

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0072379

Drilling Permit No. 880395
Water right or injection well # _____

2. OWNER:
Name John Parsons
Address Po Box 995
City Athol State ID Zip 83801

3. WELL LOCATION:
Twp. 53 North or South Rge. 3 East or West
Sec. 13 1/4 SW 1/4 SE 1/4
10 acres 40 acres 160 acres

Gov't Lot _____ County Kootenai
Lat. 47 ° 56.194 (Deg. and Decimal minutes)
Long. 116 ° 38.642 (Deg. and Decimal minutes)
Address of Well Site 10570 E. Far Cry Rd

(Give at least name of road + Distance to Road or Landmark)
City Athol
Lot. 4 Blk. A Sub. Name Peaceful Acres

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 |
|---------------|-----------|---------|------------------------------------|----------------------------|
| Bentonite Chi | 0 | 18 | 600 lbs. | Temp. Casing |

8. CASING/LINER:

| Diameter (nominal) | From (ft) | To (ft) | Gauge/Schedule | Material | Casing Liner | Threaded | Welded |
|--------------------|-----------|---------|----------------|----------|-------------------------------------|--------------------------|-------------------------------------|
| 6" | +2 | 440 | .250 | Steel | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Was drive shoe used? Y N Shoe Depth(s) Ring @ 440'

9. PERFORATIONS/SCREENS:
Perforations Y N Method Air Perforator
Manufactured screen Y N Type _____
Method of installation _____

| From (ft) | To (ft) | Slot size | Number/ft | Diameter (nominal) | Material | Gauge or Schedule |
|-----------|---------|-------------|-----------|--------------------|----------|-------------------|
| 410 | 420 | 1/4" x 1/8" | 18 | 6" | Steel | .250 |

Length of Headpipe NA Length of Tailpipe NA
Packer Y N Type _____

10. FILTER PACK:

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

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) 400 Static water level (ft) 385
Water temp. (°F) Cold Bottom hole temp. (°F) Cold
Describe access port Steel Welded Cap

Well test: Test method:

| Drawdown (feet) | Discharge or yield (gpm) | Test duration (minutes) | Pump | Bailer | Air | Flowing artesian |
|-----------------|--------------------------|-------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|
| NA | 10+ qpm | 240 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Water quality test or comments: _____

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 | 17 | Sand and Gravel | | X |
| 12 | 17 | 22 | Boulder | | X |
| 8 | 22 | 310 | Sand and Gravel | | X |
| 8 | 310 | 316 | Boulder | | X |
| 8 | 316 | 370 | Sand and Gravel | | X |
| 8 | 370 | 390 | Sand, Gravel and Tan Clay | | X |
| 8 | 390 | 405 | Sand and Gravel | X | |
| 8 | 405 | 410 | Boulder | | X |
| 8 | 410 | 422 | Sand and Gravel | X | |
| 8 | 422 | 435 | Decomposed Granite | | X |
| 8 | 435 | 440 | Granite | | X |

Completed Depth (Measurable): 440'
Date Started: 9/29/2016 Date Completed: 10/3/2016

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 Horsley Drilling, Inc. Co. No. 632
*Principal Driller C. Mark Howley Date 10/10/2016
*Driller Steve C. Horsley Date 10/10/2016
*Operator II _____ Date _____
Operator I Robert B. Miller Date 10/10/2016

* Signature of Principal Driller and rig operator are required.