

Form 23 SEP 08 2000
11/97 IDWR/North
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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

1. WELL TAG NO. D 0013543
DRILLING PERMIT NO. _____
Other IDWR No. 766141

2. OWNER:
Name Harry & Sasha Tefft
Address 353 Mt Abby Way
City Old Town State ID Zip 83856

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N
W
E
S
Twp. 56 North ☒ or South ☐
Rge. 05 East ☐ or West ☒
Sec. 18 1/4 NE 1/4 SE 1/4
Gov't Lot _____ County Bonner
Lat: _____ Long: _____
Address of Well Site 353 Mt Abby Way
City Old Town
(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 Pounds		
Bentonite 0 19 4 sacks		Overbore

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

Was drive shoe seal tested? ☐ Y ☐ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1	19	250	steel	☒	☐	☐	☐

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

Perforations Method
Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						☐	☐

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

17 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 41 ft. Describe access port or control devices: welded well cap

56 N 5 W 18

FORWARD WHITE COPY TO WATER RESOURCES

11. WELL TESTS:

☐ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
6+		275'	1 hr

Water Temp. 51 Bottom hole temp. _____

Water Quality test or comments: clear

Depth first Water Encounter 91'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	15	Broken shale - brown		x
10	15	19	Granite - gray - med.		xx
6	19	91	Granite - gray - med.		xx
6	91	95	Granite - gray - frac. @ 1/2 gpm		xx
6	95	240	Granite - gray - med.		xx
6	240	275	Granite - gray - frac @ 6 gpm		xx

Completed Depth 275' (Measurable)
Date: Started 8-29-2000 Completed 8-30-2000

13. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Intermountain Drilling & Dev. Firm No. 513

Firm Official _____ Date 8-30-00

and Driller or Operator Glen Frachisaur Date 8-30-00

(Sign once if Firm Official & Operator)