

97-8611 EVIDENCE OF PRIORITY

BONNER COUNTY PARCEL DATA



RECEIVED

Form 238-7
3/95 APR 01 1996



DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

097726

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 _____ 1/4 _____ 1/4 _____
Lat: _____ Long: _____

1. DRILLING PERMIT NO. 97-96 N-10
Other IDWR No. _____

2. OWNER:
Name RAENALDA SMITH
Address W. 803 THIRD
City NEWPORT State WA Zip 99156

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

North ☒ or South ☐
Rge. 7 East ☐ or West ☒
Sec. 14 1/4 SW 1/4 SW 1/4
Gov't Lot _____ County BONNER 10 acres 10 acres 100 acres
Lat: _____ Long: _____
Address of Well Site EAST SIDE
City _____
RD _____
(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/FILTER PACK	AMOUNT	METHOD
Material From To Sacks or Permits		
<u>BENTONITE</u> 0 20 5		<u>OVERBORE</u>

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 155'
Was drive shoe seal tested? ☒ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>41'</u>	<u>155'</u>	<u>250</u>	<u>STEEL</u>	☒	☐	☒	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

☐ Perforations Method _____
☒ Screens Screen Type COOL STAINLESS STEEL

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>155</u>	<u>165</u>	<u>.016</u>		<u>6"</u>		☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

80 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: WELL CAP
SWSW 14 58N 4W

11. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
<u>10 GPM</u>	<u>75'</u>	<u>155'</u>	<u>1 hr</u>

Water Temp. COLD Bottom hole temp. _____
Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>10</u>	<u>CLAY + GRAVEL</u>		☒
<u>8"</u>	<u>10</u>	<u>20</u>	<u>BLUE CLAY</u>		☒
<u>6"</u>	<u>20</u>	<u>110</u>	<u>BLUE CLAY</u>		☒
<u>6"</u>	<u>110</u>	<u>115</u>	<u>HARD PAN</u>		☒
<u>6"</u>	<u>115</u>	<u>145</u>	<u>BLUE CLAY</u>		☒
<u>6"</u>	<u>145</u>	<u>155</u>	<u>HARD PAN</u>		☒
<u>6"</u>	<u>155</u>	<u>165</u>	<u>WATER SAND</u>	☒	

Bob Pitts & Sons
Well Drilling
4775 Baldy Mt. Rd.
Sandpoint, Idaho 83864

263-3042

Completed Depth 165' (Measurable)
Date: Started 15 FEB 96 Completed 26 FEB 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 Bob Pitts & Sons Inc. Firm No. 235

Firm Official Bob Pitts Date 28-Feb-96

and Supervisor or Operator M.D.C. Date 26 FEB 96

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES