

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESUSE TYPEWRITER OR
BALLPOINT PEN

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.

1. WELL OWNER Name <u>Albert Stage</u> Address <u>2484 W. TOWN RD MOSCOW ID</u> Drilling Permit No. <u>87-92-N-28</u> Water Right Permit No. _____		7. WATER LEVEL Static water level <u>111</u> feet below land surface. Flowing? ☐ Yes ☒ No G.P.M. flow _____ Artesian closed-in pressure _____ p.s.i. Controlled by: ☐ Valve ☐ Cap ☐ Plug Temperature _____ °F. Quality _____ <i>Describe artesian or temperature zones below.</i>																																																																	
2. NATURE OF WORK ☒ New well ☐ Deepened ☐ Replacement ☐ Well diameter increase ☐ 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>1 1/2 @ pm drilled</u>																																																																	
3. PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Test ☐ Municipal ☐ Industrial ☐ Stock ☐ Waste Disposal or Injection ☐ Other _____ (specify type)		9. LITHOLOGIC LOG <u>85038</u> <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>8</td><td>0</td><td>1</td><td>Soil</td><td></td><td></td></tr><tr><td>8</td><td>1</td><td>8</td><td>Clay</td><td></td><td></td></tr><tr><td>8 1/4</td><td>8</td><td>107</td><td>Granite - Med. Blk/wh</td><td></td><td></td></tr><tr><td>6</td><td>107</td><td>108</td><td>Granite - fine - " "</td><td></td><td></td></tr><tr><td></td><td>108</td><td>229</td><td>Granite - Med - " "</td><td></td><td></td></tr><tr><td></td><td>229</td><td>230</td><td>Quartz - white " "</td><td></td><td></td></tr><tr><td></td><td>230</td><td>271</td><td>Granite - Med " "</td><td></td><td></td></tr><tr><td></td><td>271</td><td>278</td><td>Granite - fine " "</td><td></td><td></td></tr><tr><td></td><td>278</td><td>295</td><td>Granite - Med " "</td><td></td><td></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	1	Soil			8	1	8	Clay			8 1/4	8	107	Granite - Med. Blk/wh			6	107	108	Granite - fine - " "				108	229	Granite - Med - " "				229	230	Quartz - white " "				230	271	Granite - Med " "				271	278	Granite - fine " "				278	295	Granite - Med " "		
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4. METHOD DRILLED ☒ Rotary ☒ Air ☐ Hydraulic ☐ Reverse rotary ☐ Cable ☐ Dug ☐ Other _____																																																																			
5. WELL CONSTRUCTION Casing schedule: ☒ Steel ☐ Concrete ☐ Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>250</u> inches</td><td><u>8</u> inches</td><td><u>1</u> feet</td><td><u>20</u> feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ inches</td><td>_____ inches</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> Was casing drive shoe used? ☐ Yes ☒ No Was a packer or seal used? ☐ Yes ☒ No Perforated? ☐ Yes ☒ No How perforated? ☐ Factory ☐ Knife ☐ Torch ☐ Gun Size of perforation _____ inches by _____ inches <table border="1"><thead><tr><th>Number</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr><tr><td>_____ perforations</td><td>_____ feet</td><td>_____ feet</td></tr></tbody></table> 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 <u>20</u> 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 Weld _____ ☐ Cemented between strata Describe access port _____		Thickness	Diameter	From	To	<u>250</u> inches	<u>8</u> inches	<u>1</u> feet	<u>20</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet																																		
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6. LOCATION OF WELL Sketch map location must agree with written location. <table border="1"><tr><td>N</td><td></td><td></td></tr><tr><td>W</td><td>X</td><td>E</td></tr><tr><td></td><td></td><td></td></tr><tr><td>S</td><td></td><td></td></tr></table> Subdivision Name _____ Lot No. _____ Block No. _____ County <u>Latah</u> <u>SE 1/4 NE 1/4 Sec. 22, T. 40 N. R. 5 W.</u>		N			W	X	E				S			10. Work started <u>7-17-92</u> finished <u>7-21-92</u>																																																					
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		11. DRILLERS CERTIFICATION I/We certify that all minimum well construction standards were complied with at the time the rig was removed. MCPHERSON & WRIGHT DRILLING Firm No. <u>376</u> <u>2246 Burrell</u> Address <u>Lewiston, Idaho 83501</u> Date <u>8-10-92</u> Signed by (Firm Official) <u>Ray McPherson</u> and _____ (Operator) <u>Paul Wright</u> <u>9/27/92</u> <u>TDK</u>																																																																	

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT