189	Gray clay w/fine sand		
			lenses	x	
6	189	255	Broken shale/brown	x	

Completed Depth 255' (Measurable)
Date: Started 9-4-96 Completed 9-5-96

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 Intermountain Drilling Firm No. 0513
Firm Official ____ Date 9-5-96
and
Supervisor or Operator same Date ____
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES