

97-8308 EVIDENCE OF PRIORITY

BONNER COUNTY PARCEL DATA

Field	Value
ACRES	4.3
ADDRESS1	1617 EASTSIDE RD
ADDRESS2	
CITY	PRIEST RIVER
COUNTY	Bonner
ID	15675662
LEGAL1	18-56N-4W EAST SIDE TRACTS LOT 1 1ST ADD 1994 FLEETWOOD 27 X 66 RP
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
OWNER	NAUMANN, HOWARD & BETTY
P_ADDRESS	1617 EASTSIDE RD
P_ZIPCODE	83856
ParcelCount	1
PIN	RP027520000010A
SHAPE	Polygon
SOURCE	<null>
STATE	ID
SUB_NAME	EAST SIDE TRACTS 1ST ADD
UPDATED	6/17/2023
YEAR_BUILT	1994
ZIPCODE	83856



STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

USE TYPEWRITER OR
BALLPOINT PEN

1. WELL OWNER Name <u>James + Linda Martin</u> Address <u>P.O. Box 567 Priest River, Idaho 83454</u> Drilling Permit No. <u>97-93-N-40-000</u> Water Right Permit No. _____	7. WATER LEVEL Static water level <u>28</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☒ Cap ☐ Plug Temperature <u>50</u> °F. Quality <u>clear</u> Describe artesian or temperature zones below.																												
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Well diameter increase ☐ Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)	8. WELL TEST DATA ☐ Pump ☐ Bailor ☐ Air ☐ Other _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>30+</u></td> <td><u>97'</u></td> <td><u>1 hr.</u></td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>30+</u>	<u>97'</u>	<u>1 hr.</u>																						
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)	9. LITHOLOGIC LOG <u>090554</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore Diam.</th> <th colspan="2">Depth</th> <th rowspan="2">Material</th> <th colspan="2">Water</th> </tr> <tr> <th>From</th> <th>To</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td><u>10</u></td> <td><u>0</u></td> <td><u>16</u></td> <td><u>sand-gravel-boulders</u></td> <td></td> <td>☒</td> </tr> <tr> <td><u>10 1/2</u></td> <td><u>16</u></td> <td><u>90</u></td> <td><u>fine sand w/ clay lenses</u></td> <td></td> <td>☒</td> </tr> <tr> <td><u>6</u></td> <td><u>90</u></td> <td><u>97</u></td> <td><u>sand + gravel</u></td> <td></td> <td>☒</td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	<u>10</u>	<u>0</u>	<u>16</u>	<u>sand-gravel-boulders</u>		☒	<u>10 1/2</u>	<u>16</u>	<u>90</u>	<u>fine sand w/ clay lenses</u>		☒	<u>6</u>	<u>90</u>	<u>97</u>	<u>sand + gravel</u>		☒
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____	10. <u>7-27-93</u> finished <u>7-27-93</u>																												
5. WELL CONSTRUCTION Casing schedule: ☐ Steel ☐ Concrete ☐ Other _____ Thickness <u>1.750</u> inches Diameter <u>6</u> inches From <u>1</u> feet To <u>92</u> feet Was casing drive shoe used? ☒ Yes ☐ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches Number _____ perforations From _____ feet To _____ feet Well screen installed? ☒ Yes ☐ No Manufacturer's name <u>Cook</u> Type <u>stainless</u> Model No. _____ Diameter <u>6</u> Slot size <u>30</u> Set from <u>92</u> feet to <u>97</u> feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? ☐ Yes ☒ No Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>19</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Pudding clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☐ Temp. surface casing Method of joining casing: ☐ Threaded ☒ Overbore to seal depth ☒ Welded ☐ Solvent Weld ☐ Cemented between strata Describe access port _____	11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>Intermountain Dwg</u> Firm No. <u>513</u> Address <u>HCR 5 Box 44</u> <u>Priest River, Idaho 83454</u> Signed by (Firm Official) <u>[Signature]</u> and <u>Same</u> (Operator)																												
6. LOCATION OF WELL Sketch map location must agree with written location. N <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">W</td> <td style="width: 25%; text-align: center;">E</td> </tr> </table> Subdivision Name <u>Eastside Rd</u> Lot No. _____ Block No. _____ County <u>Bonner</u> <u>SW</u> 1/4 Sec. <u>18</u> T. <u>56</u> N. R. <u>4</u> E. <u>W</u>	W	E	USE ADDITIONAL SHEETS IF NECESSARY — FORWARD THE WHITE COPY TO THE DEPARTMENT																										
W	E																												

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AUG 27 1993

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