

97-8300 EVIDENCE OF PRIORITY

BONNER COUNTY PARCEL DATA

Field	Value
ACRES	4.4
ADDRESS1	335 CAVANAUGH BAY RD
ADDRESS2	
CITY	COOLIN
COUNTY	Bonner
ID	15690313
LEGAL1	10-59N-4W E 300FT OF SENESW S OF EAST SHORE RD E 300FT OF NESESW
LEGAL2	<null>
LEGAL3	<null>
LEGAL4	<null>
LEGAL5	<null>
LEGAL6	<null>
OWNER	BELLAH, KEVIN & ANNETTE
P_ADDRESS	335 CAVANAUGH BAY RD
P_ZIPCODE	83821
ParcelCount	1
PIN	RP59N04W106602A
SHAPE	Polygon
SOURCE	<null>
STATE	ID
SUB_NAME	
UPDATED	6/17/2023
YEAR_BUILT	1993
ZIPCODE	83821-9715

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESUSE TYPEWRITER OR
BALLPOINT PEN

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.

1. WELL OWNER Name <u>MARVIN DIKE</u> Address <u>P.O. BOX 11 COOLIN, ID.</u> Owner's Permit No. <u>97-71-N-26</u>		7. WATER LEVEL Static water level <u>63</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 _____ °F. Quality _____ 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 ☒ Bailer ☐ Air ☐ Other _____ <table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td><u>20</u></td><td><u>68</u></td><td><u>12</u></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>20</u>	<u>68</u>	<u>12</u>																																														
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3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG <table border="1"><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>6</u></td><td><u>0</u></td><td><u>1</u></td><td><u>TOPSOIL</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>1</u></td><td><u>23</u></td><td><u>SAND- HEAVY GRAVEL</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>23</u></td><td><u>35</u></td><td><u>SAND GRAVEL</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>35</u></td><td><u>93</u></td><td><u>FINE SAND WATER-65'</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>93</u></td><td><u>94</u></td><td><u>COURSE SAND</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>94</u></td><td><u>145</u></td><td><u>FINE SAND</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>145</u></td><td><u>155</u></td><td><u>MEDIUM SAND</u></td><td></td><td>☒</td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	<u>6</u>	<u>0</u>	<u>1</u>	<u>TOPSOIL</u>		☒		<u>1</u>	<u>23</u>	<u>SAND- HEAVY GRAVEL</u>		☒		<u>23</u>	<u>35</u>	<u>SAND GRAVEL</u>		☒		<u>35</u>	<u>93</u>	<u>FINE SAND WATER-65'</u>		☒		<u>93</u>	<u>94</u>	<u>COURSE SAND</u>		☒		<u>94</u>	<u>145</u>	<u>FINE SAND</u>		☒		<u>145</u>	<u>155</u>	<u>MEDIUM SAND</u>		☒
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4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dug ☐ Other _____		RECEIVED OCT 02 1991 Department of Water Resources RECEIVED SEP 26 1991 NORTHERN REGION IDWR																																																					
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>250</u> inches</td><td><u>6</u> inches</td><td><u>1</u> feet</td><td><u>150</u> feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> 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 <table border="1"><thead><tr><th>Number</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Well screen installed? ☒ Yes ☐ No Manufacturer's name <u>HAMPSON</u> Type <u>STAINLESS</u> Model No. _____ Diameter <u>5/8"</u> Slot size <u>30</u> Set from <u>150</u> feet to <u>155</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>18</u> Material used in seal: ☐ Cement grout ☒ Bentonite ☐ Puddling clay ☐ _____ Sealing procedure used: ☐ Slurry pit ☒ Temp. surface casing ☐ Overbore to seal depth Method of joining casing: ☐ Threaded ☒ Welded ☐ Solvent Weld _____ ☐ Cemented between strata Describe access port <u>PILESS CAP</u>				Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>150</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet																				
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6. LOCATION OF WELL Sketch map location must agree with written location. <table border="1"><tr><td>N</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>W</td><td></td><td></td><td></td><td></td><td>E</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Subdivision Name <u>MAP 175</u> <u>E. 475' OF T14R 292</u> Lot No. _____ Block No. _____ County <u>BONNER</u> _____ 1/4 _____ 1/4 Sec. <u>10</u> , T. <u>59</u> S. R. <u>4</u> W. <u>2</u>		N						W					E																			10. Work started <u>9/9/91</u> finished <u>9/17/91</u>																							
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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>WOOD WELL DRILLING</u> Firm No. <u>389</u> <u>N. 21303 NEWPORT HWY</u> Address <u>COLBERT, WA 99165</u> Date <u>9/17/91</u> Signed by (Firm Official) <u>Phyllis Wood</u> and _____ (Operator)																																																							

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT