Form 238-7
6/07

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0073273 73427
Drilling Permit No. 885552
Water right or injection well # _____

2. OWNER:
Name Nick Maniniti
Address 8355 S.W. Hemlock St.
City Portland State OR Zip 97223

3. WELL LOCATION:
Twp. 56 North ☒ or South ☐ Rge 04 East ☐ or West ☒
Sec. 29 10 acres 1/4 NW 40 acres 1/4 NE 160 acres 1/4
Gov't Lot _____ County Bonner
Lat. 48 ° 10'.755 (Deg. and Decimal minutes)
Long. 116 ° 51'.444 (Deg. and Decimal minutes)
Address of Well Site East Settlement Rd
(Give at least name of road + Distance to Road or Landmark) City Priest River
Lot. _____ Blk. _____ 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 ft³)	Placement method/procedure
Bentonite	0	40	1200 lbs	Poor

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/ Schedule	Material	Casing	Liner	Threaded	Welded
6"	+2	38	250	steel	☒	☐	☐	☒
					☐	☐	☐	☐
4"	20	260	200	PVC	☐	☒	☐	☐
					☐	☐	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 38

9. PERFORATIONS/SCREENS:
Perforations ☒ Y ☐ N Method Saw cut
Manufactured screen ☐ Y ☒ N Type _____
Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
200	260	.10x4	60	4"	PVC	200

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

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method
	N/A			

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) _____ Static water level (ft) 23'
Water temp. (°F) cold Bottom hole temp. (°F) _____
Describe access port welded cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	5+	3 hrs

Test method: Pump ☐ Bailer ☐ Air ☒ Flowing artesian ☐

Water quality test or comments: good

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	Water N
10	0	40	Boulders + Sand		X
6	40	100	Decomp. granit	X	
	100	260	salt + pepper granit	X	

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IDWR / NORTH

Completed Depth (Measurable): 260
Date Started: 6.13.17 Date Completed: 6.27.17

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 Pioneer Well Drilling Co. No. 725
*Principal Driller John McDonald Date 6-27-17
*Driller John McDonald Date 6-27-17
*Operator II _____ Date _____
Operator I _____ Date _____

*** Signature of Principal Driller and rig operator are required.**