

# 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.

*N* *JB*

**1. WELL OWNER**

Name LEND OREILLE, LTD.

Address 1001 W. WHITTIER BLVD. LAHARCA, CA.

Owner's Permit No. 96-82-N-9-190631

**7. WATER LEVEL**

Static water level 0 feet below land surface.

Flowing?  Yes  No G.P.M. flow \_\_\_\_\_

Artesian closed-in pressure \_\_\_\_\_ p.s.i.

Controlled by:  Valve  Cap  Plug

Temperature cold OF. Quality Good

**2. NATURE OF WORK**

New well  Deepened  Replacement

Abandoned (describe method of abandoning) \_\_\_\_\_

Existing 8" casing

**8. WELL TEST DATA**

Pump  Bailer  Air  Other \_\_\_\_\_

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>50</u>	<u>-</u>	<u>1 hr.</u>

**3. PROPOSED USE**

Domestic  Irrigation  Test  Municipal

Industrial  Stock  Waste Disposal or Injection

Other \_\_\_\_\_ (specify type)

**9. LITHOLOGIC LOG**

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
<u>6</u>	<u>78</u>	<u>85</u>	<u>Sand from 78' to 85'</u>	<u>X</u>	

CLEANOUT - DEEPEN - DEVELOPE

INSTALL PERFORATED 6" CASING

**RECEIVED**

**AUG 11**

Department of Water Resources 66505

**RECEIVED**

**AUG 6 1982**

Department of Water Resources  
Northern District Office

**4. METHOD DRILLED**

Rotary  Air  Hydraulic  Reverse rotary

Cable  Dug  Other \_\_\_\_\_

**5. WELL CONSTRUCTION**

Casing schedule:  Steel  Concrete  Other \_\_\_\_\_

Thickness	Diameter	From	To
<u>.250</u> inches	<u>6</u> inches	<u>2</u> feet	<u>85</u> feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet
_____ inches	_____ inches	_____ feet	_____ feet

Was casing drive shoe used?  Yes  No

Was a packer or seal used?  Yes  No

Perforated?  Yes  No

How perforated?  Factory  Knife  Torch

Size of perforation 1/4 inches by 8 inches

Number	From	To
<u>50</u> perforations	<u>65</u> feet	<u>85</u> feet
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet

Well screen installed?  Yes  No

Manufacturer's name \_\_\_\_\_

Type \_\_\_\_\_ Model No. \_\_\_\_\_

Diameter \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Diameter \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Gravel packed?  Yes  No  Size of gravel \_\_\_\_\_

Placed from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface seal depth \_\_\_\_\_ Material used in seal:  Cement grout  Puddling clay  Well cuttings

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 \_\_\_\_\_

**6. LOCATION OF WELL**

Sketch map location must agree with written location.

Subdivision Name \_\_\_\_\_

Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_

County BONNER

SW 1/4 NW 1/4 Sec. 21, T. 57 N., R. 1 E.

**10.** Work started 6/21/82 finished 6/21/82

**11. DRILLERS CERTIFICATION** de

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

Firm Name Associated Well Drillers Inc Firm No. 245

Address Box 703 C. DA Date 6/22/82

Signed by (Firm Official) [Signature]

and (Operator) [Signature]