

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0101939

Drilling Permit No. 919226

Water right or injection well # _____

2. OWNER:

Name Jeff Needs

Address 31899 Hwy 41

City Blanchard State ID Zip 83804

3. WELL LOCATION:

Twp. 54 North or South Rge. 05 East or West

Sec. 23 SE 1/4 SW 1/4
40 acres 160 acres

Gov't Lot _____ County Bonner

Lat. 48 ° 0.4836 (Deg. and Decimal minutes)

Long. -116 ° 55.6032 (Deg. and Decimal minutes)

Address of Well Site

55 Flattery Ln #/ City Blanchard

(Give at least name of road + Distance to Road 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
3/8 Bent Chips	0	18	500LBS	dry pour

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
6	+2	155	.250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Was drive shoe used? Y N Shoe Depth(s) _____

9. PERFORATIONS/SCREENS:

Perforations Y N Method _____

Manufactured screen Y N Type Stainless steel wire wrap

Method of installation Telescope

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
155	160	.015	5'	5"	SS	304

Length of Headpipe 2' Length of Tailpipe 0

Packer Y N Type K-packer

10. FILTER PACK:

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

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) 135 Static water level (ft) 111

Water temp. (°F) cold Bottom hole temp. (°F) cold

Describe access port Welded Steel cap

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
160	25+	120	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Test method:

Water quality test or comments: clear

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
12	0	18	Sand and Gravel		X
8	18	90	Sand and Gravel		X
8	90	97	Gravel and Clay		X
8	97	110	Sand and Gravel		X
8	110	130	Grey Clay		X
8	130	160	Sand	X	

RECEIVED

MAY 05 2025

IDWR/NORTH



Completed Depth (Measurable): 160

Date Started: 3/18/25

Date Completed: 3/19/25

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 Independence Drilling LLC Co. No. 746

*Principal Driller Kenneth Hoyer Date 3/24/25

*Driller Kenneth Hoyer Date 3/24/25

*Operator _____ Date _____

*Operator _____ Date _____

Other _____ Date _____

Other _____ Date _____

* Signature of Principal Driller and rig operator are required.