Form 238-7
3/95

POSTED

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT 96106

Use Typewriter or Ballpoint Pen

Office Use Only
Inspected by _____
Twp____ Rge____ Sec____
____1/4 ____1/4 ____1/4
Lat: : : Long: : :

1. DRILLING PERMIT NO. 87 - 96N - 0006 - 000
Other IDWR No. _____

2. OWNER:
Name ELAINE & WARREN WRIGHT
Address 715 SW MIES
City PULLMAN State WA Zip 99163

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

N / W / E / S

Twp. 41 North X or South ☐
Rge. 5 East ☐ or West X
Sec. 34 , SW 1/4 ____ 1/4 ____ 1/4 ____ 1/4
(10 acres / 40 acres / 160 acres)
Gov't Lot ____ County LATAH
Lat: : : Long: : :
Address of Well Site 1030 FLANNIGAN CR. Rd.
City VIOLA
(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. USE:
X Domestic ☐ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
X New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD
X Air Rotary ☐ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	1	29	5	DRY

Was drive shoe used? ☐ Y X 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	+1	29	250	Steel	X	☐	X	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

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:
10 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

SW 34 41N 5W

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

Yield gal./min.	Drawdown	Pumping Level	Time
3/4 GPM			

Water Temp. _____ Bottom hole temp. _____
Water Quality test or comments: _____
Depth first Water Encountered _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
12	0	2	SOIL		
12	2	23	CLAY		
12	23	29	GRANITE - GR. MED		
6	29	209	"		
6	209	211	Granite - Decomposed +		
6	211	280	Granite - GRA-HARD		

RECEIVED
JAN 02 1997
NORTHERN REGION
IDWR

Completed Depth 280 (Measurable)
Date: Started 7-15-96 Completed 7-16-96

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

McPHERSON & WRIGHT DRILLING
2246 Burrell
Lewiston, Idaho 83501
(208) 743-7295

Firm Name _____ Firm No. 0376
Firm Official _____ Date _____
and
Supervisor or Operator _____ Date 12-31-96
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES