

Form
6/89

NOV 13 1989

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.

RECEIVED

NOV 6 1989

NORTHERN REGION
IDWR

1. WELL OWNER Name <u>PETER BERUBE</u> Address <u>P.O. BOX 71 COOLIN, ID.</u> Owner's Permit No. <u>97-89-N-24</u>		7. WATER LEVEL Static water level <u>34</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>34</u></td><td><u>1</u></td></tr></tbody></table>		Discharge G.P.M.	Pumping Level	Hours Pumped	<u>20</u>	<u>34</u>	<u>1</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>14</u></td><td><u>SAND GRAVEL CLAY</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>14</u></td><td><u>50</u></td><td><u>FINE SAND CLAY</u></td><td></td><td>☒</td></tr><tr><td></td><td><u>50</u></td><td><u>59</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>14</u>	<u>SAND GRAVEL CLAY</u>		☒		<u>14</u>	<u>50</u>	<u>FINE SAND CLAY</u>		☒		<u>50</u>	<u>59</u>	<u>MEDIUM SAND</u>		☒				
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4. METHOD DRILLED ☐ Rotary ☐ Air ☐ Hydraulic ☐ Reverse rotary ☒ Cable ☐ Dug ☐ Other _____																																			
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>54</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>JOHNSEN</u> Type <u>STAINLESS</u> Model No. _____ Diameter <u>5 1/2</u> Slot size <u>30</u> Set from <u>54</u> feet to <u>59</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>PITLESS CAP</u>		Thickness	Diameter	From	To	<u>.250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>54</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></tr><tr><td>W</td><td></td><td>E</td></tr><tr><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td></tr></table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>BONNER</u> SW 1/4 SW 1/4 Sec. <u>35</u> T. <u>62</u> N. R. <u>4</u> E. <u>4</u>		N			W		E				S			10. Work started <u>10/11/89</u> finished <u>10/16/89</u>																					
N																																			
W		E																																	
S																																			
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> Address <u>N. 21503 NEWPORT HWY</u> Date <u>11/4/89</u> <u>COLEBERT WA.</u> Signed by (Firm Official) <u>Philip Wood</u> and _____ (Operator)																																			

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