Form 238-7
3/95

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IDWR/North

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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. 74-8003
Other IDWR No. D0005896

2. OWNER:
Name RON SCHWARTZ
Address 100 NW Terre View DR #634
City PULLMAN State WA Zip 99163

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

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N / W / E / S

Twp. 41N North ☒ or South ☐
Rge. 5W East ☐ or West ☒
Sec. 25, SW 1/4 SW 1/4 ____ 1/4 ____ 1/4
(10 acres / 40 acres / 160 acres)
Gov't Lot ____ County LATAH
Lat: : : Long: : :
Address of Well Site FLANNIGAN CREEK RD City VIOLA
(Give at least name of road + Distance to Road or Landmark)

Lt.____ Blk.____ Sub. Name____

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 Material	From	To	AMOUNT Sacks or Pounds	METHOD
Bentonite	1	20	6	DRY

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) ____
Was drive shoe seal tested? ☒ Y ☐ N How? 300 PSI AIR

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
8	+1	20	250	steel	☒	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

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

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

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

Water Temp. 55° Bottom hole temp. ____
Water Quality test or comments: ____
Depth first Water Encountered 247'

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Water Y	Water N
8	0	1	SOIL		X
	1	7	CLAY		
	7	13	Decomp. Granite		
	13	137	Granite Gra. Med		
	137	139	Gran. Fract. Gra Soft		
	139	247	Gran. Gra. Med		
	247	249	Gra. Fract Soft Granite	X	
	249	328	Granite - Gra Med		
	328	331	Granite - Fract		
	331	391	Granite - Gra Med		
	391	392	Granite - Fract	X	
	392	405	Granite		

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Department of Water Resources

Completed Depth 405 (Measurable)
Date: Started 4/27/99 Completed 4/27/99

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

Firm Name McPherson & Wright Firm No. 0376
Firm Official TED WRIGHT Date 2-20-00
and
Supervisor or Operator [signature] Date 2-20-00
(Sign once if Firm Official & Operator)

41N 5W 25

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