

# 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 FRANK LAMBDA  
 Address WILSTMOND IDAHO  
 Owner's Permit No. 96-85-N-114

**7. WATER LEVEL**  
 Static water level 20 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  
Describe artesian or temperature zones below.

**2. NATURE OF WORK**  
 New well  Deepened  Replacement  
 Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

**8. WELL TEST DATA**  
 Pump  Bailer  Air  Other \_\_\_\_\_

Discharge G.P.M.	Pumping Level	Hours Pumped
<u>30 GPM</u>	<u>?</u>	<u>30 MIN</u>

**3. PROPOSED USE**  
 Domestic  Irrigation  Test  Municipal  
 Industrial  Stock  Waste Disposal or Injection  
 Other \_\_\_\_\_ (specify type)

**9. LITHOLOGIC LOG**

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
	<u>0</u>	<u>1</u>	<u>TOP SOIL</u>		
	<u>1</u>	<u>27</u>	<u>SAND + GRAVEL - SOME CLAY</u>		<input checked="" type="checkbox"/>
	<u>27</u>	<u>63</u>	<u>GRANITE - QUARTZ</u>		<input checked="" type="checkbox"/>

**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>+ 1</u> feet	<u>28</u> feet
<u>.250</u> inches	<u>5"</u> inches	<u>27</u> feet	<u>54</u> 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 6 inches

Number	From	To
<u>4</u> perforations	<u>52</u> feet	<u>53</u> feet
<u>4</u> perforations	<u>44</u> feet	<u>45</u> 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 20' 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  
 Cemented between strata  
 Describe access port \_\_\_\_\_

100768

RECEIVED

RECEIVED

Department of Water Resources  
Northern District Office

JUL 21 1986

Department of Water Resources

**6. LOCATION OF WELL**  
 Sketch map location must agree with written location.  
  
 Subdivision Name \_\_\_\_\_  
 Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_  
 County Bonner  
N1/4 NW1/4 Sec. 34, T. 56N N/S, R. 2 W.

**10.** Work started 3-27 finished 4-5

**11. DRILLERS CERTIFICATION** 00  
 I/We certify that all minimum well construction standards were complied with at the time the rig was removed.  
 Firm Name Aqua Drill-It Explor Inc Firm No. 163  
 Address P.O. Box 225 Date 4-7-85  
CORNER STATION  
 Signed by (Firm Official) Scott M. Brantner  
 and Robert Brantner  
 (Operator)