Form 238-7
6/07

amended GPS to match well site address

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

1. WELL TAG NO. D 0082155
Drilling Permit No. 8911644
Water right or injection well # _____

2. OWNER:
Name Dan Brown
Address PO Box 138
City Coolin State ID Zip 83821

3. WELL LOCATION:
Twp. 59 North ☒ or South ☐ Rge. 04 East ☐ or West ☒
Sec. 23 ____ 1/4 (10 acres) SW 1/4 (40 acres) NE 1/4 (160 acres)
Gov't Lot _____ County Bonner
Lat. 48 ° 27.256' 27.26 (Deg. and Decimal minutes)
Long. 116 ° 48.822 (Deg. and Decimal minutes)
Address of Well Site 49 Bushwood Dr.
(Give at least name of road + Distance to Road or Landmark) City Coolin
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 ft³)	Placement method/procedure
Bentonite Chips	0	38	950 lbs.	Temp.Casing

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/ Schedule	Material	Casing	Liner	Threaded	Welded
6"	+2	130	.250	Steel	☒	☐	☐	☒
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

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

9. PERFORATIONS/SCREENS:
Perforations ☐ Y ☒ N Method _____
Manufactured screen ☒ Y ☐ N Type Stainless Steel
Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
130	140	20	10	5"	Steel	.250

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

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	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) 50' Static water level (ft) 50'
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)	Test method: Pump	Bailer	Air	Flowing artesian
NA	10 gpm	240	☐	☐	☒	☐
			☐	☐	☐	☐

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	Water N
12"	0	38	Sand and Gravel		X
8"	38	50	Sand and Gravel	X	
8"	50	130	Fine Sand	X	
8"	130	140	Coarse Sand	X	

RECEIVED
OCT 04 2019
IDWR / NORTH

Completed Depth (Measurable): 140'
Date Started: 09/30/2019 Date Completed: 10/02/2019

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 Horsley Drilling, Inc. Co. No. 632
*Principal Driller C. Mark Horsley Date 10/03/2019
*Driller Steve C. Horsley Date 10/03/2019
*Operator II _____ Date _____
Operator I _____ Date _____

*** Signature of Principal Driller and rig operator are required.**