

**STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
BENEFICIAL USE FIELD REPORT**

**A. GENERAL INFORMATION**

Permit No: 63-33494

Exam Date: 9/28/2017

1. Current Owner:  
SYMMS FRUIT RANCH INC  
14068 SUNNY SLOPE RD  
CALDWELL ID 83607  
(208) 484-5489
2. Accompanied by:  
Angie Grimm, Rachael Sommer, Kim (field manager)
3. Source and Tributary:  
Groundwater

**B. OVERLAP REVIEW**

1. Place of Use:  
63-8687 shares the same PPU
2. Point-of-Diversion:  
63-8687

**C. DIVERSION AND DELIVERY SYSTEM**

The legal description for the points of diversion were determined at the time of the field examination using a GPS device. The permit was issued with 3 potential wells but one of the wells in the NESW of section 4 is capped and is not used, so only 2 points of diversion are recommended. The place of use was determined by on-site inspection and by comparing a 2015 aerial image to historical use information supplied by the field manager.

Symms Fruit Ranch Inc. operates their fields using mostly surface water delivered by Nampa Meridian Irrigation District and Wilder Irrigation District. Water is diverted from their groundwater wells when surface water delivery becomes unavailable. The upper well is located next to a small pond that is connected to the surface water ditch that brings in NMID water and to a pumping system that allows them to move water westward up a small incline or southeast through more ditches. The lower well is set up in such a way that water from the well can be pumped southeast through an underground pipe to discharge into the pond or northwest and into ditches to the purposes of gravity irrigation. Those ditches can supply water to the fields in the SENW, NENW, NWSE, and SWNE of section 4 that are northward of the ditch.

1. Location of Point of Diversion:  
NW¼SE¼ Sec. 4, Twp 02N, Rge 03W, B.M. CANYON County  
NE¼SW¼ Sec. 4, Twp 02N, Rge 03W, B.M. CANYON County

## 2. Place of Use:

## Irrigation:

| Twp | Rge | Sec | NE |    |           |    | NW         |    |    |      | SW   |    |    |      | SE |      |      |    | Totals |
|-----|-----|-----|----|----|-----------|----|------------|----|----|------|------|----|----|------|----|------|------|----|--------|
|     |     |     | NE | NW | SW        | SE | NE         | NW | SW | SE   | NE   | NW | SW | SE   | NE | NW   | SW   | SE |        |
| 02N | 03W | 4.0 |    |    | 6.0<br>L5 |    | 15.0<br>L3 |    |    | 35.0 | 40.0 |    |    | 40.0 |    | 39.0 | 37.0 |    | 212.0  |

Total Acres: 212

## 3. Attachments:

- ☒ Delivery System Diagram  
☒ Map Showing the Location(s) of the Point(s) of Diversion and Place(s) of Use  
☒ Aerial Photo  
☒ Photo of Diversion System, and Place of Use

## 4. Diversion System Information:

| Well    | Motor Make    | HP. | Motor Serial No. | Pump Make  | Pump      |
|---------|---------------|-----|------------------|------------|-----------|
| 1 Upper | US Electrical | 75  | 3726861          | Verti-line | 10RML/D27 |
| 2 Lower | General       | 75  | EJJ509590        | No info    | No info   |

**D. FLOW MEASUREMENTS**

## 1. Device Information

| Equipment  | Type       | Make | Model No. | Serial No. | Size | Calib. Date |
|------------|------------|------|-----------|------------|------|-------------|
| Panametric | Ultrasonic | GE   | PT878-01  | 08447      | 402  | 03/28/17    |
| Weir       | Cipoletti  |      |           |            | 2ft  |             |

## 2. Measurement Description:

To get a better understanding of the groundwater use in the system I attempted to measure the upper and lower wells individually and simultaneously using the panametric device. To measure the upper well the measuring device was set up similar to the setup shown in Picture 7 but I was unable to obtain a measurement. This was because either the pipe is lined with material of unknown thickness, the flow was too turbulent, or the pipe shakes too much creating interference. The weir shown in Picture 6 was used to calculate the rate of flow from the Upper Well and from both wells combined. There were no issues measuring the diversion from the Lower Well. An additional measurement using the weir was also taken.

Water level measurements in the weir were 3.75 inches while the Upper Well was pumping, 3.25 inches while the Lower Well was pumping, and 5.0 inches while both wells were operating. Using the table published in the US Bureau of Reclamation's Water Measurement Manual that equates to; 1.16 cfs, 0.95 cfs, and 1.83 cfs. However, the applicant's field manager indicated that both wells are not operated at the same time.

**E. FLOW RATE CALCULATIONS**

## 1. Irrigation:

X Additional Computation Sheets Attached

The attached table shows the data collected during the Lower Well measurement. The total gallons diverted during the measurement is found by subtracting the total gallons diverted at the end of the measurement from the starting number. This volume (7306.67 gallons) divided by the total time of the measurement (10 minutes) provided a rate of 730.67 gallons per minute, which is equal to 1.63 cfs. This rate is greater than the one obtained using the weir and greater than the rate authorized on the permit. The department standard diversion rate for irrigation is calculated using the number of acres irrigated as follows:

$$\text{Rate (cfs)} = \# \text{ acres irrigated} * \text{IDWR standard rate per acre} = 78 * 0.02 = 1.56 \text{ cfs}$$

**F. VOLUME CALCULATIONS**

## 1. Irrigation:

$$V_{IR} = (\text{Acres Irrigated}) \times (\text{Irrigation Requirement}) = 78 * 4.5 = 351$$

$$V_{DR} = [\text{Diversion Rate (cfs)}] \times (\text{Days in season}) \times 1.9835 = 1.56 * 260 * 1.9835 = 804.5$$

$$V = \text{Smaller of } V_{IR} \text{ and } V_{DR} = 351 \text{ af}$$

## 2. Volume Calculations for Other Uses:

None

**G. NARRATIVE/REMARKS/COMMENTS**

The measurements taken during the field examination show the only beneficial use developed was the additional acres of supplemental irrigation not covered by water right no. 63-8687. Water right no. 63-8687 also authorizes the diversion of groundwater for irrigation from the same two wells as permit no. 63-33494. During the examination for that right the examiner measured the water level in the cipoletti weir and calculated a diversion rate of 2.97 cfs. Their notes indicate a 150 hp motor was installed on the upper well at the time. Since the system was capable of diverting water at a greater rate prior to the development of this permit than the rate for the combined use limit of the permit should be based on the system measured during the previous exam. The diversion rate for irrigation should be the rate authorized by the permit but the diversion rate and number of acres should be limited in the conditions to a combined limit with water right no. 63-8687. Since the groundwater use is supplemental to surface water the supplemental conditions should remain on the right but be updated to the new reworded conditions 943 and WB7.

Have conditions of permit approval been met? X Yes      No

**H. RECOMMENDATIONS****1. Limiting Factors**

| Factor                  | Rate (cfs)  | Volume (af) | Other         |
|-------------------------|-------------|-------------|---------------|
| Application For Permit  | 1.56        |             |               |
| Permit                  | 1.56        |             |               |
| Proof of Beneficial Use | 1.01 – 2.00 |             | Paid \$125.00 |
| Standard Rate           | 1.56        | 351         | 78 acres      |
| Measured Rate           | 1.83        |             |               |

**2. Recommended Amounts**

| Beneficial Use | Period of Use | Rate (cfs) | Volume   |
|----------------|---------------|------------|----------|
| Standard Rate  | 1.56          | 351        | 78 acres |

**3. Amendments**

\_\_\_\_ Change P.D. as reflected      \_\_\_\_ Add P.D. as reflected       X  None  
\_\_\_\_ Change P.U. as reflected      \_\_\_\_ Add P.U. as reflected       X  None

**I. AUTHENTICATION**Field Examiner's Name PHDate 2/7/18Reviewer Angela H. GinnDate 2/7/18



Start Time: 9/28/2017 11:03  
 End Time: 9/28/2017 11:14  
 Interval: 60  
 Records: 11  
 Cyclic Flags: 2  
 Error Flags: 8208

| Date/Time       | Velocity (ft/s) | Volume (gal/m) | (+)Total (gal) |
|-----------------|-----------------|----------------|----------------|
| 9/28/2017 11:03 | 4.624625622     | 728.1748669    | 339851.1536    |
| 9/28/2017 11:04 | 4.636917966     | 730.1103696    | 340574.5394    |
| 9/28/2017 11:05 | 4.633157269     | 729.5182255    | 341327.951     |
| 9/28/2017 11:06 | 4.634891344     | 729.791266     | 342053.2915    |
| 9/28/2017 11:07 | 4.64264861      | 731.0126937    | 342764.9724    |
| 9/28/2017 11:08 | 4.632196004     | 729.3668686    | 343512.596     |
| 9/28/2017 11:09 | 4.636423641     | 730.0325353    | 344236.6026    |
| 9/28/2017 11:10 | 4.633277151     | 729.5371017    | 344973.526     |
| 9/28/2017 11:11 | 4.637467682     | 730.1969257    | 345696.9246    |
| 9/28/2017 11:12 | 4.647629286     | 731.7969308    | 346422.4165    |
| 9/28/2017 11:13 | 4.631397792     | 729.2411854    | 347157.8274    |

|       |             |             |
|-------|-------------|-------------|
| total | 50.99063237 | 8028.778969 |
| avg   | 4.635512033 | 729.8889972 |

|                        |                    |
|------------------------|--------------------|
| total gallons diverted | 7306.67385 gal     |
|                        | 730.667385 gal/min |
|                        | 1.627937939        |

3. **Delivery System Diagram:** Indicate all major components and distances between components. Indicate weir size/ditch size/pipe diameter (inside), as applicable. Use the space provided or ☐ see attached.

Weir  
Info  
# are mls pumped  
↓

3.25 in

②

Scale: 1" = \_\_\_\_\_

- ☐ Copy of USGS Quadrangle attached showing location(s) of point(s) of diversion and place(s) of use (required)  
☐ Aerial photo attached (required for irrigation of 10+ acres)  
☐ Photo of diversion and system attached

4.

| Well or Diversion Identification No.* | Motor Make                           | Hp | Motor Serial No. | Pump Make  | Pump Serial No. or Discharge Size |
|---------------------------------------|--------------------------------------|----|------------------|------------|-----------------------------------|
| ① Upper                               | us Electrical<br>Molokini pump motor | 75 | 3726861          | Verti-line | 550 gpm 1770 RPM 10RML            |
| ② Lower                               |                                      |    |                  |            | 1527090 serial                    |

\*Code to correspond with no. on map and aerial photo

5.0 in

①

②

#### D. FLOW MEASUREMENTS

1.

| Measurement Equipment | Type | Make | Model No. | Serial No. | Size | Calib. Date |
|-----------------------|------|------|-----------|------------|------|-------------|
| Pana                  |      |      |           |            |      |             |
|                       |      |      |           |            |      |             |

2. Measurements:

steel pipe thickness .112, water 65°F, 403 @ 7.141 in  
 OD 8 in 7 traver

Sym 7 = Test

2 FT CIPOLETTI WEIR  
 3.75 INCHES HEAD  
 ①

## E. NARRATIVE/REMARKS/COMMENTS

thickness .070

DIAMETER = 8.0"

SPACING = 6.969"

LINER = NONE

MATERIAL = CARBON STEEL

Division 2 liner goes through PVC  
PVC

log Sym 2

only 4 logs b.l time set

thickness = 8.62 inches - diameter no liner

thickness .30

water @ 53°F

log Sym 3

F-H log

.715 / .30

spacing 7.285 in

.716 /

4.63 ft/s

.710 /

1.62 ft/s

Keith Green would know who pulled the pump fir section

or Dar knows

2

Has the permit holder met all conditions of permit approval, including any mitigation requirements and/or measuring device installation requirements? ☐ Yes ☐ No If no, what must be done to meet the permit requirements?

| TRS     | Process           | Basin Sequence | Owner                                               | Source       | POD | POU | Use | NENE | NWNE | SWNE | SENE | NEENW | NWNNW | SWNNW | SENNW | NESW | NWSW | SWSW | SESW | NESE | NWSE | SWSE | SESE | Total Acres |
|---------|-------------------|----------------|-----------------------------------------------------|--------------|-----|-----|-----|------|------|------|------|-------|-------|-------|-------|------|------|------|------|------|------|------|------|-------------|
| 02N03W4 | Water Application | 63-33777       | NORTHWEST FARM CREDIT SERVICES FLCA, LAKEVIEW       | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      | X    |      |      |      |      |      |             |
| 02N03W4 | Water Permit      | 63-33494       | GREG AMARAL LTD PENSION PLAN & TRUST; SPF WATER     | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       | X*   |      |      |      |      | X    |      |      |             |
| 02N03W4 | Water Permit      | 63-33777       | LAKEVIEW LAND CO LLC                                | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      | X    |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-11447       | FARNER, MABEL M; FARNER, VIRGILE                    | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      | X    |      |      |      |             |
| 02N03W4 | Water Right       | 63-23414       | FARNER, MABEL M; FARNER, VIRGILE                    | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      | /    |      |      | X    |             |
| 02N03W4 | Water Right       | 63-23415       | FARNER, MABEL M; FARNER, VIRGILE                    | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-23416       | FARNER, MABEL M; FARNER, VIRGILE                    | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-23417       | FARNER, MABEL M; FARNER, VIRGILE                    | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-26335       | GREG AMARAL LTD PENSION PLAN & TRUST; PEACHTREE     | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-26336       | GREG AMARAL LTD PENSION PLAN & TRUST; PEACHTREE     | GROUND WATER | POD |     |     |      |      |      |      |       | X     |       |       |      |      |      |      |      |      |      | X    |             |
| 02N03W4 | Water Right       | 63-28182       | MONAGHAN, F GENE; MONAGHAN, JO ANN                  | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-28442       | FRANS, JAMES M; FRANS, MARION K                     | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-28586       | ESTHER KEITH TRUST                                  | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      | X    |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-28782       | MONAGHAN, F GENE; MONAGHAN, JO ANN                  | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-8455        | MOWREY, MILDRED; MOWREY, ROBERT F; WEITZ, JOSEPH R; | GROUND WATER | POD |     |     |      |      |      |      |       |       | X     |       |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right       | 63-8687        | GREG AMARAL LTD PENSION PLAN & TRUST; SEXTON FRUIT  | GROUND WATER | POD |     |     |      |      |      |      |       |       |       |       |      |      |      |      |      |      |      | X    |             |

\* 2 POD in this QQ

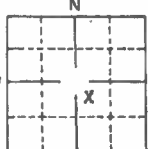
possibly same wells

[illegible]

| TRS     | Process     | Basin Sequence | Owner                                                  | Source        | POD | POU        | Use | NENE | NWNE | SWNE | SENE | NENW | NWNW | SWNW | SESW | NESE | NWSE | SWSE | SESE | Total Acres |
|---------|-------------|----------------|--------------------------------------------------------|---------------|-----|------------|-----|------|------|------|------|------|------|------|------|------|------|------|------|-------------|
| 02N03W4 | Water Right | 63-251A        | UNITED STATES OF AMERICA<br>ACTING THROUGH             | BOISE RIVER   | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-2968        | FARWEST LLC, GRAY, THOMAS<br>P, KING, JAMES B, MC      | GROUND WATER  | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-30181       | DAVIS, THOMAS, HONSINGER,<br>CHARLES L, NAMPA &        | BOISE RIVER   | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-30181       | DAVIS, THOMAS, HONSINGER,<br>CHARLES L, NAMPA &        | MOORE CREEK   | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-301A        | UNITED STATES OF AMERICA<br>ACTING THROUGH             | BOISE RIVER   | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-302A        | UNITED STATES OF AMERICA<br>ACTING THROUGH             | BOISE RIVER   | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-32695A      | NAMPA & MERIDIAN<br>IRRIGATION DISTRICT                | GROUND WATER  | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-32695B      | NAMPA & MERIDIAN<br>IRRIGATION DISTRICT                | GROUND WATER  | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-33251       | BOISE PROJECT BOARD OF<br>CONTROL                      | INDIAN CREEK  | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-33253       | BOISE PROJECT BOARD OF<br>CONTROL                      | TENMILE CREEK | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-33739       | NAMPA & MERIDIAN<br>IRRIGATION DISTRICT                | SPRINGS       | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-373A        | UNITED STATES OF AMERICA<br>ACTING THROUGH             | BOISE RIVER   | POU | IRRIGATION |     | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    | X    |             |
| 02N03W4 | Water Right | 63-8455        | MOWREY, MILDRED; MOWREY,<br>ROBERT F; WEITZ, JOSEPH R; | GROUND WATER  | POU | IRRIGATION |     |      |      |      |      | 35   | 35   |      |      |      |      |      |      | 70          |
| 02N03W4 | Water Right | 63-8687        | GREG AMARAL LTD PENSION<br>PLAN & TRUST, SAKTON FRUIT  | GROUND WATER  | POU | IRRIGATION |     |      |      |      |      | 15   |      |      |      |      |      |      |      | 212         |
| 02N03W4 | Water Right | 63-23414       | FARNER, MABEL M; FARNER,<br>VIRGIL E                   | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-23416       | FARNER, MABEL M; FARNER,<br>VIRGIL E                   | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-23417       | FARNER, MABEL M; FARNER,<br>VIRGIL E                   | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-25335       | GREG AMARAL LTD PENSION<br>PLAN & TRUST, PEACHTREE     | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-28182       | MONAGHAN, F GENE;<br>MONAGHAN, JO ANN                  | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-28442       | FRANS, JAMES M; FRANS,<br>MARION K                     | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-28586       | ESTHER KEITH TRUST                                     | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |
| 02N03W4 | Water Right | 63-28782       | MONAGHAN, F GENE;<br>MONAGHAN, JO ANN                  | GROUND WATER  | POU | STOCKWATER |     |      |      |      |      |      |      |      |      |      |      |      |      |             |

→ 63-8687 . overhp probably should submit ownership change  
x no existing limits exist

STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**WELL DRILLER'S REPORT**USE TYPEWRITER OR  
BALLPOINT PENState law requires that this report be filed with the Director, Department of Water Resources  
within 30 days after the completion or abandonment of the well.

| <b>1. WELL OWNER</b><br>Name <u>Harvey Saxton</u><br>Address <u>Rt. 4, Caldwell, Idaho 83607</u><br>Owner's Permit No. <u>63-8687</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | <b>7. WATER LEVEL</b><br>Static water level <u>80'</u> feet below land surface.<br>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____<br>Artesian closed in pressure _____ p.s.i.<br>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug<br>Temperature _____ °F. Quality _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                  |               |              |           |        |          |             |           |          |          |             |           |          |          |             |           |          |          |                                                                                                                                                                                                                                                                                                                             |                          |  |  |  |    |     |           |  |  |  |     |     |                          |  |  |  |     |     |                  |  |  |  |     |     |                          |  |  |  |     |     |                        |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                        |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                         |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |
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| <b>2. NATURE OF WORK</b><br><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement<br><input type="checkbox"/> Abandoned (describe method of abandoning) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               | <b>8. WELL TEST DATA</b><br><input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Air <input type="checkbox"/> Other _____<br><table border="1"><thead><tr><th>Discharge G.P.M.</th><th>Pumping Level</th><th>Hours Pumped</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | Discharge G.P.M. | Pumping Level | Hours Pumped |           |        |          |             |           |          |          |             |           |          |          |             |           |          |          |                                                                                                                                                                                                                                                                                                                             |                          |  |  |  |    |     |           |  |  |  |     |     |                          |  |  |  |     |     |                  |  |  |  |     |     |                          |  |  |  |     |     |                        |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                        |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                         |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |
| Discharge G.P.M.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| <b>3. PROPOSED USE</b><br><input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/> Municipal<br><input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection<br><input type="checkbox"/> Other _____ (specify type)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               | <b>9. LITHOLOGIC LOG</b> <u>099591</u> <table border="1"><thead><tr><th rowspan="2">Hole<br/>Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>28</td><td>0</td><td>2</td><td>Topsoil</td><td> </td><td> </td></tr><tr><td> </td><td>2</td><td>25</td><td>Sand, Gravel, River Rock</td><td> </td><td> </td></tr><tr><td> </td><td>25</td><td>138</td><td>Brn. Clay</td><td> </td><td> </td></tr><tr><td> </td><td>138</td><td>148</td><td>Brn. Sand w/Clay Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>148</td><td>171</td><td>Gray &amp; Brn. Sand</td><td> </td><td> </td></tr><tr><td> </td><td>171</td><td>198</td><td>Brn. Clay w/Sand Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>198</td><td>208</td><td>Gray Sand Fine to Med.</td><td> </td><td> </td></tr><tr><td> </td><td>208</td><td>221</td><td>Brn. Clay</td><td> </td><td> </td></tr><tr><td> </td><td>221</td><td>228</td><td>Blue Clay w/Sand Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>228</td><td>238</td><td>Brn. Sand w/Clay Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>238</td><td>253</td><td>Brn. Sand Fine</td><td> </td><td> </td></tr><tr><td> </td><td>253</td><td>298</td><td>Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>298</td><td>308</td><td>Blue Sand w/Clay Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>308</td><td>333</td><td>Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>333</td><td>338</td><td>Brn. Clay</td><td> </td><td> </td></tr><tr><td> </td><td>338</td><td>348</td><td>Brn. Sand w/Clay Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>348</td><td>353</td><td>Brn. Sand Fine</td><td> </td><td> </td></tr><tr><td> </td><td>353</td><td>358</td><td>Brn. &amp; Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>358</td><td>378</td><td>Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>378</td><td>403</td><td>Brn. Sand Fine to Med.</td><td> </td><td> </td></tr><tr><td> </td><td>403</td><td>408</td><td>Brn. &amp; Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>408</td><td>418</td><td>Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>418</td><td>428</td><td>Blue Sand w/Clay Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>428</td><td>463</td><td>Blue Sand Fine to Crse.</td><td> </td><td> </td></tr><tr><td> </td><td>463</td><td>468</td><td>Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>468</td><td>484</td><td>Blue Sand Med.</td><td> </td><td> </td></tr><tr><td> </td><td>484</td><td>500</td><td>Blue Clay</td><td> </td><td> </td></tr><tr><td> </td><td>500</td><td>518</td><td>Blue Sand Fine</td><td> </td><td> </td></tr><tr><td> </td><td>518</td><td>528</td><td>Blue Clay w/Sand Streaks</td><td> </td><td> </td></tr><tr><td> </td><td>528</td><td>538</td><td>Blue Clay</td><td> </td><td> </td></tr></tbody></table> |                          | Hole<br>Diam.    | Depth         |              | Material  | Water  |          | From        | To        | Yes      | No       | 28          | 0         | 2        | Topsoil  |             |           |          | 2        | 25                                                                                                                                                                                                                                                                                                                          | Sand, Gravel, River Rock |  |  |  | 25 | 138 | Brn. Clay |  |  |  | 138 | 148 | Brn. Sand w/Clay Streaks |  |  |  | 148 | 171 | Gray & Brn. Sand |  |  |  | 171 | 198 | Brn. Clay w/Sand Streaks |  |  |  | 198 | 208 | Gray Sand Fine to Med. |  |  |  | 208 | 221 | Brn. Clay |  |  |  | 221 | 228 | Blue Clay w/Sand Streaks |  |  |  | 228 | 238 | Brn. Sand w/Clay Streaks |  |  |  | 238 | 253 | Brn. Sand Fine |  |  |  | 253 | 298 | Blue Clay |  |  |  | 298 | 308 | Blue Sand w/Clay Streaks |  |  |  | 308 | 333 | Blue Clay |  |  |  | 333 | 338 | Brn. Clay |  |  |  | 338 | 348 | Brn. Sand w/Clay Streaks |  |  |  | 348 | 353 | Brn. Sand Fine |  |  |  | 353 | 358 | Brn. & Blue Clay |  |  |  | 358 | 378 | Blue Clay |  |  |  | 378 | 403 | Brn. Sand Fine to Med. |  |  |  | 403 | 408 | Brn. & Blue Clay |  |  |  | 408 | 418 | Blue Clay |  |  |  | 418 | 428 | Blue Sand w/Clay Streaks |  |  |  | 428 | 463 | Blue Sand Fine to Crse. |  |  |  | 463 | 468 | Blue Clay |  |  |  | 468 | 484 | Blue Sand Med. |  |  |  | 484 | 500 | Blue Clay |  |  |  | 500 | 518 | Blue Sand Fine |  |  |  | 518 | 528 | Blue Clay w/Sand Streaks |  |  |  | 528 | 538 | Blue Clay |  |  |
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| <b>4. METHOD DRILLED</b><br><input type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input checked="" type="checkbox"/> Reverse rotary<br><input type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               | <b>10. DRILLERS CERTIFICATION</b><br>I/We certify that all minimum well construction standards were<br>complied with at the time the rig was removed.<br>Firm Name <u>Pete Cope Drilling Co., Inc.</u> Firm No. <u>213</u><br>P.O. Box 561<br>Address <u>Meridian, Id. 83642</u> Date <u>6-14-79</u><br>Signed by (Firm Official) <u>Pete Cope</u><br>and<br>(Operator) <u>Jessie Jones</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                  |               |              |           |        |          |             |           |          |          |             |           |          |          |             |           |          |          |                                                                                                                                                                                                                                                                                                                             |                          |  |  |  |    |     |           |  |  |  |     |     |                          |  |  |  |     |     |                  |  |  |  |     |     |                          |  |  |  |     |     |                        |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                        |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                         |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |
| <b>5. WELL CONSTRUCTION</b><br>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____ <table border="1"><thead><tr><th>Thickness</th><th>Diameter</th><th>From</th><th>To</th></tr></thead><tbody><tr><td>.250 inches</td><td>16 inches</td><td>2 feet</td><td>193 feet</td></tr><tr><td>.250 inches</td><td>16 inches</td><td>253 feet</td><td>363 feet</td></tr><tr><td>.250 inches</td><td>16 inches</td><td>403 feet</td><td>438 feet</td></tr><tr><td>.250 inches</td><td>16 inches</td><td>518 feet</td><td>528 feet</td></tr></tbody></table> Was casing drive shoe used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Was a packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch<br>Size of perforation _____ inches by _____ inches<br>Number _____ From _____ To _____<br>_____ perforations _____ feet _____ feet<br>_____ perforations _____ feet _____ feet<br>_____ perforations _____ feet _____ feet<br>Well screen installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Manufacturer's name <u>Roscoe Moss</u><br>Type _____ Model No. _____<br>Diameter <u>16</u> Slot size <u>80</u> Set from <u>193</u> feet to <u>253</u> feet<br>Diameter <u>16</u> Slot size <u>80</u> Set from <u>438</u> feet to <u>518</u> feet<br>Gravel packed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Size of gravel <u>3/8 minus</u><br>Placed from <u>27</u> feet to <u>538</u> feet<br>Surface seal depth <u>27'</u> Material used in seal: <input type="checkbox"/> Cement grout<br><input checked="" type="checkbox"/> Puddling clay <input type="checkbox"/> Well cuttings<br>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing<br><input checked="" type="checkbox"/> Overbore to seal depth<br>Method of joining casing. <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent<br>Weld<br><input type="checkbox"/> Cemented between strata<br>Describe access port <u>2" pipe welded on side of casing</u> |               | Thickness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Diameter                 | From             | To            | .250 inches  | 16 inches | 2 feet | 193 feet | .250 inches | 16 inches | 253 feet | 363 feet | .250 inches | 16 inches | 403 feet | 438 feet | .250 inches | 16 inches | 518 feet | 528 feet | <b>6. LOCATION OF WELL</b><br>Sketch map location must agree with written location.<br><br>Subdivision Name _____<br>Lot No. _____ Block No. _____<br>County <u>Canyon</u><br>NW ¼ SE ¼ Sec. <u>4</u> , T. <u>2N</u> , R. <u>3W</u> E/W. |                          |  |  |  |    |     |           |  |  |  |     |     |                          |  |  |  |     |     |                  |  |  |  |     |     |                          |  |  |  |     |     |                        |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                        |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                         |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |
| Thickness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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                                                                                                                                                                                                                                                                                                                      | 438 feet                 |                  |               |              |           |        |          |             |           |          |          |             |           |          |          |             |           |          |          |                                                                                                                                                                                                                                                                                                                             |                          |  |  |  |    |     |           |  |  |  |     |     |                          |  |  |  |     |     |                  |  |  |  |     |     |                          |  |  |  |     |     |                        |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                        |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                         |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |
| .250 inches                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 16 inches     | 518 feet                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 528 feet                 |                  |               |              |           |        |          |             |           |          |          |             |           |          |          |             |           |          |          |                                                                                                                                                                                                                                                                                                                             |                          |  |  |  |    |     |           |  |  |  |     |     |                          |  |  |  |     |     |                  |  |  |  |     |     |                          |  |  |  |     |     |                        |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                        |  |  |  |     |     |                  |  |  |  |     |     |           |  |  |  |     |     |                          |  |  |  |     |     |                         |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |           |  |  |  |     |     |                |  |  |  |     |     |                          |  |  |  |     |     |           |  |  |

USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT

"UPPER WELL"

63

Form 238 7  
6/02IDAHO DEPARTMENT OF WATER RESOURCES  
WELL DRILLER'S REPORT1. WELL TAG NO. D 0047843  
DRILLING PERMIT NO. 898313-845042  
Water Right or Injection Well No. 63-32245

## 2. OWNER:

Name PEACHTREE DEVELOPMENT LLC  
Address 291 EAST SHORE DR., SUITE 200  
City EAGLE State ID Zip 83616

## 3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub, or Directions to well.

Twp. 2 North ☒ or South  
Rge. 3 East ☐ or West ☒  
Sec. 4 1/4 NE 1/4 SW 1/4  
Gov't Lot \_\_\_\_\_ County CANYON  
Lat: \_\_\_\_\_ Long: \_\_\_\_\_Address of Well Site 2400 ft. East, 2300 ft. North of Peach Rd./  
LOCUST LN INTERSECTION City CALDWELL  
(Give at least name of road - Distance to Road or Landmark)Lt. 6 Blk. 5 Sub. Name PEACHTREE HILL SUB

## 4. USE:

☒ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation  
☐ Thermal ☐ Injection ☒ Other DOMESTIC (107 HOMES)  
FIRE PROTECTION

## 5. TYPE OF WORK check all that apply

(Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other

## 6. DRILL METHOD:

☐ Air Rotary ☐ Cable ☐ Mud Rotary ☒ Other REVERSE

## 7. SEALING PROCEDURES

| Seal Material | From | To  | Weight / Volume | Seal Placement Method |
|---------------|------|-----|-----------------|-----------------------|
| BENTONITE     | 0    | 525 | 58,000          | Dry Pour              |
| BENTONITE     | 580  | 650 | 9,600           | Dry Pour              |

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) \_\_\_\_\_Was drive shoe seal tested? ☐ Y ☐ N How? \_\_\_\_\_

## 8. CASING/LINER:

| Diameter | From | To  | Gauge | Material | Casing                              | Liner                    | Welded                              | Threaded                 |
|----------|------|-----|-------|----------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| 10       | +3   | 547 | 365   | STEEL    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|          |      |     |       |          | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_

Packer Y ☒ N Type \_\_\_\_\_

## 9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method \_\_\_\_\_

Screen Type & Method of Installation JOHNSON WIRE 4X4

| From | To  | Slot Size | Number | Diameter | Material | Casing                              | Liner                    |
|------|-----|-----------|--------|----------|----------|-------------------------------------|--------------------------|
| 547  | 577 | .020      |        | 10       | S.S.     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|      |     |           |        |          |          | <input type="checkbox"/>            | <input type="checkbox"/> |

## 10. FILTER PACK

| Filter Material | From | To  | Weight / Volume | Placement Method |
|-----------------|------|-----|-----------------|------------------|
| #10-20 GSS      | 575  | 580 | 10,800          | Dry Pour         |

## 11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

142 ft. below ground Artesian pressure \_\_\_\_\_ lb.

Depth flow encountered \_\_\_\_\_ ft. Describe access port or control devices.

1 1/4" PIPE ON SIDE

845042

Office Use Only

Well ID No. 415187

Inspected by \_\_\_\_\_

Twp \_\_\_\_\_ Rge \_\_\_\_\_ Sec \_\_\_\_\_

1/4 1 4 1/4

Lat: \_\_\_\_\_ Long: \_\_\_\_\_

## 12. WELL TESTS:

| Yield gal./min. | Drawdown  | Pumping Level | Time         |
|-----------------|-----------|---------------|--------------|
| <u>400</u>      | <u>88</u> | <u>230</u>    | <u>8 hrs</u> |
|                 |           |               |              |

Water Temp. \_\_\_\_\_

Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: \_\_\_\_\_

## 13. LITHOLOGIC LOG: (Describe repairs or abandonment)

| Bore Dia. | From | To  | Remarks: Lithology, Water Quality & Temperature | Y                                   | N                                   |
|-----------|------|-----|-------------------------------------------------|-------------------------------------|-------------------------------------|
| 20        | 0    | 4   | TOP SOIL                                        |                                     | <input checked="" type="checkbox"/> |
|           | 4    | 33  | CLEAN Y. GRAVEL                                 |                                     | <input checked="" type="checkbox"/> |
|           | 33   | 91  | BRN CLAY                                        |                                     | <input checked="" type="checkbox"/> |
|           | 91   | 122 | FINE-COARSE SAND                                |                                     | <input checked="" type="checkbox"/> |
|           | 122  | 125 | BRN CLAY                                        |                                     | <input checked="" type="checkbox"/> |
|           | 125  | 128 | SOFT SANDSTONE                                  |                                     | <input checked="" type="checkbox"/> |
|           | 128  | 143 | FINE SAND, SM CLAY LAYER                        |                                     | <input checked="" type="checkbox"/> |
|           | 143  | 174 | BRN CLAY w/SM SAND LAYER                        |                                     | <input checked="" type="checkbox"/> |
|           | 174  | 181 | FINE BLUE SAND                                  | <input checked="" type="checkbox"/> |                                     |
|           | 181  | 183 | WOOD                                            | <input checked="" type="checkbox"/> |                                     |
|           | 183  | 187 | BLUE CLAY w/WOOD                                |                                     |                                     |
|           | 187  | 194 | FINE BLUE SAND                                  | <input checked="" type="checkbox"/> |                                     |
|           | 194  | 212 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |
|           | 212  | 230 | FINE-COARSE SAND                                | <input checked="" type="checkbox"/> |                                     |
|           | 230  | 323 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |
|           | 323  | 357 | FINE-COARSE SAND                                | <input checked="" type="checkbox"/> |                                     |
|           | 357  | 439 | BLUE/GRAY CLAY w/SM SAND LAYERS                 | <input checked="" type="checkbox"/> |                                     |
|           | 439  | 466 | FINE-MED SAND                                   | <input checked="" type="checkbox"/> |                                     |
|           | 466  | 501 | BLUE CLAY w/SM SAND LAYER                       |                                     | <input checked="" type="checkbox"/> |
|           | 501  | 520 | FINE BLUE SAND                                  | <input checked="" type="checkbox"/> |                                     |
|           | 520  | 548 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |
|           | 548  | 579 | FINE-COARSE BLUE SAND                           | <input checked="" type="checkbox"/> |                                     |
|           | 579  | 586 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |
|           | 586  | 591 | FINE BLUE SAND                                  | <input checked="" type="checkbox"/> |                                     |
|           | 591  | 607 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |
|           | 607  | 619 | FINE BLUE SAND                                  | <input checked="" type="checkbox"/> |                                     |
|           | 619  | 635 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |
|           | 635  | 643 | FINE BLUE SAND                                  | <input checked="" type="checkbox"/> |                                     |
|           | 643  | 650 | BLUE CLAY                                       |                                     | <input checked="" type="checkbox"/> |

JUN 20 2007

WATER RESOURCES  
WESTERN REGION (Measurable)Completed Depth 57Date: Started 2/16/07Completed 5/21/07

## 14. DRILLER'S CERTIFICATION

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

Company Name RIVERSIDE INC Firm No. 333Principal Driller and \_\_\_\_\_ Date 6/19/07

Driller or Operator I \_\_\_\_\_ Date \_\_\_\_\_

Operator I \_\_\_\_\_ Date \_\_\_\_\_

Principal Driller and Rig Operator Required.  
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

CAPPED WELL - NOT RECOMMENDED AS POINT OF DIVERSION.

63  
Form 238-7  
6/02

IDAHO DEPARTMENT OF WATER RESOURCES  
WELL DRILLER'S REPORT

845043

Office Use Only  
Well ID No. 415188  
Inspected by \_\_\_\_\_  
Twp \_\_\_\_\_ Rge \_\_\_\_\_ Sec \_\_\_\_\_  
1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Lat: \_\_\_\_\_ Long: \_\_\_\_\_

1. WELL TAG NO. D 0047844  
DRILLING PERMIT NO. 898314-845043  
Water Right or Injection Well No. 63-32245

2. OWNER:  
Name PEACHTREE DEVELOPMENT LLC  
Address 291 EAST SHORE DR SUITE 200  
City EAGLE State ID Zip 83616

3. LOCATION OF WELL by legal description: WELL #2  
You must provide address or Lot, Blk, Sub. or Directions to well.  
Twp. 3 North ☒ or South ☐  
Rge. 3 East ☐ or West ☒  
Sec. 4 1/4 NE 1/4 SW 1/4  
Gov't Lot \_\_\_\_\_  
County CANYON  
Lat: \_\_\_\_\_ Long: \_\_\_\_\_  
Address of Well Site 2400 E. EAST, 2300 N. NORTH OF PEACH  
RD, LOCUST LN INTERSECTION City CALDWELL  
(Give at least name of road - Distance to Road or Landmark)  
Lt. 6 Blk. 5 Sub Name PEACHTREE HILL SUB

4. USE:  
☐ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation  
☐ Thermal ☐ Injection ☒ Other DOMESTIC (107 HOMES)  
FIRE PROTECTION

5. TYPE OF WORK check all that apply  
☒ New Well ☐ Modify ☐ Abandonment ☐ Other \_\_\_\_\_

6. DRILL METHOD:  
☐ Air Rotary ☐ Cable ☐ Mud Rotary ☒ Other REVERSE

7. SEALING PROCEDURES

| Seal Material    | From     | To         | Weight / Volume | Seal Placement Method |
|------------------|----------|------------|-----------------|-----------------------|
| <u>BENTONITE</u> | <u>0</u> | <u>521</u> | <u>60,000</u>   | <u>DRY POUR</u>       |

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) \_\_\_\_\_  
Was drive shoe seal tested? ☐ Y ☐ N How? \_\_\_\_\_

8. CASING/LINER: 12" X 8" REDUCER @ 497'

| Diameter  | From       | To         | Gauge       | Material     | Casing                              | Liner                    | Welded                              | Threaded                 |
|-----------|------------|------------|-------------|--------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| <u>12</u> | <u>+3</u>  | <u>497</u> | <u>.375</u> | <u>STEEL</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>8</u>  | <u>497</u> | <u>541</u> | <u>.375</u> | <u>STEEL</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>8</u>  | <u>571</u> | <u>579</u> | <u>.375</u> | <u>STEEL</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Length of Headpipe \_\_\_\_\_ Length of Tailpipe \_\_\_\_\_  
Packer ☐ Y ☒ N Type \_\_\_\_\_

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method \_\_\_\_\_  
Screen Type & Method of Installation JOHNSON WIRE WRAP

| From       | To         | Slot Size   | Number   | Diameter    | Material | Casing                              | Liner                    |
|------------|------------|-------------|----------|-------------|----------|-------------------------------------|--------------------------|
| <u>541</u> | <u>571</u> | <u>.020</u> | <u>8</u> | <u>S.S.</u> |          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>579</u> | <u>599</u> | <u>.020</u> | <u>7</u> | <u>S.S.</u> |          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

10. FILTER PACK

| Filter Material    | From       | To         | Weight / Volume | Placement Method |
|--------------------|------------|------------|-----------------|------------------|
| <u>#10-20 CSSI</u> | <u>521</u> | <u>610</u> | <u>12,000</u>   | <u>DRY POUR</u>  |

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

147 ft. below ground Artesian pressure \_\_\_\_\_ lb.  
Depth flow encountered \_\_\_\_\_ ft. Describe access port or control devices: 1 1/4" PIPE ON SIDE

12. WELL TESTS:

| Yield gal./min. | Drawdown   | Pumping Level | Time         |
|-----------------|------------|---------------|--------------|
| <u>820</u>      | <u>113</u> | <u>260</u>    | <u>8 HRS</u> |

Water Temp. \_\_\_\_\_ Bottom hole temp. \_\_\_\_\_

Water Quality test or comments: \_\_\_\_\_

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

| Bore Dia. | From       | To         | Remarks: Lithology, Water Quality & Temperature | Y                                   | N                                   |
|-----------|------------|------------|-------------------------------------------------|-------------------------------------|-------------------------------------|
| <u>21</u> | <u>0</u>   | <u>4</u>   | <u>TOP SOIL</u>                                 |                                     | <input checked="" type="checkbox"/> |
|           | <u>4</u>   | <u>13</u>  | <u>CLECKEN W/ SOME GRAVEL</u>                   |                                     | <input checked="" type="checkbox"/> |
|           | <u>13</u>  | <u>23</u>  | <u>GRAVEL</u>                                   |                                     | <input checked="" type="checkbox"/> |
|           | <u>23</u>  | <u>33</u>  | <u>HARD BEN CLAY</u>                            |                                     | <input checked="" type="checkbox"/> |
|           | <u>33</u>  | <u>91</u>  | <u>BEN CLAY</u>                                 |                                     | <input checked="" type="checkbox"/> |
|           | <u>91</u>  | <u>126</u> | <u>FINE-COARSE SAND</u>                         |                                     | <input checked="" type="checkbox"/> |
|           | <u>126</u> | <u>148</u> | <u>SOFT SANDSTONE</u>                           |                                     | <input checked="" type="checkbox"/> |
|           | <u>148</u> | <u>154</u> | <u>FINE SAND</u>                                | <input checked="" type="checkbox"/> |                                     |
|           | <u>154</u> | <u>180</u> | <u>BEN CLAY</u>                                 |                                     | <input checked="" type="checkbox"/> |
|           | <u>180</u> | <u>186</u> | <u>FINE SAND</u>                                | <input checked="" type="checkbox"/> |                                     |
|           | <u>186</u> | <u>215</u> | <u>BLUE CLAY W/ SAND STEAKS SOMEWOOD</u>        |                                     | <input checked="" type="checkbox"/> |
|           | <u>215</u> | <u>239</u> | <u>FINE-COARSE SAND W/ SANDSTONE STEAKS</u>     |                                     | <input checked="" type="checkbox"/> |
|           | <u>239</u> | <u>325</u> | <u>CLAY</u>                                     |                                     | <input checked="" type="checkbox"/> |
|           | <u>325</u> | <u>351</u> | <u>FINE-COARSE SAND W/ S.M. CLAY STEAKS</u>     |                                     | <input checked="" type="checkbox"/> |
|           | <u>351</u> | <u>376</u> | <u>BLUE CLAY</u>                                |                                     | <input checked="" type="checkbox"/> |
|           | <u>376</u> | <u>386</u> | <u>SOFT SANDSTONE</u>                           |                                     | <input checked="" type="checkbox"/> |
|           | <u>386</u> | <u>438</u> | <u>BLUE + GREY CLAY</u>                         |                                     | <input checked="" type="checkbox"/> |
|           | <u>438</u> | <u>455</u> | <u>FINE-COARSE SAND</u>                         | <input checked="" type="checkbox"/> |                                     |
|           | <u>455</u> | <u>456</u> | <u>HARD SANDSTONE</u>                           |                                     | <input checked="" type="checkbox"/> |
|           | <u>456</u> | <u>465</u> | <u>FINE-COARSE SAND</u>                         | <input checked="" type="checkbox"/> |                                     |
|           | <u>465</u> | <u>508</u> | <u>BLUE CLAY</u>                                |                                     | <input checked="" type="checkbox"/> |
|           | <u>508</u> | <u>515</u> | <u>FINE SAND</u>                                | <input checked="" type="checkbox"/> |                                     |
|           | <u>515</u> | <u>540</u> | <u>BLUE + GREY CLAY</u>                         |                                     | <input checked="" type="checkbox"/> |
|           | <u>540</u> | <u>545</u> | <u>FINE SAND</u>                                | <input checked="" type="checkbox"/> |                                     |
|           | <u>545</u> | <u>550</u> | <u>BLUE + GREY CLAY</u>                         |                                     | <input checked="" type="checkbox"/> |
|           | <u>550</u> | <u>573</u> | <u>FINE SAND</u>                                | <input checked="" type="checkbox"/> |                                     |
|           | <u>573</u> | <u>579</u> | <u>BLUE CLAY</u>                                |                                     | <input checked="" type="checkbox"/> |
|           | <u>579</u> | <u>583</u> | <u>FINE-MED SAND</u>                            | <input checked="" type="checkbox"/> |                                     |
|           | <u>583</u> | <u>593</u> | <u>FINE SAND, SANDSTONE</u>                     | <input checked="" type="checkbox"/> |                                     |
|           | <u>593</u> | <u>610</u> | <u>BLUE CLAY</u>                                |                                     | <input checked="" type="checkbox"/> |

JUN 20 2007

WATER RESOURCES  
WESTERN REGION (measurable)

Completed Depth 599'  
Date: Started 4/23/07 Completed 5/30/07

14. DRILLER'S CERTIFICATION

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

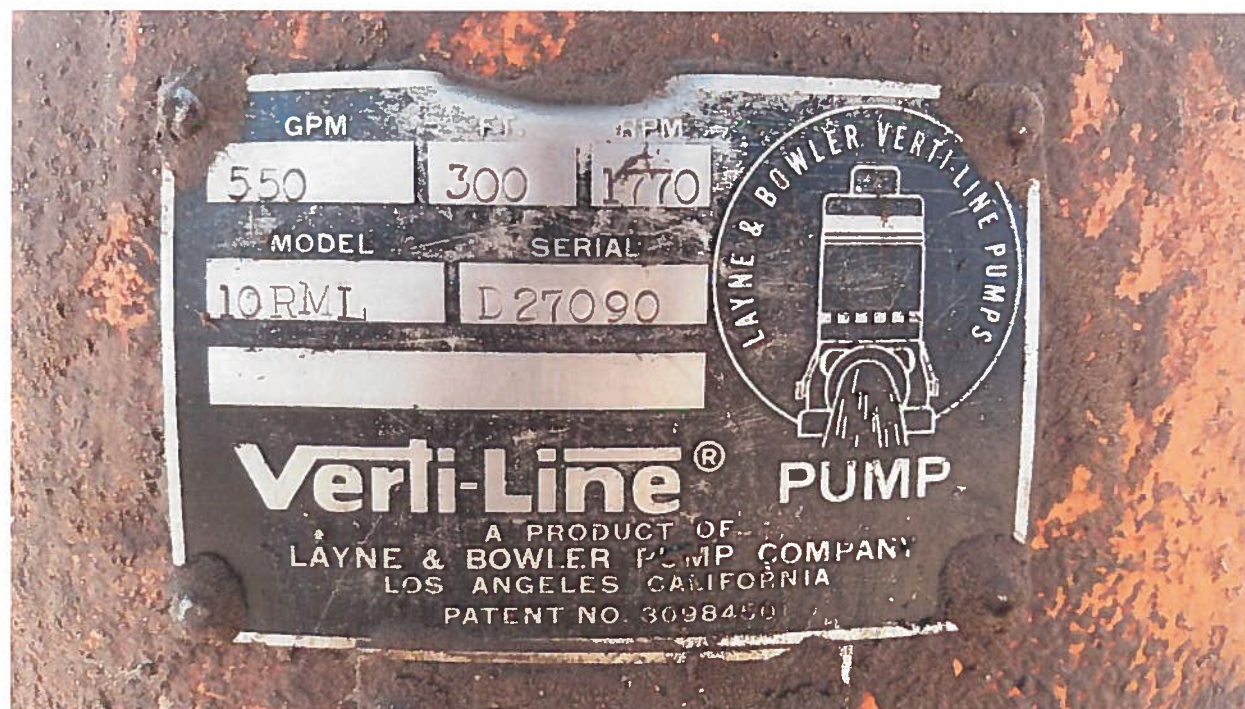
Company Name RIVERSIDE INC Firm No. 333  
Principal Driller \_\_\_\_\_ Date 6-19-07  
and \_\_\_\_\_  
Driller or Operator II \_\_\_\_\_ Date \_\_\_\_\_  
Operator \_\_\_\_\_ Date \_\_\_\_\_  
Principal Driller and Rig Operator Required.  
Operator I must have signature of Driller/Operator II.

FORWARD WHITE COPY TO WATER RESOURCES

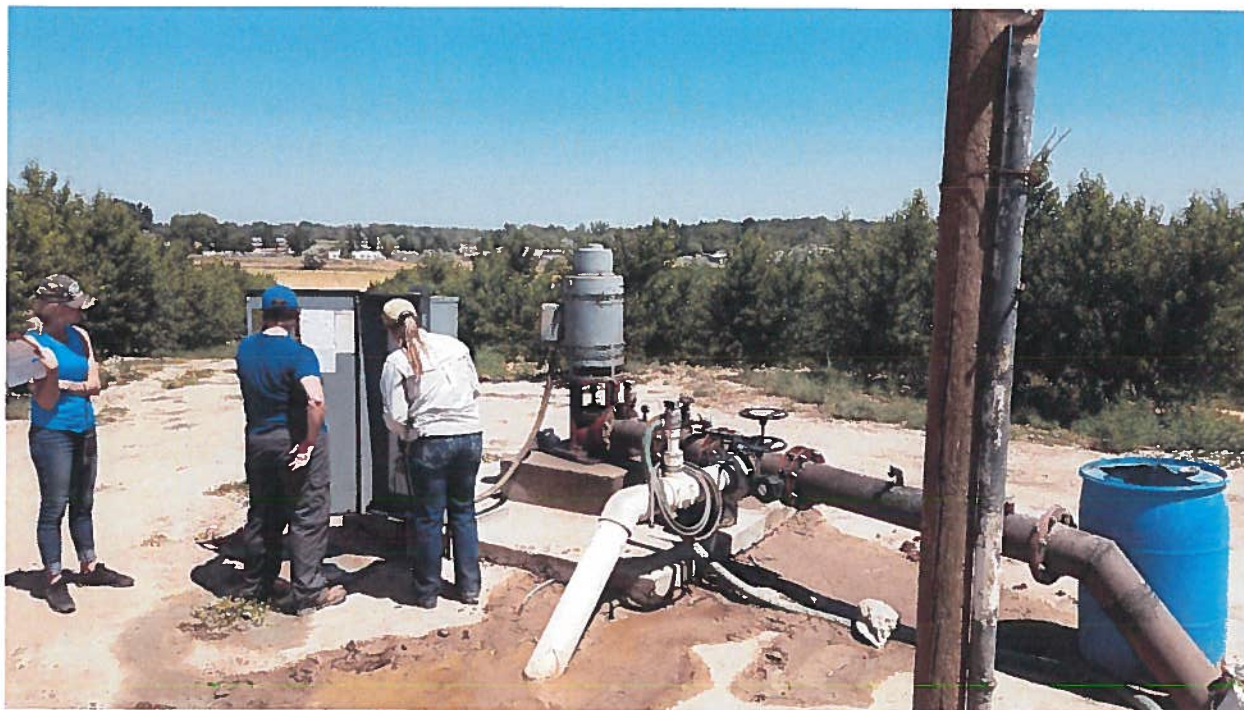
"LOWER WELL"



Picture 3. Photograph showing the plate mounted on the motor at the well in the NWSE of section 4, township 02N, and range 03W. This well is also called the Upper Well.



Picture 4. This photograph shows the information for the pump installed at the Upper Well.



Picture 1. Photographing showing the equipment associated with the Lower Well.



Picture 2. The capped well in the NESW of section 4, township 02N, range 03W.



Picture 5. The motor plated mounted on the Lower Well.



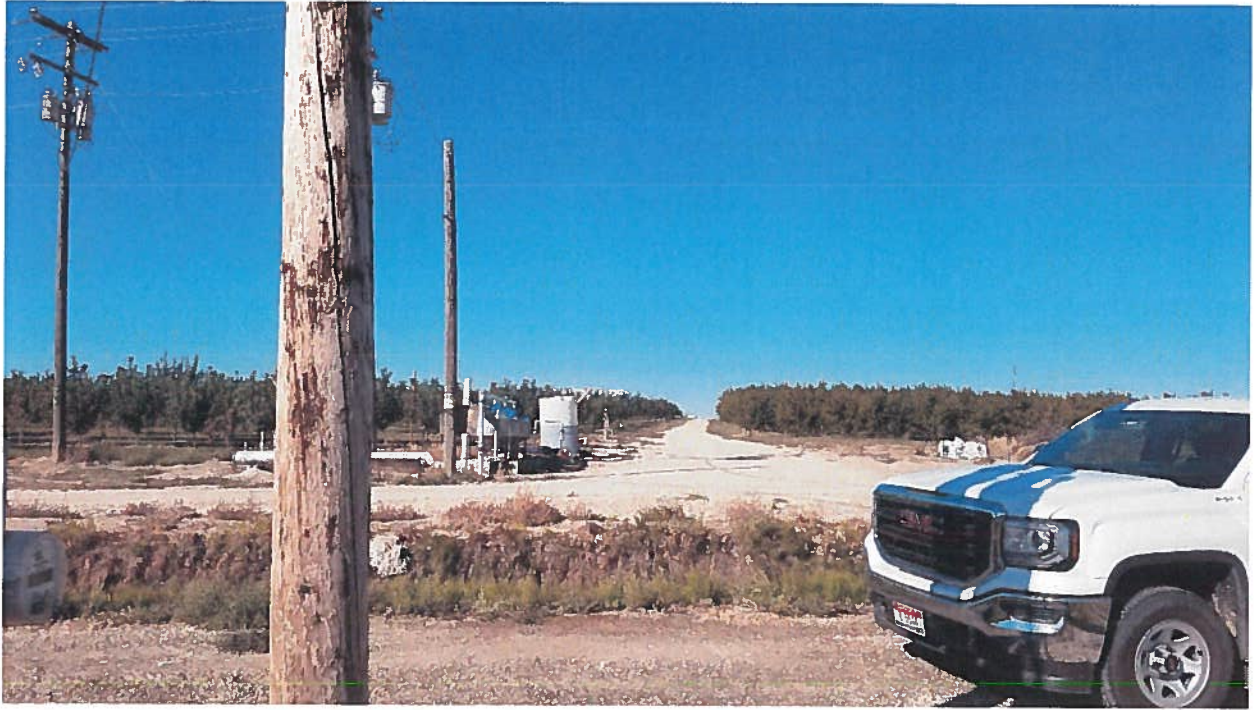
Picture 6. The Cipoletti weir between the collection pond and pumps that supply the buried pipe and ditches.



Picture 7. The setup used to measure the Lower Well.



Picture 8. Showing the place of use in the NWSE and SWSE QQ south of the field access road.



Picture 9. Looking west from the Upper Well at fields in the NESW QQ of section 4, township 02N, range 03W.



## State of Idaho

### DEPARTMENT OF WATER RESOURCES

Western Region, 2735 Airport Way, Boise, Idaho 83705-5082

PHONE: (208) 334-2190 FAX: (208) 334-2348 [www.idwr.idaho.gov](http://www.idwr.idaho.gov)

C.L. "BUTCH" OTTER,  
Governor

GARY SPACKMAN  
Director

05/11/2017

SYMMS FRUIT RANCH INC  
C/O RICHARD A SYMMS  
14068 SUNNY SLOPE RD  
CALDWELL ID 83607

**RE: Scheduling Field Exam for Water Permit No. 63-33494**

Dear Permit Holder:

The Idaho Department of Water Resources (IDWR) is planning to conduct water right examinations in the vicinity of the above-referenced permit **during the weeks of 06/19 through 06/30**. An examination is needed to verify the water use(s) developed under the permit in order to issue a water right license.

The enclosed report of permit no. 63-33494 shows you are authorized to divert 1.56 cfs from Groundwater for the purposes of irrigation. If you developed a beneficial use of water and still own the place of use identified on the map, please contact me at your earliest convenience to schedule an examination.

If you developed a beneficial use of water under the permit but no longer own the property show as the place of use, please fill out the enclosed Assignment of Permit Form to change the owner of the water right permit to the current owner of the property. Submit the complete form and a \$25.00 fee to this office. This will allow IDWR to work with the new permit owner for the license process. A license cannot be issued if beneficial use of water was not developed or if use was developed but abandoned. In either of those cases, please submit the enclosed Relinquishment of Permit Form.

Please contact me at 208-334-2190 within the next thirty (30) days to schedule an examination or if you have any questions. The permit will become void if this office does not receive some correspondence from you by 06/12/2017. If you no longer own that property and do not assign or relinquish the permit, IDWR will work with the current property owner to issue a license or void the permit.

Sincerely,

Phill Hummer

Water Resource Agent

Phone: (208) 334-2190

Email: [phill.hummer@idwr.idaho.gov](mailto:phill.hummer@idwr.idaho.gov)

Enclosure: Relinquishment and Assignment Forms  
Proof Report and Map of Permit No. 63-33494