

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Location Corrected by IDWR To:

T39N R04W Sec. 7 SENWNW

By: mciscell 2013-10-17

1. WELL TAG NO. D 0056269

Drilling Permit No. 857644
Water right or injection well # _____

2. OWNER

Name STEPHEN C. BERGMAN
Address 1181 TEARE RD.
City MOSCOW State ID Zip 83843

3. WELL LOCATION:

Twp. 37 North ☒ or South ☐ Rge. 4 East ☐ or West ☒
Sec. 7 NW 1/4 SW 1/4 160 acresGov't Lot _____ County LATAH
Lat. N46 ° 45 496 (Deg. and Decimal minutes)
Long. W116 ° 50 573 (Deg. and Decimal minutes)
Address of Well Site 1181 TEARE RD.City MOSCOW
(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 check all that apply (Replacement etc.)

☒ 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 ft³)	Placement method/procedure
BENTONITE	0	45	21	DRY

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
8"	+1	45	250	STEEL	☒	☐	☐	☒
6"	5	80	250	STEEL	☒	☐	☐	☒
4 1/2"	15	355	200	PVC	☐	☒	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 45 80

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method SAWManufactured screen ☐ Y ☐ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
275	355	1/8x12	80	4 1/2"	PVC	200

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☐ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method
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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) 213 Static water level (ft) 107
Water temp. (°F) 54 Bottom hole temp. (°F) _____
Describe access port WELL CAP

Well test:

Test method:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Flowing
	4	1 HR	☐ ☐ ☒ ☐

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	3	CLAY		
12	3	45	GRANITE SOFT BROWN		
8	45	74	GRANITE SOFT BROWN		
8	74	80	GRANITE MEDIUM BLACK & WHITE		
6	80	213	GRANITE HARD BLACK & WHITE		
6	213	279	GRANITE SOFT BROWN	X	
6	279	355	GRANITE MEDIUM BLACK & WHITE		

Completed Depth (Measurable) 355Date: Started 9/15/09 Completed 9/23/09

14. DRILLER'S CERTIFICATION

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

MCPHERSON & WRIGHT

Company Name DRILLING Co. No. 0376
*Principal Driller [Signature] Date 7/25/10
*Driller [Signature] Date 7/25/10
*Operator II _____ Date _____
Operator I _____ Date _____

* Signature of Principal Driller and rig operator are required.