Form 238-7
6/02

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Well ID No.
Inspected by
Twp ____ Rge ____ Sec ____
____ 1/4 ____ 1/4 ____ 1/4
Lat: : : Long: : :

1. WELL TAG NO. D 833890
DRILLING PERMIT NO. D0040194
Water Right or Injection Well No.

2. OWNER:
Name Marys Feed&Farm (Mary Oneal)
Address 121 N Washington
City Newport State WA Zip 99156

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. 56 North ☒ or South ☐
Rge. 6 East ☐ or West ☒
Sec. 24, ____ 1/4 (10 acres) SE 1/4 (40 acres) SE 1/4 (160 acres)
Gov't Lot ____ County Bonner
Lat: : : **Long:** : :
Address of Well Site Hwy 2
City Oldtown
(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.)
☒ 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	350lbs	overbore

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 57½
Was drive shoe seal tested? ☐ Y ☒ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6	+1½	57½	250	steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Length of Headpipe ____ Length of Tailpipe ____
Packer ☒ Y ☐ N Type k-packer

9. PERFORATIONS/SCREENS PACKER TYPE
Perforation Method
Screen Type & Method of Installation telescoping(stainless)

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
57½	62½	14		5	steel	☐	☐
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

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

5LN 6W 24

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

Yield gal./min.	Drawdown	Pumping Level	Time
60		60-65	1½hr

Water Temp. cold Bottom hole temp.
Water Quality test or comments: clear
Depth first Water Encounter 18

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	3	fill		
	3	12	silty brown clay		
	12	18	sand some pea gravel		
6	18	64	sand some pea gravel	x	

RECEIVED
JUL 12 2005
IDWR/NORTH

Completed Depth 64ft (Measurable)
Date: Started 6-8-05 Completed 6-8-05

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 Bronson Water Wells Firm No. 360
Principal Driller Clint Bronson Date 6/10/05
and
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