

97-8621 EVIDENCE OF PRIORITY

BONNER COUNTY PARCEL DATA

Field	Value
ACRES	4.9
ADDRESS1	845 S MANOR HEIGHTS DR
ADDRESS2	
CITY	POST FALLS
COUNTY	Bonner
ID	15688824
LEGAL1	17-58N-4W E2SWSWNW
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
OWNER	OSBORNE TRUST; OSBORNE, JAY & SHERRI L TRUSTEES
P_ADDRESS	776 CAMELOT LN
P_ZIPCODE	83856
ParcelCount	1
PIN	RP58N04W173901A
SHAPE	Polygon
SOURCE	<null>
STATE	ID
SUB_NAME	
UPDATED	6/17/2023
YEAR_BUILT	2005
ZIPCODE	83854-7779

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0040911
 DRILLING PERMIT NO. 836811
 Water Right or Injection Well No. _____

2. OWNER: Name Jay Osborne
Address P.O. Box 71
City Sarita LA State TX Zip 83369

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 58 North ☒ or South ☐
Rge. 4 East ☐ or West ☒
Sec. 17 1/4 SW 1/4 NW 1/4
Gov't Lot _____ 16 acres 40 acres 160 acres
County BONNE

Lat: : : Long: : :
Address of Well Site Camel Rock Rd. Off Murren Falls
kel City Pitts River

(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	300lbs		Temp Casm,

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 200'
Was drive shoe seal tested? ☐ Y ☒ N How?

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1	200	250	Steel	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

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

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method Factory
Screen Type & Method of Installation Cock Drill hole

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
20	205	20	304	6"	35	☐	☐
						☐	☐
						☐	☐

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

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

58N 4W 17

Office Use Only

Well ID No. _____

Inspected by _____

Twp _____ Rge _____ Sec _____

_____ 1/4 _____ 1/4 _____ 1/4

Lat: : : Long: : :

12. WELL TESTS:

☐ Pump	☒ ~~Bailer~~	☐ Air	☐ Flowing Artesian
Yield gal./min.	Drawdown	Pumping Level	Time
3	15"	195"	2 hrs

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

13. LITHOLOGIC LOG: (Describe repairs or abandonment) _____ Depth first Water Encounter 15
Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
8	0	20	clay		✓
6	20	50	Silty clay		✓
6	50	100	Clay		✓
6	100	108	Clay		✓
6	108	180	Sandy clay		✓
6	180	240	Sandy clay layers	✓	
6	240	205	Sand	✓	
6	205	207	Clay		✓

RECEIVED
DEC 28 2005
IDWR/North

Completed Depth 205' (Measurable)
Date: Started 10-18-05 Completed 11-15-05

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 Chapman & Sons Firm No. 168
Principal Driller Steve Miller Date 11-30-25
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