Form 238-7
7/98
Starships Consulting and Management Services

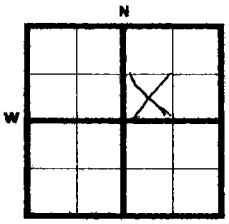
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Inspected by_____
Twp____Rge____Sec____
____1/4____1/4____1/4
Lat: : : Long: : :

1. WELL TAG NO. D0040276
Drilling Permit No: 834085
Other IDWR No.

2. OWNER **Well Number:** 983
Name ZOLLO, JOHN
Address 1117 FORSYTHIA AVE
City SANDPOINT State ID Zip 83864

3. LOCATION OF WELL by legal description
sketch map location must agree with written location



Twp. 56 ☑ North or ☐ South
Rge. 2 ☐ East or ☑ West
Sec. 26 ____ 1/4 SW 1/4 NE 1/4
Gov't Lot ____ County BONNER
Lat: : : Long: : :
Address of Well Site
City SAGLE
(Give at least name of road + Distance to Road or Landmark)
Lt. 1 Blk. ____ Sub. Name MEADOWVIEW

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 Material	From	To	AMOUNT Sacks or Pounds	METHOD
BENTONITE	0	20	200 LBS	POUR

Was drive shoe used? ☐ Y ☑ 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	+2	135	.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:
90 ft. below ground Artesian pressure ____ lb.
Depth flow encountered ____ ft. Describe access port or control devices: ____

56N 2W 26

11. WELL TESTS:
☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
12			1.5 HRS

Water Temp. COLD Bottom Hole Temp COLD
Water Quality test or comments: CLOUDY
Depth first Water encountered 110'

12. LITHOLOGIC LOG:(Describe repairs or abandonment)

Bore Diam	From	To	Remarks: Lithology, Water Quality, Temperature	Water Y	Water N
8	0	2	TOP SOIL	☐	☑
8	2	48	GRAVEL, CLAY, MED BROWN	☐	☑
8	48	96	GRAVEL, MED	☐	☑
8	96	110	GRAVEL, COMPACTED, CLAY, SEA	☐	☑
8	110	135	GRAVEL, LARGE BROWN	☑	☐

RECEIVED
NOV 15 2005
DWR/Boise

Completed Depth 135 (Measurable)
Date: Started 6/17/2005 Completed 6/20/2005

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

Firm Name H20 WellService, Inc. Firm No. 448
Firm Official [signature] Date 6/23/05
and
Supervisor or Operator [signature] Date 06/22/05
ROBERT KERN (Sign Once if Firm Offical and Operator)