

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. D 0033303

DRILLING PERMIT NO. 867900

Other IDWR No. _____

2. OWNER:

Name MICHAEL E. & DEBRA C. ALPERIN

Address 1295 FLANNIGAN CREEK RD.

City VIOLA

State ID Zip 83872

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

W	N	E	S	Twp. <u>41</u>	North ☒ or South ☐	Rge. <u>5</u>	East ☐ or West ☒	Sec. <u>26</u>	1/4 <u>SE</u> 1/4 <u>NW</u> 1/4	Gov't Lot _____	County <u>LATAH</u>	Lat: _____	Long: _____	Address of Well Site <u>SAME</u>	City _____

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

11. WELL TESTS:

☐ Pump	☐ Bailor	☒ Air	☐ Flowing Artesian
Yield gal./min. <u>2 1/2</u>	Drawdown _____	Pumping Level <u>270</u>	Time <u>1 HR</u>

Water Temp. 53

Bottom hole temp. _____

Water Quality test or comments: _____

Depth first Water Encounter 257

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water
14	0	1	SOIL	
14	1	29	CLAY BROWN	
14	29	37	GRANITE DECOMPOSED BROWN	
8	37	47	GRANITE DECOMPOSED BROWN	
8	47	109	GRANITE BLACK & WHITE	
8	109	127	GRANITE SOFT BLACK & WHITE	
8	127	145	GRANITE BLACK & WHITE	
8	145	152	GRANITE & CLAY	
8	152	217	GRANITE BLACK & WHITE	
8	217	222	GRANITE SOFT BLACK & WHITE	
8	222	257	GRANITE BLACK & WHITE	
8	257	261	GRANITE SOFT BLACK & WHITE	X
8	261	275	GRANITE BLACK & WHITE	

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	AMOUNT	METHOD
Material	From To	Sacks or Pounds
BENTONITE	0 37	11
		DRY

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 37

Was drive shoe seal tested? ☒ Y ☐ N How? 300 PSI

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	+1	37	1/4	STEEL	☒	☐	☒	☐
6	25	275	200	PVC	☐	☒	☐	☐

Length of Headpipe _____

Length of Tailpipe _____

9. PERFORATIONS/SCREENS:

☒ Perforations Method SAW
☐ Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
215	275	1/8	90	6	PVC	☐	☒

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

80 ft. below ground Artesian pressure _____ lb.

Depth flow encountered _____ ft. Describe access port or control

devices: WELL CAP

13. DRILLER'S CERTIFICATION:

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

Company Name MCPHERSON & WRIGHT DRILLING No. 0376

Firm Official [Signature] Date 9/15/2004

and Driller or Operator [Signature] Date 9/15/2004

(Sign once if Firm Official & Operator)

41N 5W 26

FORWARD WHITE COPY TO WATER RESOURCES