

MEMO TO FILE

07/09/2024

Prepared by: Michael Thompson, Water Resource Agent, IDWR Northern Region
Water Right #: 97-7267

On July 9, 2024 I left a voicemail for claimants Gary and Rose Reed, Gary returned later the same day. The purpose of the contact was to schedule a field exam to confirm the POD location of CFRBA claim no. 97-7267. The claimed POD differs from the licensed POD; a field exam was going to be conducted to verify the actual POD location and to determine what, if any, changes have been made since license 97-7267 was issued.

During our conversation Mr. Reed mentioned that, to the best of his knowledge, water from the stream has not been used since 2014 when previous owners of the property had a well drilled (see attached well driller's report) and connected to the home. He further mentioned the cistern that had previously held water diverted from the unnamed stream is full of dirt and not in service.

In the future Mr. Reed would like to obtain a water right to divert from Ranger Creek on the north side of his property for irrigation purposes. I informed him that would require filing an application for permit and that department staff would be glad to assist with that when he is ready to move forward with the project.

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORTRECEIVED
AUG 15 2014

IDWR / NORTH

1. WELL TAG NO. D 0067643Drilling Permit No. 872321

Water right or injection well # _____

2. OWNER: Raymond or Charlotte Harold

Name _____

Address 8680 East Side RoadCity Priest River State IN Zip 83856

3. WELL LOCATION:

Twp. 57 North ☒ or South ☐ Rge 04 East ☐ or West ☒Sec. 9 1/4 NW 1/4 42 1/4Gov't Lot _____ County BonnerLat. 48 ° 17:413 (Deg. and Decimal minutes)Long. 116 ° 50:705 (Deg. and Decimal minutes)Address of Well Site 10143 East Side RoadCity Priest River

(Leave at least name of road - Distance to Head or Landmark)

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 ft ³)	Placement method/procedure
Bentonite	0	40	1050	Pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing Liner	Threaded	Welded
6"	2	213	250	Steel	☒	☐	☒

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 213

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____Manufactured screen ☒ Y ☐ N Type stainless steelMethod of installation Hammer Back

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
213	223	18	10'	5"	SS	304

Length of Headpipe 5' Length of Tailpipe 1'Packer ☒ Y ☐ N Type K-Packer

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft ³)	Placement method
NA				

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) _____ Static water level (ft) 157Water temp. (°F) cold Bottom hole temp. (°F) _____Describe access port Well Cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	<u>10+</u>	<u>4 hrs</u>

Test method:

Pump	Bailer	Air	Flowing artesian
☒	☒	☐	☐

Water quality test or comments: good

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	N
10	0	10	Sand + gravel		X
10	10	25	Sand + cobbles		X
10	25	40	Brown clay + sand layers		X
6	40	70	Blue clay (some sand)		X
6	70	200	Blue silt	X	
6	200	214	Blue clay	X	
6	214	223	Coarse sand brown (some gravel)	X	

Completed Depth (Measurable): 223'Date Started: 6.16.14Date Completed: 8.5.14

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 Pioneer Well Drilling Co. No. 725Principal Driller John McHenry Date 8.5.14Driller John McHenry Date 8.5.14Operator Il Date _____

Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.