

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D D0088464
Drilling Permit No. 900940

Water right or injection well #
2. OWNER: Kelly & Randi Flaherty, Jake & Noelle Flaherty

Name
Address P.O. Box 1505
City Priest River State ID Zip 83856

3. WELL LOCATION:
Twp. 59N North ☒ or South ☐ Rge. 4W East ☐ or West ☒
Sec. 23 1/4 NW 1/4 SE 1/4

Gov't Lot _____ County Bonner
Lat. 48 26.959 (Deg. and Deciml minutes)

Long. 116 48.868 (Deg. and Deciml minutes)
Address of Well Site 22 Bushwood Dr

City Coolin
(Give at least name of road + Distance to Road or Landmark)
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 ft ³)	Placement method/procedure
Bentonite	0	38	1150 lbs	Temp. Casing

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner	Threaded	Welded
6"	+2	133	.250	Steel	☒	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 133'

9. PERFORATIONS/SCREENS:
Perforations ☐ Y ☐ N Method _____
Manufactured screen ☒ Y ☐ N Type Alloy
Method of Installation Telescoping

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
133	138	20	5'	5"	S.S	

Length of Headpipe 5' 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) 77' Static water level (ft) 54'
Water temp. (°F) Cold Bottom hole temp. (°F) Cold
Describe access port Welded Steel Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Ballor	Air	Flowing artesian
	15	60	☐	☐	☒	☐

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
10	0	6	Topsoil		X
10	6	16	Sand & Gravel		X
10	16	38	Sand, Gravel & Clay		X
8	38	77	Sand, Gravel & Clay		X
8	77	85	Sand & Gravel	X	
8	85	110	Sand, Gravel & Clay	X	
8	110	140	Sand & Gravel	X	

RECEIVED
AUG 25 2021
IDWR/NORTH

Completed Depth (Measurable): 138'
Date Started: July 20, 2021 Date Completed: July 20, 2021

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 H2O Well Service Inc Co. No. 448
*Principal Driller [Signature] Date 8-2-21
*Driller [Signature] Date 8-2-21
*Operator II _____ Date _____
Operator I [Signature] Date 8-2-21
* Signature of Principal Driller and rig operator are required.