

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

1. WELL TAG NO. D 0061095

Drilling Permit No. 867333
Water right or injection well # _____

2. OWNER

Name **STEVE MADER**
Address **2140 NW ROBERT ST**
City **PULLMAN** State **WA** Zip **99163**

3. WELL LOCATION:

Twp. **40** North ☒ or South ☐ Rge. **5** East ☐ or West ☒
Sec. **20** 1/4 **SW** 1/4 **SW** 1/4
10 acres 40 acres 160 acres

Gov't Lot _____ County **LATAH**
Lat. **N46° 47' 41.8"** (Deg. and Decimal minutes)
Long. **W116° 59' 80.1"** (Deg. and Decimal minutes)
Address of Well Site **HALEY RD. & HWY 95**
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	40	20	DRY

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
8"	+1'	40'	250	STEEL	☒	☐	☐	☒
6"	25'	305'	200	PVC	☐	☒	☐	☐

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) **40'**

9. PERFORATIONS/SCREENS:

Perforations ☒ Y ☐ N Method **SAW**

Manufactured screen ☐ Y ☐ N Type _____

Method of installation _____

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
245'	305'	1/8x12	90	6"	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) **274** Static water level (ft) **XXX**
Water temp. (°F) **53** Bottom hole temp. (°F) _____
Describe access port **WELL CAP**

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)	Pump	Bailer	Air	Flowing artesian
	5	1 HR	☐	☐	☒	☐

Test method:

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	SOIL BLAC K	
12	3	18	CLAY BROWN MEDIUM	
12	18	31	GRANITE DECOMPOSED BROWN	
12	31	35	GRANITE BROKEN BROWN	
12	35	40	GRANITE DECOMPOSED BROWN	
8	40	110	GRANITE DECOMPOSED BROWN	
8	110	274	GRANITE HARD BLACK & WHITE	
8	274	277	GRANITE SOFT WHITE	X
8	277	305	GRANITE HARD	

RECEIVED

NOV 20 2013

IDWR / NORTH

Completed Depth (Measurable) **305**

Date: Started **10/29/12** Completed **11/1/12**

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 *Ted Wright* Date **11/18/13**

*Driller _____ Date _____

*Operator II _____ Date _____

Operator I *Mary Wright* Date **11/18/13**

*Signature of Principal Driller and rig operator are required.