54017

STATE OF ALASKA
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND & WATER
Alaska Hydrologic Survey

WATER WELL LOG Revised 08/18/2016

Drilling Started: 7 / 4 / 2018 Completed: 7 / 4 / 2018 Pump Install: ___/___/_____

City/Borough	Subdivision	Block	Lot	Property Owner Name & Address
Aleutians East Borough				Silver Bay Seafoods 4039 21st Ave W Ste 201 AK, 98199

Well location: Latitude 54.869606 **Longitude** -163.409302
Meridian S Township 061S Range 094W Section 27 , NW 1/4 of SW 1/4 of SW 1/4 of NW 1/4

BOREHOLE DATA: (from ground surface)
Suggest T.**M. Hanna's hydrogeologic classification system***
https://my.ngwa.org/NC__Product?id=a185000000BYub3AAD

	Depth From	Depth To
Cobbley sandy gravel	0	18
Sandy silt	18	24
Silty gravelly sand	24	40
Silty sandy gravel (water)	40	68
Cobbley gravelly silt	68	72
Cobbley sandy gravel	72	81

Include description or sketch of well location (include road names, buildings, etc.):

North

Drilling method: ☒ Air rotary, ☐ Cable tool, ☐ Other _____
Well use: ☒ Public supply, ☐ Domestic, ☐ Reinjection, ☐ Hydrofracking
☐ Commercial, ☐ Observation/Monitoring, ☐ Test/Exploratory, ☐ Cooling,
☐ Irrigation/Agriculture, ☐ Grounding, ☐ Recharge/Aquifer Storage,
☐ Heating, ☐ Geothermal Exploration, ☐ Other _____
Fluids used: _____

Depth of hole: 81 ft Casing stickup: 4 ft
Casing type: Steel Casing thickness: 0.25 inches
Casing diameter: 8 inches Casing depth: 73 ft
Liner type: _____ Depth: _____ ft Diameter: _____ inches
Note: _____

Well intake opening type: ☐ Open end, ☐ Open hole, ☒ Other other
Screen type: Stainless steel, Screen mesh size: 60
Screen start: 73 ft, Screen stop: 81 ft, Perforated ☐ Yes ☒ No
Perforation description: _____ Perf from: _____ ft, Perf to: _____ ft, Perf from: _____ ft, Perf to: _____ ft
Gravel packed ☐ Yes ☒ No Gravel start: _____ ft , Gravel stop: _____ ft
Note: _____

Static water (from top of casing): 14 ft on ___/___/_____ Artesian well ☐
Pumping level & yield: 18.6 feet after 24 hours at 307 gpm
Method of testing: pump - see well log
Development method: _____ Duration: _____
Recovery rate: _____ gpm

Grout type: Bentonite granules Volume 2 bags
Depth: From 0 ft, To 10 ft

Final pump intake depth: _____ ft Model: 275H
Pump size: 40 hp Brand name: Goulds

Was well disinfected upon completion? ☒ Yes ☐ No
Method of disinfection: Chlorine tablets
Was water quality tested? ☒ Yes ☐ No
Water quality parameters tested: Bacteria and metals

Well driller name: .....
Company name: ALPINE DRILLING AND ENTERPRISES .....
Mailing address: PO BOX 110496 .....
City: ANCHORAGE State: AK Zip: 99511
Phone number: (_____) _____- _____
Driller's signature: _____
Date: _____/_____/_____

AS 41.08.020(b)(4) and AAC 11 AAC 93.140(a) require that a copy of the well log be submitted to the Department of Natural Resources within **45 days of well completion**. Well logs may be submitted using the online well log reporting system available at:

https://dnr.alaska.gov/welts/

OR email electronic well logs to

dnr.water.reports@alaska.gov

Anchorage Municipal Code 15.55.060(I) and North Pole Ordinance 13.32.030(D) require that a copy of this well log be submitted to the Development Services Department/City within **30 days of well completion**.

City Permit Number: _____
Date of Issue: ____/___/_____

Parcel Identification Number: _____-_____-_____

*Guide for Using the Hydrogeologic Classification System for Logging Water Well Boreholes by Thomas M. Hanna NGWA Press

WELL LOG ID 54017

STATE OF ALASKA
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND & WATER

WATER WELL LOG

Drilling Started: 7 /4 /18 Completed: 7 /4 /18 Pump Install: tbd / /

City/Borough:	Subdivision:	Block	Lot	Property Owner Name & Address:
Aleutian East Bourough	N/A			SILVER BAY SEAFOODS 4039 21ST Ave. W Ste 201 Seattle, Wa 98199

Latitude 54.869611 N Longitude 163.40936 W
Meridian Seward Township 61 S Range 94W Section 27 , 1/4 of 1/4 of 1/4 of 1/4

BOREHOLE DATA: (from ground surface)
Suggest T.M. Hanna's hydrogeologic classification system *
https://info.ngwa.org/servicecenter/shopper/ProductDetail.cfm?ProdCompanyPassed=ngw&ProdCdPassed=ngw-t1030

	Depth From	Depth To
cobbly sandy gravel	0	18
sandy silt	18	24
silty gravelly sand	24	40
silty sandy gravel (water)	70	68
cobbly gravelly silt	68	72
cobbly sandy gravel	72	81

Drilling method: ☒ Air rotary, ☐ Cable tool, ☐ Other
Well use: ☐ Public supply, ☒ Domestic, ☐ Reinjection, ☐ Hydrofracking
Fluids used:
☐ Other

Depth of hole: 81 ft, Casing stickup: 4.0 ft
Casing type: steel Wall thickness .25 inches
Casing diameter: 8 inches Casing depth 73 ft
Liner type: Depth: ft Diameter: inches

Well intake opening type: ☐ Open end, ☐ Open hole, ☒ Other
Screen type: stainless steel, Assembly From: 73 ft, To 81 ft
Slot size 60 From: 73 ft, To 81 ft
Slot size From: ft, To ft
☐ Perforation description From: ft, To ft
From: ft, To ft From: ft, To ft
Gravel packed ☐ Yes ☒ No From ft, To ft

Static water (from top of casing): 14 ft on /
Pumping level & yield: 18.6 feet after 24 hours at 307 gpm
Method of testing: pump
Development method: Duration:
Recovery rate: 30 min gpm

Grout type: bentonite granules Volume 2 bgs
Depth: From surface ft, To 10 ft

Final pump intake depth: tbd ft Model: 275H
Pump size 40 hp Brand name Goulds

Was well disinfected upon completion? ☒ Yes ☐ No
Method of disinfection: Chlorine Tablets
Was water quality tested? ☒ Yes ☐ No
Water quality parameters tested: Bacteria and metals

Well driller name: David L Harper
Company name: Alpine Drilling & Enterprises
Mailing address: P.O. Box 110496
City: Anchorage State: AK Zip 99511
Phone number: (907) 345-0202
Driller's signature: David L. Harper
Date: 2/21/2019

AS 41.08.020(b)(4) and AAC 11 AAC 93.140(a) require that a copy of the well log be forwarded to the Department of Natural Resources within 45 days of well completion. Please email well logs to:

dnr.water.reports@alaska.gov OR send to

Alaska DNR, MLW, Alaska Hydrologic Survey
550 West 7th Avenue, Suite 1020
Anchorage, AK 99501

Anchorage Municipal Code 15.55.060(I) requires that a copy of this well log be forwarded to the Development Services Department within 30 days of well completion.

City Permit Number:
Date of Issue: /

Parcel Identification Number: - -

Is well located at approved permit location? ☐ Yes ☐ No

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