

M3 COMPANIES, LLC – Water Right Hearing
Before the Department of Water Resources
Permit No. 63-32573
Hearing Officer: Gary Spackman

GP FILE NO. 8526-4

**PROTESTANTS' QUESTIONNAIRE RESPONSES,
WELL DRILLER'S REPORTS,
AND CROSS-SECTIONS**

Index No.	Date	Parties	Questionnaire	Well Log	Cross-Section
1.	9/10/08	McMurray, Michael & Martha	X	X	
2.	9/15/08	Eagle Pines Water Assoc.	X	X	X
3.	9/15/08	Smith, Alan	X	X	X
4.	9/15/08	Edwards, Norman L.	X	X	X
5.	9/26/08	Lawton, Bill	X	X	X
6.	9/26/08	Milburn, Tim & Judy (Lawton)	X		
7.	9/26/08	Goldman, M. Howard (Lawton)	X	X	X
8.	9/26/08	Wood, Robert & Kip (Lawton)	X	X	X
9.	9/30/08	Head, David J. (NACGUA)	X	X	X
10.	9/30/08	Rapp, Ron (NACGUA)	X		
11.	9/30/08	Franden, Janet & John (NACGUA)	X	X	X
12.	9/30/08	Thornton, John & Cathy (NACGUA)	X	X	X
13.	9/30/08	Collett, David & Linda (NACGUA)	X	X	X
14.	9/30/08	Masner, Julie & Morgan (NACGUA)	X	X	X
15.	9/30/08	Purvis, Steven (NACGUA)	X	X	X
16.	9/30/08	Richardson, Bruce & Jean (NACGUA)	X	X	X
17.	9/30/08	Lyons, Robert (NACGUA)	X	X	
18.	9/30/08	Petrovsky, John and Thompson, CJ (NACGUA)	X	X	X
19.	9/30/08	Banducci, Jim (NACGUA)	X	X	X
20.	9/30/08	Jones, Trish & Barry (NACGUA)	X		
21.	9/30/08	Randall, Sherri (NACGUA)	X	X	
22.	9/30/08	VanCamp, Bruce (NACGUA)	X	X	
23.	9/30/08	Tarbet, Sally & Craig (NACGUA)	X	X	

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Index No.	Date	Parties	Questionnaire	Well Log	Cross-Section
24.	9/30/08	Adkins, Lorn (NACGUA)	X	X	
25.	9/30/08	Jordan, Karen & Lyle (NACGUA)	X	X	
26.	9/30/08	Groothuis, M.D. (Butch) (NACGUA)	X	X	
27.	9/30/08	Glivar, Daniel (NACGUA)	X	X	
28.	9/30/08	Iazzetta, Vincent (NACGUA)	X	X	
29.	9/30/08	McMurray, Michael & Martha (NACGUA)	X	X	
30.	9/30/08	Watkins, Charles (NACGUA)	X		
31.	9/30/08	Evans, Loring & Julie (NACGUA)	X	X	
32.	9/30/08	Gaston, Dale & Mary (NACGUA)	X		
33.	9/30/08	West, Robert H. & Alasya (NACGUA)	X	X	
34.	9/30/08	Jekel, Barb (NACGUA)	X		
35.	9/30/08	Niccolls, Robert S. Jr. (NACGUA)	X	X	
36.	9/30/08	Conrad, Shelby (NACGUA)	X	X	
37.	9/30/08	Meyer, Walter H. Jr. (NACGUA)	X	X	
38.	9/30/08	Leigh, Eric & Joyce (NACGUA)	X	X	
39.	9/30/08	Keys, George (NACGUA)	X	X	
40.	9/30/08	Dick, Stephen (NACGUA)	X	X	X
41.	9/30/08	McDonald, G.E. (NACGUA)	X	X	
42.	9/30/08	Minkiewicz, Vince & Patricia (NACGUA)	X		
43.	9/30/08	Lagerstrom, Richard & Dr. Dessa (NACGUA)	X		
44.	9/30/08	Ritter, Thomas & Anne (NACGUA)	X	X	X
45.	10/24/08	Burke, Linda & Kevin Culligan (NACGUA)	X		
46.		Table of Protestants' Well Information			

1

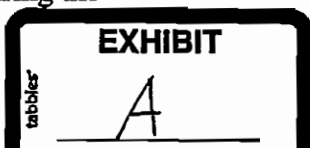
Jeff Finkley

SEP 12 2008

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

Givens Pursley, LLC

- 1) Your name and address: MICHAEL & MARTHA MC MURRAY
902 STILLWELL DR, EAGLE, MANDO 83616
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: CRIG PHALIN
- 4) The drilling company who drilled your well: CAN-ADA WELL DRILLING
- 5) Year (or approximate year) your well was drilled: 1992 Water right #: 747
- 6) Overall well depth: 213. Depth to water: 147 63-0348311
1-7-1964
- 7) The use(s) of your well (domestic, irrigation, etc) BOTH 63-0301611
1-3-1955
- 8) Do you have records of the well's construction or maintenance? YES
- 9) Do you have records of pump maintenance and/or replacement? N/A WATER LICENSE
6311580
11-4-1991
- 10) Describe any change in water level or productivity in the last few years: UNUSUAL ?
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: NONE
 - a. Does your well produce sand? NO. If so, how much?
 - b. Who is your pump professional? CONSC DRILLING & PUMP
 - c. To what do you attribute the problems you have experienced? N/A
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: DRILL TO DEEPER, SCREEN INSTALLED, NO PROBLEMS
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208 939 7806 H
208 859 4324 C
208 859 4364 C



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SEP 15 2008

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

Givens Pursley, LLP

- 1) Your name and address: Eagle Pines Water Assn
3135 Osprey Rd, Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Lamar Walker
- 4) The drilling company who drilled your well: A-Line - Russell A. Johnston
- 5) Year (or approximate year) your well was drilled: 3-30-01. Water right #: 63-3018
- 6) Overall well depth: 188. Depth to water: 126
- 7) The use(s) of your well (domestic, irrigation, etc): irrigation
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: No change
- 11) Do you have records of water levels? yes
- 12) Describe any problems you have experienced with your well or pump: Installed a sand separator 2004
 - a. Does your well produce sand? yes. If so, how much? Small Amount
 - b. Who is your pump professional? Layne of Idaho
 - c. To what do you attribute the problems you have experienced? corrected the sand problem with a separator
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: see item #12 above
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 43° 43.90 N WGS 84 Map Datum
116° 22.17 W

RECEIVED

Form 238-7
11/97

MAY 29 2001 IDAHO DEPARTMENT OF WATER RESOURCES

WATER RESOURCES
WESTERN REGION

WELL DRILLER'S REPORT

(Abandonment)

768507

Office Use Only
 Inspected by _____
 Twp _____ Rge _____ Sec _____
 _____ 1/4 _____ 1/4 _____ 1/4
 Lat: : : Long: : :

1. WELL TAG NO. D 10ne

DRILLING PERMIT NO. _____
Other IDWR No. A-63-03018 A-63-03489

2. OWNER:
Name Eagle Pine's Water Assn. 939-8177
Address 1252 w. Meander
City Eagle State Id Zip 83616

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

N

 W E S
 Twp. 5 North or South
 Rge. 1 East or West
 Sec. 32 NE 1/4 SW 1/4 NW 1/4
 Gov't Lot _____ County _____
 Lat: : : Long: : :
 Address of Well Site 1202 w. Osprey
- 1/8 mi north of road. City Eagle
 (Give at least name of road + Distance to Road or Landmark)

Lt. 6 Blk. 1 Sub. Name _____

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK		AMOUNT		METHOD
Material	From To	Sacks or Pounds		
Bentonite	0 168'	4 Tons		Poured

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
14"	0	168'	250	Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method factory & knife
 Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
110	160	1/8	2000	14	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
112 ft. below ground Artesian pressure NA lb.
Depth flow encountered NA ft. Describe access port or control devices: 1/2" thick plate welded on top

11. WELL TESTS:

Pump Bailor Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
1000	10'	123'	50 years

Water Temp. 65° Bottom hole temp. _____
Water Quality test or comments: Casing was eroding at 125'
Depth first Water Encounter _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
14"	0	168'	Bentonite		<input checked="" type="checkbox"/>

RECEIVED

JUN - 4 2001

Department of Water Resources

Completed Depth 0 (Measurable)
Date: Started 5-21 Completed 5-23

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

Company Name A-Line Firm No. 566
 Firm Official Russell A. Johnston Date 5-24-01
 and
 Driller or Operator _____ Date _____
 (Sign once if Firm Official & Operator)

EAGLE PINES ABANDONED

Well No. _____
 Permit No. Y-2534A

(DO NOT FILL IN)

Owner Charles Fisher Address RT1, Eagle
 Driller Chester D. Kinsey Address RT1 Eagle Lic. No. 33
 Location of Well 18 1/2 x 14 1/2 1/4 Sec. 32, T. 5 N. 1/2, R. R1 E. Ada County,
 and _____ feet N/S, and _____ feet E/W from _____ Corner of _____ 1/4 _____ 1/4 Sec. _____
 Size of Drilled Hole 14" Total depth of Well 168'
 Give depth of standing water from surface 105' Water Temp. _____ °Fahrenheit
 On pumping test delivery was 1809 g.p.m. or 1809 c.f.s. Drawdown was 14'6" feet.
 Size of pump and motor used to make the test 4 Bawls 1 1/2" 5" Colum, 70 HP, Diesel
 Length of time pumped during check was 6 hrs hr., _____ minutes.
 If flowing well, give flow in c.f.s. _____ or g.p.m. _____ and shut in pressure _____
 If flowing well, describe control works _____ (TYPE AND SIZE OF VALVE, ETC.)
 Water will be used for irrigation Weight of casing per linear foot 23.4 lb
 Thickness of casing 10 Ga Casing material Red Hard steel
E.G., PIPE, CONCRETE, WOOD.
 Diameter, length and location of casing 14" 168'
(CASING 12" IN DIAMETER AND UNDER GIVE INSIDE DIAMETER; CASING OVER 12" IN DIAMETER GIVE OUTSIDE DIAMETER.)
 Number and size of perforations 12 per ft 1 1/2" x 3/8" located 105' feet to 150' feet
 from surface of ground.
 Other perforations _____
 Date of commencement of well 1-5-55 Date of completion of well 2-21-55
 Type of well rig _____

CASING RECORD

DIAM. CASING	FROM FEET	TO FEET	LENGTH (ft)	REMARKS -- SEALS, GROUTING, ETC.

GENERAL INFORMATION—Pumping Test, Quality of Water, Etc.

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SCANNED
8/24

RECEIVED

SEP 15 2008

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

Givens Pursley, LLP

1) Your name and address: Alan Smith
31351 Pappas Rd Eagle, Idaho 83616-2725

2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.

3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: No. I drilled the domestic well after purchasing the property.

4) The drilling company who drilled your well: Engelman Well Drilling

5) Year (or approximate year) your well was drilled: April, 1975 Water right #: 43-09258
Deeded water right

6) Overall well depth: 183 ft Depth to water: 68 ft
Snake River
Adjudication Case
Case # 39574
Dist. Ct. 5th
Judicial Dist
Twin Falls County

7) The use(s) of your well (domestic, irrigation, etc): Roof

8) Do you have records of the well's construction or maintenance? yes

9) Do you have records of pump maintenance and/or replacement? No

10) Describe any change in water level or productivity in the last few years: None

11) Do you have records of water levels? No

12) Describe any problems you have experienced with your well or pump: None

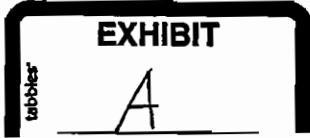
a. Does your well produce sand? No. If so, how much? _____

b. Who is your pump professional? Boise Valley Pump

c. To what do you attribute the problems you have experienced? _____

13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: No

14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: No



1. WELL OWNER

Name L. Alan Smith
 Address 1708 Malad Boise, Idaho 83705
 Owner's Permit No. _____

7. WATER LEVEL

Static water level 68 feet below land surface
 Flowing? Yes No
 Temperature _____ ° F. Quality _____
 Artesian closed-in pressure _____ p.s.i.
 Controlled by Valve Cap Plug

MAY 14 1975

2. NATURE OF WORK

New well Deepened Replacement
 Abandoned (describe method of abandoning)

8. WELL TEST DATA

Pump Bailer Other
 Discharge G.P.M. 50 Draw Down with air compressor Hours Pumped _____

3. PROPOSED USE

Domestic Irrigation Test Other (specify type)
 Municipal Industrial Stock Waste Disposal or Injection

9. LITHOLOGIC LOG

46595

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
10	0	2	topsoil		x
10	2	12	subsoil		x
10	12	38	Brown clay		x
10	38	41	brown sandy clay		x
8	41	68	brown clay		x
8	68	83	sand and gravel		x
8	83	89	brown sandy clay		x
8	89	113	yellow clay		x
8	113	149	brown sandy clay	x	
8	149	150	sand	x	
8	150	157	yellow sandy clay		x
8	157	159	sand	x	
8	159	162	clay		x
8	162	180	sand	x	
8	180	183	clay		x
8	183		sand	x	

4. METHOD DRILLED

Cable Rotary Dug Other

5. WELL CONSTRUCTION

Diameter of hole 8 inches Total depth 180 feet
 Casing schedule: Steel Concrete

Thickness	Diameter	From	To
<u>.250</u> inches	<u>8</u> inches	<u>1 1/2</u> feet	<u>165</u> feet
<u>.250</u> inches	<u>5</u> inches	<u>157</u> feet	<u>167</u> feet
<u>.250</u> inches	<u>5</u> inches	<u>177</u> feet	<u>180</u> feet

Was a packer or seal used? Yes No
 Perforated? Yes No
 How perforated? Factory Knife Torch
 Size of perforation _____ inches by _____ inches

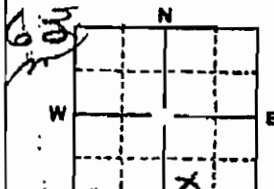
Number	From	To
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet
_____ perforations	_____ feet	_____ feet

Well screen installed? Yes No
 Manufacturer's name Johnson
 Type Stainless Model No. _____
 Diameter 5 Slot size 20 Set from 167 feet to 172 feet
 Diameter 5 Slot size 25 Set from 172 feet to 177 feet

Gravel packed? Yes No Size of gravel _____
 Placed from _____ feet to _____ feet
 Surface seal depth 40 ft. Material used in seal Cement grout
 Pudding clay Well cuttings
 Sealing procedure used Slurry pit Temporary surface casing
 Overbore to seal depth

6. LOCATION OF WELL

Sketch map location must agree with written location.



Subdivision Name Eagle Pines
 Lot No. _____ Block No. _____

10.

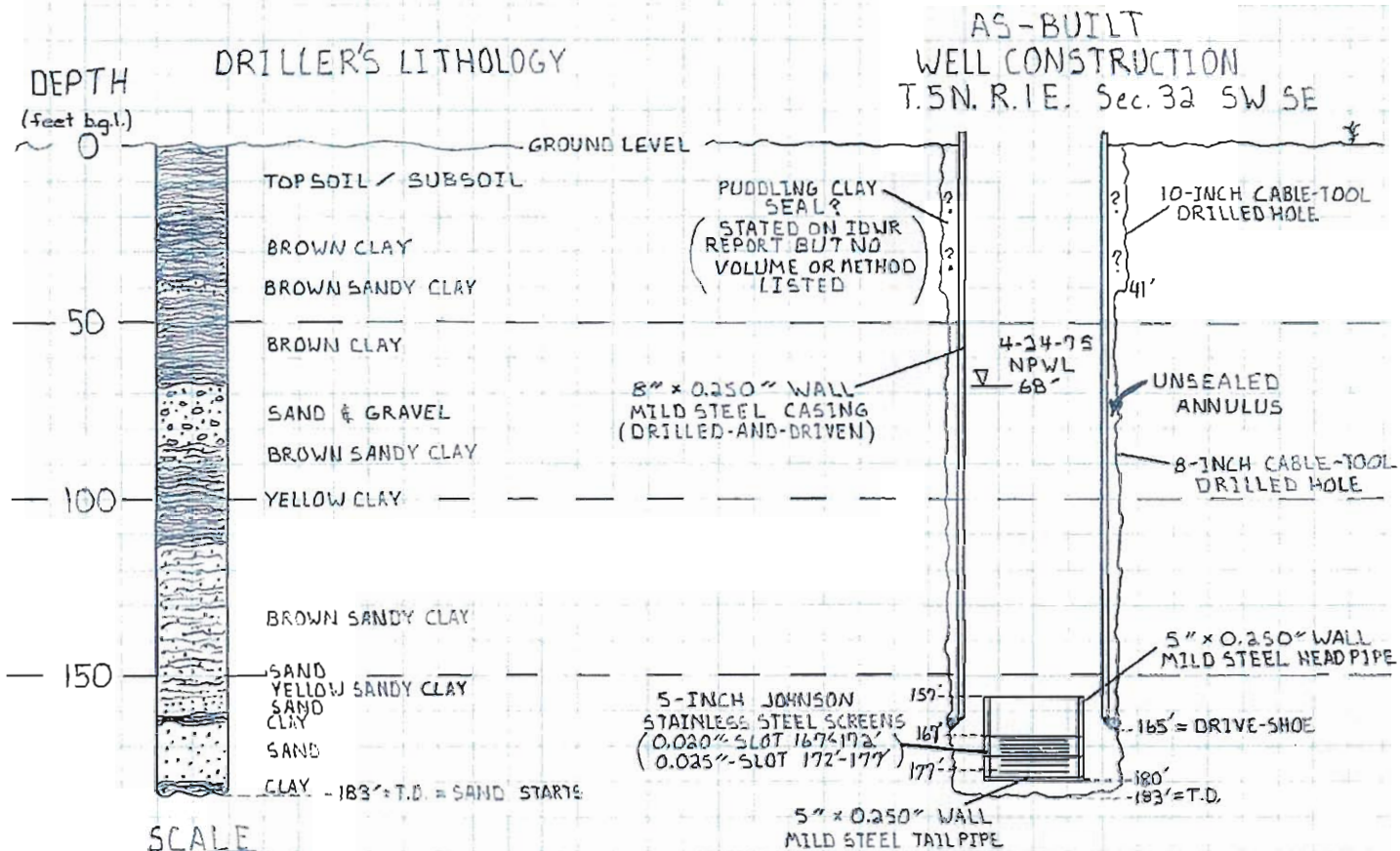
Work started 3/3/75 finished 4/24/75

11. DRILLERS CERTIFICATION

Firm Name Engleman Well Drilling Firm No. 47
 Address 1309 Band st Boise Date May 1, 75

SUBJECT *Smith Domestic Well*
3135 Osprey Road, Eagle, ID

DATE _____
 SHEET _____ OF _____



SCALE
 VERTICAL 1" = 50'
 HORIZONTAL 0.1" = 1"

- Well constructed April 24, 1975 by Engleman Well Drilling
- Non-pumping water level (NPWL) was 68' below ground.
- Pumping water level not reported.
- Information shown is from Driller's report on file at Idaho Department of Water Resources.

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SEP 15 2008

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

Givens Pursley, LLP

- 1) Your name and address: NORMAN L. EDWARDS
884 WY Beacon Hill Rd - Eagle Idaho 83616
- 2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Lamar Walker
- 4) The drilling company who drilled your well: Nicholson Well Drilling
- 5) Year (or approximate year) your well was drilled: April 1972. Water right #: ?
- 6) Overall well depth: 145'. Depth to water: 68.25' 9-11-08
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: None
- 11) Do you have records of water levels? yes
- 12) Describe any problems you have experienced with your well or pump: Replaced original pump due to electric short in motor in 1993
 - a. Does your well produce sand? Trace. If so, how much? _____
 - b. Who is your pump professional? Burgess Pump Co
 - c. To what do you attribute the problems you have experienced? original pump shorted out
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: Nothing done
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: IDWR is monitoring 43° 43.33' N Mer Datum

Name La Mar Walker
Address Box 276 Eagle, Idaho
Owner's Permit No. _____

Static water level 60 feet below land surface
Flowing? Yes No G.P.M. flow _____
Temperature _____ ° F. Quality _____
Artesian closed-in pressure _____ p.s.i.
Controlled by Valve Cap Plug

2. NATURE OF WORK

New well Deepened Replacement
 Abandoned (describe method of abandoning)

8. WELL TEST DATA

Pump Bailer Other
Discharge G.P.M. 40 Draw Down 1.5 Hours Pumped 4

3. PROPOSED USE

Domestic Irrigation Test
 Municipal Industrial Stock

9. LITHOLOGIC LOG

043009

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
6	0	55	Sandy Clay		<input checked="" type="checkbox"/>
11	55	68	Cement sand & Gravel		<input checked="" type="checkbox"/>
11	68	78	Coarse sand & Gravel		<input checked="" type="checkbox"/>
11	78	125	Sandy Clay		<input checked="" type="checkbox"/>
11	125	142	Medium sand & Gravel		<input checked="" type="checkbox"/>
11	142	145	Clay		<input checked="" type="checkbox"/>

4. METHOD DRILLED

Cable Rotary Dug Other

5. WELL CONSTRUCTION

Diameter of hole 6 inches Total depth 145 feet
Casing schedule: Steel Concrete
Thickness 1/4 inches Diameter 6 inches From +1 feet To 145 feet

Was a packer or seal used? Yes No
Perforated? Yes No
How perforated? Factory Knife Torch
Size of perforation 1/8 inches by 1 inches
Number 42 perforations From 130 feet To 136 feet

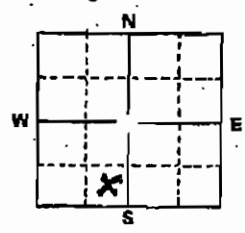
Well screen installed? Yes No
Manufacturer's name _____
Type _____ Model No. _____
Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? Yes No Size of gravel _____
Placed from _____ feet to _____ feet

Surface seal? Yes No To what depth 20 feet
Material used in seal Cement grout Puddling clay

6. LOCATION OF WELL

Sketch map location must agree with written location.



10.

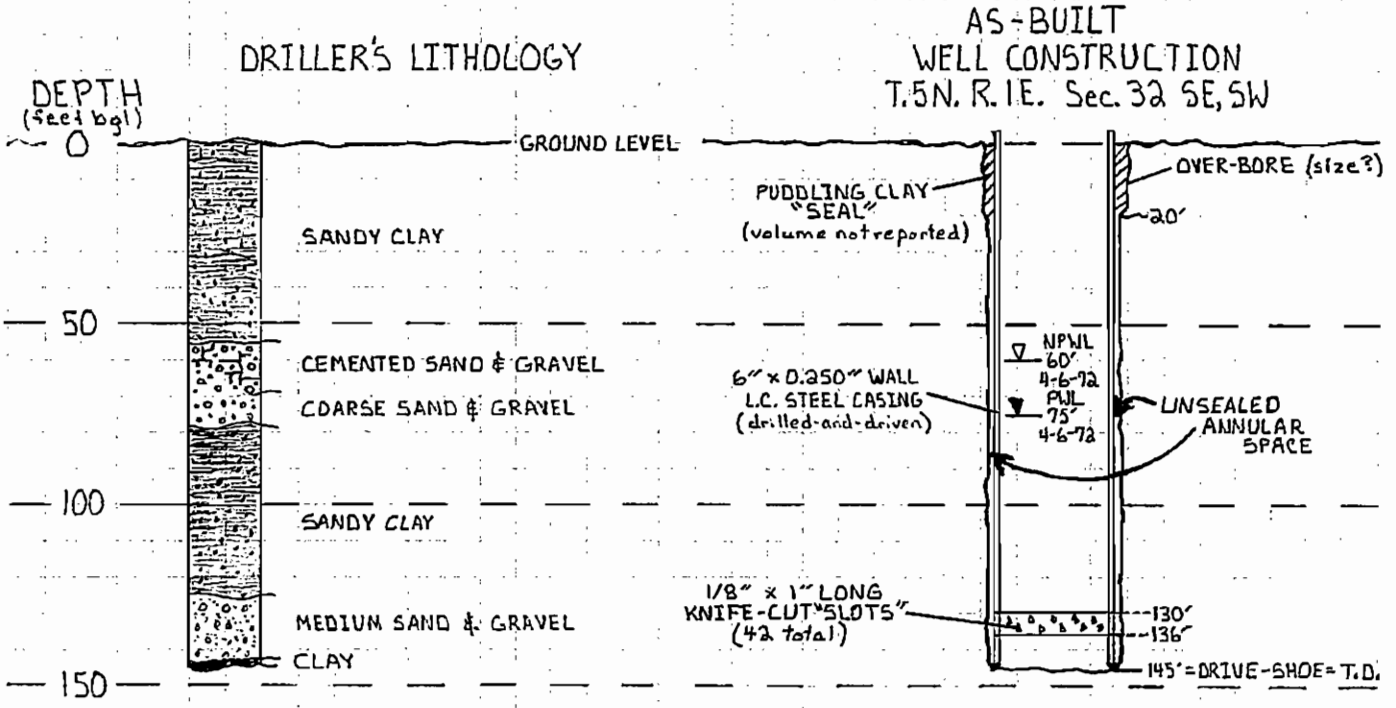
Work started March 29, 1972 finished April 6, 1972

11. DRILLER'S CERTIFICATION

This well was drilled under my supervision and this report is true to the best of my knowledge.

H. L. Walker

SUBJECT Edwards Domestic Well
884 W. Beacon Light Rd., Eagle, ID



SCALE
VERTICAL 1" = 50'
HORIZONTAL 0.1" = 1"

- Well constructed April 6, 1972 by: Nicholson Well Drilling
- Non-pumping water level (NPWL) was 60 feet below ground in April 1972.
- * IDWR measured water level on Sept. 11, 2008 at 68.25 feet below datum.
- Pumping water level (PWL) was 75 feet below ground after pumping at 40 gallons/minute for four hours.
- Information shown in sketch is from Driller's Report on file at Idaho Department of Water Resources.

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Bill LAWTON 3145 Osprey RD
Eagle 83616
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
Irrigation well, Eagle Pines Water users, #63-03018, 1/4/SS
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Wes Sain
un-numbered House well
- 4) The drilling company who drilled your well: Jim's Well drilling, Kinwa
- 5) Year (or approximate year) your well was drilled: 2008. Water right #: N/A
- 6) Overall well depth: 160'. Depth to water: 120'
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? Pump replaced 2008
- 10) Describe any change in water level or productivity in the last few years: old well went dry but was very shallow
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: NONE with new well
- a. Does your well produce sand? yes. If so, how much? Little
- b. Who is your pump professional? Burgess Pump Co.
- c. To what do you attribute the problems you have experienced? there had to be a drop in water level, I know of 3 other wells in the area that have had trouble.
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-8475

63
Form 238-7
6/02

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

851418

Office Use Only				
Well ID No.	421218			
Inspected by				
Twp	Rge	Sec		
1/4	1/4	1/4		
Lat:	:	Long:	:	:

1. WELL TAG NO. D 0048320
 DRILLING PERMIT NO. _____
 Water Right or Injection Well No. _____

2. OWNER: Bill Lawton
 Name Bill Lawton
 Address 3145 Osprey Rd
 City Eagle State ID Zip 83686

3. LOCATION OF WELL by legal description:
 You must provide address or Lot, Blk, Sub. or Directions to well.
 Twp. 5 North or South
 Rge. 1 East or West
 Sec. 32 1/4 SE 1/4 SW 1/4
 Gov't Lot _____
 County AD
 Lat: _____ Long: _____
 Address of Well Site same
 City _____
 (Give at least name of road - Direction to Point or Landmark)
 Lt. 5 Blk. 2 Sub. Name Eagle Pines

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD:
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>Bentonite</u>	<u>0</u>	<u>18</u>	<u>350</u>	<u>over bore</u>

Was drive shoe used? Y N Shoe Depth(s) 137'
 Was drive shoe seal tested? Y N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>+2</u>	<u>137</u>	<u>250</u>	<u>steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 40' Length of Tailpipe _____
 Packer Y N Type _____

9. PERFORATIONS/SCREENS PACKER TYPE
 Perforation Method _____
 Screen Type & Method of Installation FACTORY PVC

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>141</u>	<u>161</u>	<u>20</u>	<u>40</u>	<u>4 1/2</u>	<u>50R17</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
97' ft. below ground Artesian pressure _____ lb.
 Depth flow encountered 140-160 Describe access port or control devices:
Turtle cap

12. WELL TESTS:
 Pump Bailor Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>30-40</u>	<u>160</u>	<u>160</u>	<u>4 hrs</u>

Water Temp. 65 Bottom hole temp. _____
 Water Quality test or comments: Tastes Great
 Depth first Water Encounter 90

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

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10</u>	<u>0</u>	<u>18</u>	<u>Brn clay</u>		
<u>6</u>	<u>18</u>	<u>22</u>	<u>Brn clay</u>		
	<u>22</u>	<u>43</u>	<u>Lighter Brn clay some sand</u>		
	<u>43</u>	<u>49</u>	<u>Gravel</u>		
	<u>49</u>	<u>52</u>	<u>Clean sand soft</u>		
	<u>52</u>	<u>74</u>	<u>Dry dense Brn clay</u>		
	<u>74</u>	<u>90</u>	<u>clay + sand</u>		
	<u>90</u>	<u>92</u>	<u>clay</u>		
	<u>92</u>	<u>106</u>	<u>clay + sand</u>		X
			<u>Casing slowing down</u>		
			<u>getting sand locked</u>		
	<u>106</u>	<u>108</u>	<u>clay</u>		
	<u>108</u>	<u>137</u>	<u>Casing seized</u>		
			<u>wont move</u>		
	<u>137</u>	<u>161</u>	<u>clay + sand</u>		X

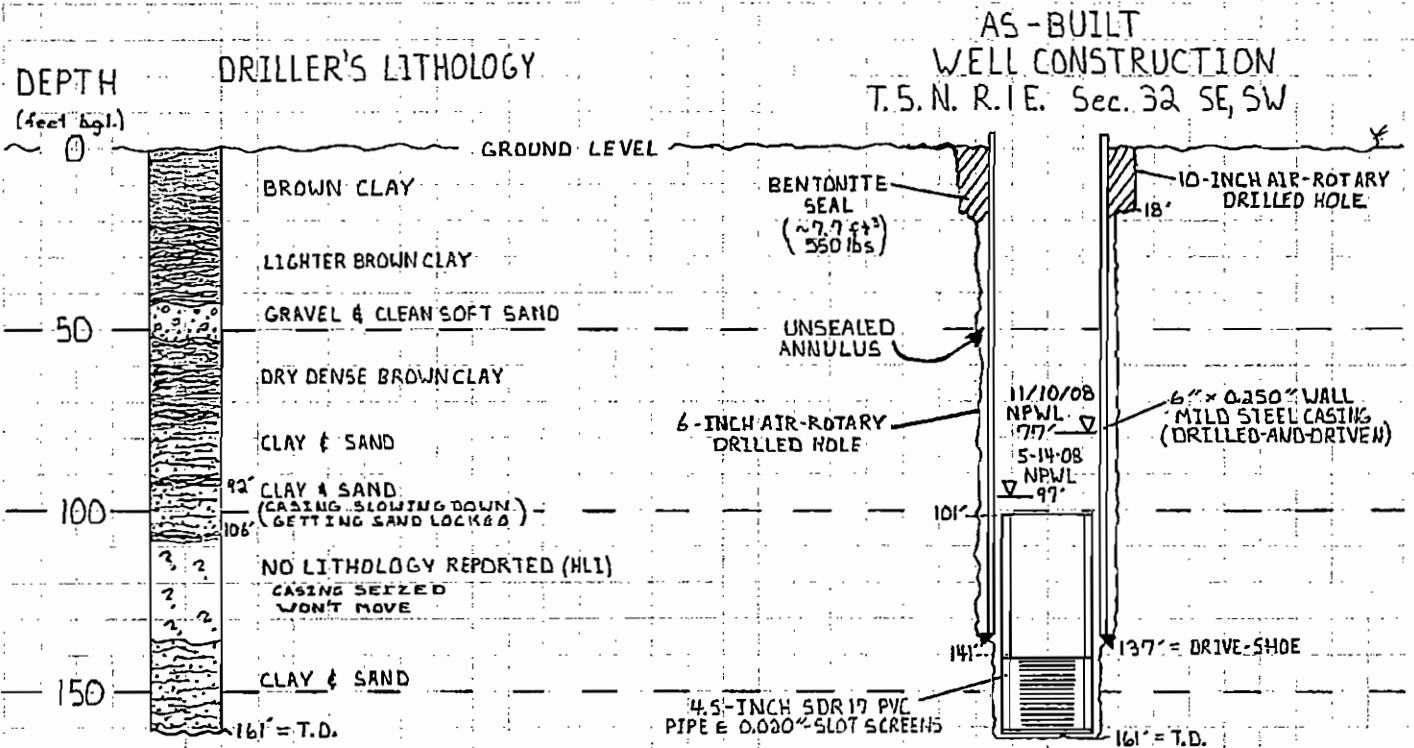
RECEIVED
 JUN 03 2008
 WATER RESOURCES
 WESTERN REGION

Completed Depth 161 (Measurable)
 Date: Started 5-10-08 Completed 5-14-08

14. DRILLER'S CERTIFICATION
 We certify that all minimum well construction standards were complied with at the time the rig was removed.
 Company Name Jim's Well Drilling Firm No. 623
 Principal Driller Jim Hunter Date 5-16-08
 and _____ Date _____
 Driller or Operator II _____ Date _____
 Operator I _____ Date _____
 Principal Driller and Rig Operator Required.
 Operator I must have signature of Driller/Operator II.

SUBJECT Lawton Domestic Well
3145 Osprey Road, Eagle, Idaho

SHEET OF



SCALE
VERTICAL 1" = 50'
HORIZONTAL 0.1" = 1"

• Well constructed May 14, 2008 by:
Jim's Well Drilling

• Non-pumping water level (NPWL) was
97' below ground

• Information shown is from Driller's
Report on file at Idaho Department of
Water Resources.

• No useable pump test data.

* HLI water level measurement
on 11/10/08 at 10:57 hrs was
77.83' feet below ground.

6

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Tim and Judy Milburn
1381 W. Meander Dr Eagle
- 2) Do you have or use a ground water right in the Eagle area? no. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Barabara Daly
- 4) The drilling company who drilled your well: ?
- 5) Year (or approximate year) your well was drilled: 1973. Water right #: _____
- 6) Overall well depth: no. Depth to water: no
- 7) The use(s) of your well (domestic, irrigation, etc): both
- 8) Do you have records of the well's construction or maintenance? no
- 9) Do you have records of pump maintenance and/or replacement? 2005
- 10) Describe any change in water level or productivity in the last few years: ?
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: no
- a. Does your well produce sand? _____. If so, how much? _____
- b. Who is your pump professional? Burgess Pump
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: do not know
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-3449

7

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: AA Howard Baldwin
3837 N.W. Canyon Valley Way
- 2) Do you have or use a ground water right in the Eagle area? . If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased:
- 4) The drilling company who drilled your well:
- 5) Year (or approximate year) your well was drilled: 1997. Water right #:
- 6) Overall well depth: 180. Depth to water: 165
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic
- 8) Do you have records of the well's construction or maintenance? No
- 9) Do you have records of pump maintenance and/or replacement? No Repairs
- 10) Describe any change in water level or productivity in the last few years:
- 11) Do you have records of water levels? No
- 12) Describe any problems you have experienced with your well or pump: None
- a. Does your well produce sand? No. If so, how much?
- b. Who is your pump professional?
- c. To what do you attribute the problems you have experienced?
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance:
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208 939 3724
208 939 3774

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

Office Use Only
 Inspected by _____
 Twp _____ Rge _____ Sec _____
 _____ 1/4 _____ 1/4 _____ 1/4
 Lat: : : Long: : :

091667

1. DRILLING PERMIT NO. 63-96-W-0309-000
 Other IDWR No. _____

2. OWNER:
 Name Howard Goldman
 Address 3837 N. Green Valley Rd
 City _____ State _____ Zip _____

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N					
X					
S					

Twp. 5 North or South
 Rge. 1 East or West
 Sec. 32 1/4 NW 1/4 NW 1/4
 Gov't Lot _____ County Ada 10 acres 40 acres 160 acres
 Lat: : : Long: : :
 Address of Well Site _____
 City Eagle

(Give at least name of road + Distance to Road or Landmark)
 Lt. 3 Blk. 2 Sub. Name West Ridge

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Secks or Pounds	
Bentonite	3	18	250	overbore

Was drive shoe used? Y N Shoe Depth(s) 188
 Was drive shoe seal tested? Y N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6" +1	188	174	1/4	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 4 Length of Tailpipe 1

9. PERFORATIONS/SCREENS

Perforations Method Full back
 Screens Screen Type SS

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
189	199	.020		5"	SS	<input type="checkbox"/>	<input checked="" type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

90 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered N/A ft. Describe access port or control devices: N/A

11. WELL TESTS:

Pump Baller Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>35</u>	<u>10</u>	<u>100</u>	<u>1hr</u>

Water Temp. _____ Bottom hole temp. _____
 Water Quality test or comments: N/A

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10"	0	9	Top soil		X
10"	9	18	sand		X
6"	18	32	sand		X
6"	32	74	clay + sand		X
6"	74	101	clay	X	
6"	101	124	GRAVEL	X	
6"	124	133	Gravel + sand	X	
6"	133	143	Yellow, muddy sand	X	
6"	143	180	clay		X
6"	180	201	sand	X	
6"	201		clay		X

RECEIVED

JUN 28 1996

WATER RESOURCES
WESTERN REGION

RECEIVED

JUL 16 1996

Department of Water Resources

SEP 11 1996

Completed Depth 200 (Measurable)
 Date: Started 5-22-96 Completed 6-10-96

13. DRILLER'S CERTIFICATION

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

Firm Name Phipps Drilling Firm No. 311

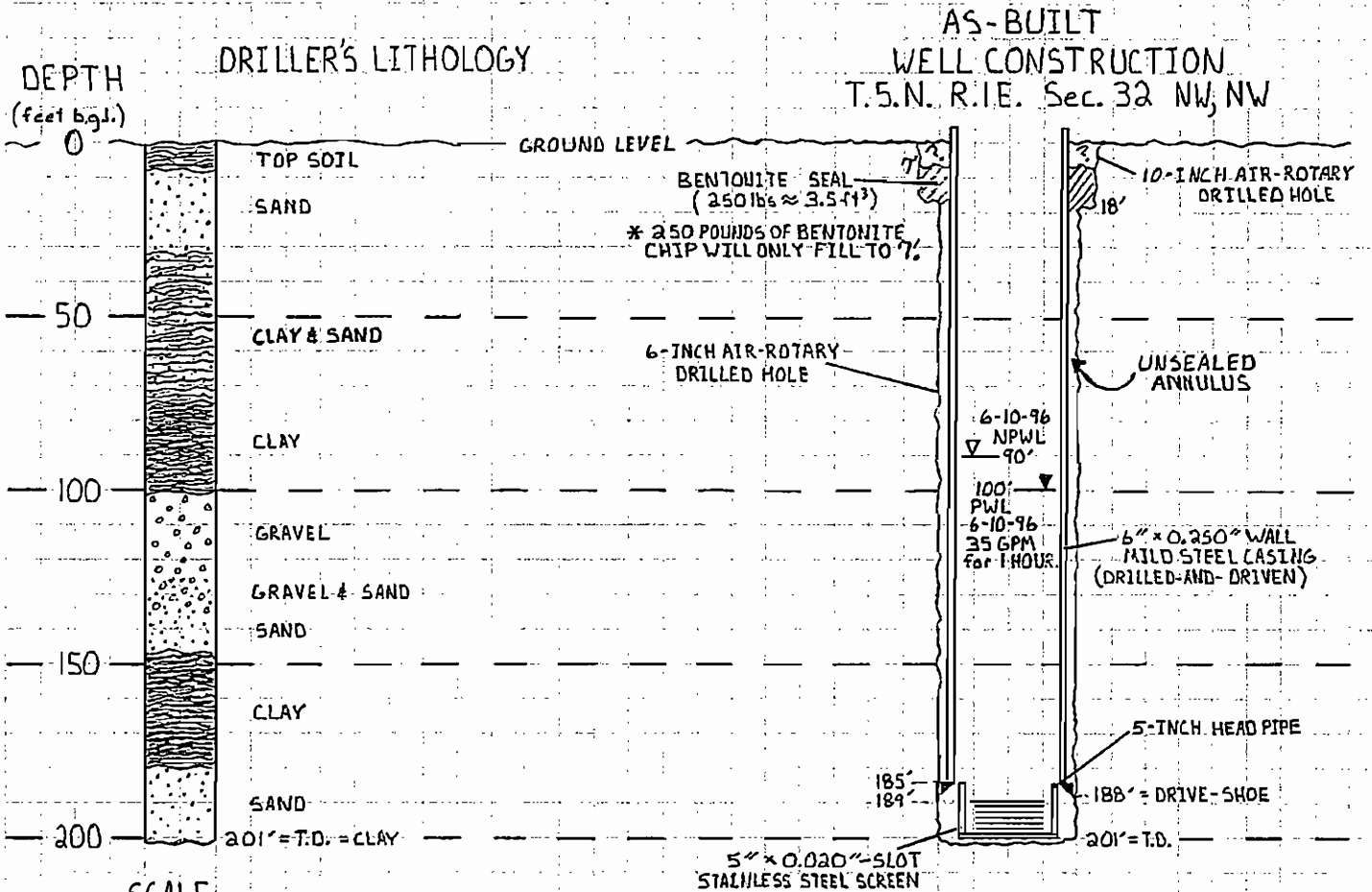
Firm Official Wesley A. Phipps Date 6-24-96

and Supervisor or Operator Andy Payne Date 6-7-96

(Sign once if Firm Official & Operator)

SUBJECT Goldman Domestic Well
3837 N. Green Valley Way, Eagle, ID

SHEET OF



SCALE
VERTICAL 1" = 50'
HORIZONTAL 0.1" = 1'

- Well constructed June 10, 1996 by: Phipps Drilling
- Non-pumping water level (NPWL) was 90' feet below ground.
- Pumping water level (PWL) was 100 feet below ground after pumping at 35 gallons/minute for one hour.
- Specific capacity = 3.5 gpm/foot.
- Information shown is from Driller's Report on file at Idaho Department of Water Resources.

8

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Robert & Rip Wood
1380 W Mesander Dr. Eagle, Id 83616
- 2) Do you have or use a ground water right in the Eagle area? no. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
- 4) The drilling company who drilled your well: need to look up
- 5) Year (or approximate year) your well was drilled: 2007. Water right #: _____
- 6) Overall well depth: 185. Depth to water: 185'
- 7) The use(s) of your well (domestic, irrigation, etc): both
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: _____
well went dry
- 11) Do you have records of water levels? driller's record
- 12) Describe any problems you have experienced with your well or pump: _____
ran out of water
- a. Does your well produce sand? _____. If so, how much? _____
- b. Who is your pump professional? Burgess
- c. To what do you attribute the problems you have experienced? _____
ran out of water
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208-860-1951

63

844703

Form 238-7
6/02

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only
Well ID No. 414861
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 _____ 1/4 _____ 1/4 _____
Lat: : : Long: : :

1. WELL TAG NO. D D0047409
DRILLING PERMIT NO. _____
Water Right or Injection Well No. _____

2. OWNER:
Name BOB WOOD
Address 1380 MEANDER DR.
City EAGLE State ID Zip 83704

3. LOCATION OF WELL by legal description:
You must provide address or Lot, Blk, Sub. or Directions to well.
Twp. S North or South
Rge. 1 East or West
Sec. 32 NW 1/4 SW 1/4 SE 1/4 NE 1/4
Gov't Lot _____ County ADA 160 acres
Lat: : : Long: : :
Address of Well Site SAME

(Give at least name of road + Distance to Road or Landmark)
City EAGLE
Lt. 1 Blk. 3 Sub. Name Eagle Pines

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other 6" WELL

6. DRILL METHOD:
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
<u>5/8 BENTONITE</u>	<u>0</u>	<u>20</u>	<u>750 lbs.</u>	<u>10" OVERBORE</u>

Was drive shoe used? Y N Shoe Depth(s) 206'
Was drive shoe seal tested? Y N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>1 1/2</u>	<u>206</u>	<u>.250</u>	<u>STEEL</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>5"</u>	<u>203</u>	<u>208</u>	<u>.258</u>	<u>STEEL</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>5"</u>	<u>218</u>	<u>220</u>	<u>.258</u>	<u>STEEL</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 5.0 Length of Tailpipe 2.0
Packer Y N Type RUBBER K-PACKER

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method _____
Screen Type & Method of Installation JOHNSON / PULLBACK

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>208</u>	<u>218</u>	<u>.070</u>	<u>304</u>	<u>5"</u>	<u>S.S.</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
<u>N/A</u>				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
95 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

12. WELL TESTS:
 Pump Bailor Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>40</u>			<u>1/2 hr.</u>

Water Temp. _____ Bottom hole temp. _____
Water Quality test or comments: _____

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

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10"</u>	<u>0</u>	<u>2</u>	<u>TOP SOIL</u>		<input checked="" type="checkbox"/>
	<u>2</u>	<u>4</u>	<u>HARD PAN</u>		<input checked="" type="checkbox"/>
	<u>4</u>	<u>20</u>	<u>CLAY</u>		<input checked="" type="checkbox"/>
<u>6"</u>	<u>20</u>	<u>83</u>	<u>CLAY</u>		<input checked="" type="checkbox"/>
	<u>83</u>	<u>104</u>	<u>SAND & GRAVEL</u>		<input checked="" type="checkbox"/>
	<u>104</u>	<u>120</u>	<u>CLAY</u>		<input checked="" type="checkbox"/>
	<u>120</u>	<u>141</u>	<u>SAND w/CLAY STRKS.</u>	<input checked="" type="checkbox"/>	
	<u>141</u>	<u>172</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	
	<u>172</u>	<u>188</u>	<u>SANDY CLAY</u>		<input checked="" type="checkbox"/>
	<u>188</u>	<u>191</u>	<u>SAND w/CLAY</u>	<input checked="" type="checkbox"/>	
	<u>191</u>	<u>195</u>	<u>CLAY w/SAND STRKS.</u>	<input checked="" type="checkbox"/>	
	<u>195</u>	<u>201</u>	<u>SAND w/CLAY</u>	<input checked="" type="checkbox"/>	
	<u>201</u>	<u>205</u>	<u>CLAY</u>		<input checked="" type="checkbox"/>
	<u>205</u>	<u>210</u>	<u>COARSE SAND</u>	<input checked="" type="checkbox"/>	
	<u>210</u>	<u>213</u>	<u>COARSE SAND w/CLAY</u>	<input checked="" type="checkbox"/>	
	<u>213</u>	<u>220</u>	<u>COARSE SAND</u>	<input checked="" type="checkbox"/>	

Completed Depth 220' (Measurable)
Date: Started 10/17/06 Completed 10/25/06

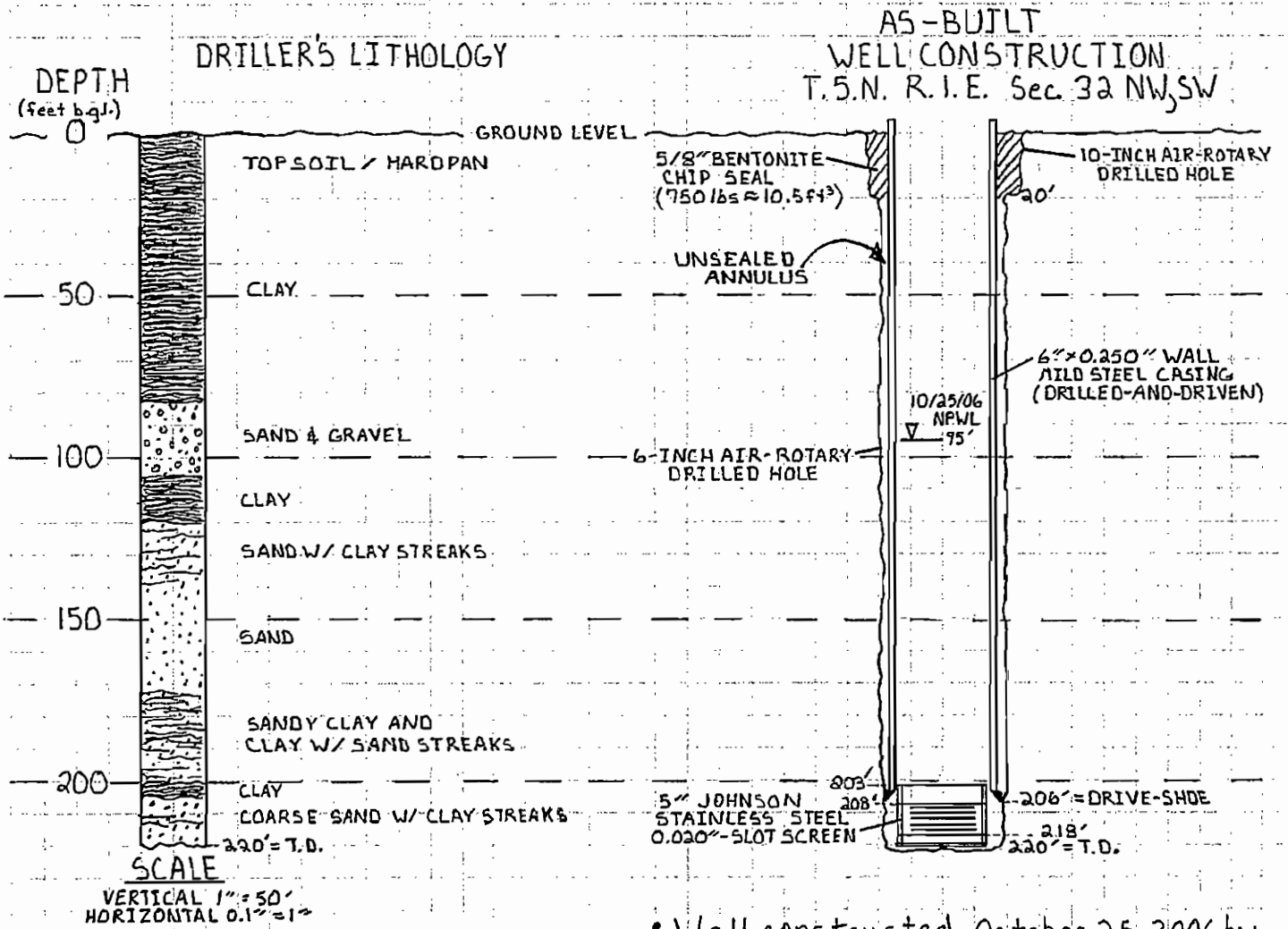
14. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name D P W O Firm No. 332
Principal Driller [Signature] Date 10-26-06
and Driller or Operator II _____ Date _____
Operator I _____ Date _____

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

SUBJECT Wood Domestic Well
1380 W. Meander Drive, Eagle, ID

SHEET OF



- Well constructed October 25, 2006 by Dennis Phipps Well Drilling
- Non-pumping water level (NPWL) was 95 feet below ground.
- No useable pump test data reported.
- Information shown is from Driller's Report on file at Idaho Department of Water Resources.

9

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: David J. Head
BSS Stillwell Drive Eagle, Id. 83616
- 2) Do you have or use a ground water right in the Eagle area? X. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: (Anne Marie Morgan)
- 4) The drilling company who drilled your well: N/A
- 5) Year (or approximate year) your well was drilled: 1981. Water right #: 63-03483A
- 6) Overall well depth: 218. Depth to water: 158 priority date = 1-7-1966
- 7) The use(s) of your well (domestic, irrigation, etc): Both
- 8) Do you have records of the well's construction or maintenance? ?
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: In 2002 we had to lower the pump from 185 to 215
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: NONE
- a. Does your well produce sand? NO. If so, how much? —
- b. Who is your pump professional? Caron Pump
- c. To what do you attribute the problems you have experienced? —
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 938-8508

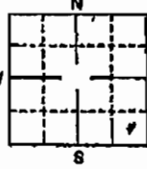
Head

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

826617

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Gary Stillwell</u></p> <p>Address <u>Eagle Rd</u></p> <p>Owner's Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>140</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature _____ OF. Quality _____</p>																																																										
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Abandoned (describe method of abandoning) _____</p>	<p>8. WELL TEST DATA</p> <p><input type="checkbox"/> Pump <input checked="" type="checkbox"/> Bailor <input type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;">20</td> <td style="text-align: center;">290</td> <td style="text-align: center;">2</td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	20	290	2																																																				
Discharge G.P.M.	Pumping Level	Hours Pumped																																																									
20	290	2																																																									
<p>3. PROPOSED USE</p> <p><input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/> Municipal</p> <p><input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection</p> <p><input type="checkbox"/> Other _____ (specify type)</p>	<p>9. LITHOLOGIC LOG 104958</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Hole 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>5</td> <td>0</td> <td>5</td> <td>Top soil</td> <td></td> <td>1</td> </tr> <tr> <td>8</td> <td>5</td> <td>14</td> <td>Clay + clay</td> <td></td> <td>1</td> </tr> <tr> <td>6</td> <td>14</td> <td>48</td> <td>" "</td> <td></td> <td>1</td> </tr> <tr> <td>48</td> <td>15</td> <td>60</td> <td>gray clay</td> <td></td> <td>1</td> </tr> <tr> <td>66</td> <td>15</td> <td>200</td> <td>light brown clay</td> <td></td> <td>1</td> </tr> <tr> <td>150</td> <td>200</td> <td>"</td> <td>" "</td> <td>X</td> <td></td> </tr> <tr> <td>200</td> <td>211</td> <td>211</td> <td>brown clay</td> <td></td> <td>1</td> </tr> <tr> <td>211</td> <td>221</td> <td>221</td> <td>" sand + gravel</td> <td></td> <td>X</td> </tr> </tbody> </table>	Hole Diam.	Depth		Material	Water		From	To	Yes	No	5	0	5	Top soil		1	8	5	14	Clay + clay		1	6	14	48	" "		1	48	15	60	gray clay		1	66	15	200	light brown clay		1	150	200	"	" "	X		200	211	211	brown clay		1	211	221	221	" sand + gravel		X
Hole Diam.	Depth		Material	Water																																																							
	From	To		Yes	No																																																						
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8	5	14	Clay + clay		1																																																						
6	14	48	" "		1																																																						
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150	200	"	" "	X																																																							
200	211	211	brown clay		1																																																						
211	221	221	" sand + gravel		X																																																						
<p>4. METHOD DRILLED</p> <p><input type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input type="checkbox"/> Reverse rotary</p> <p><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____</p>	<p>10.</p> <p>Work started <u>11/22/80</u> finished <u>12/23/80</u></p>																																																										
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> <tr> <td><u>250</u> inches</td> <td><u>6</u> inches</td> <td><u>1</u> feet</td> <td><u>210</u> feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch</p> <p>Size of perforation _____ inches by _____ inches</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </table> <p>Well screen installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Manufacturer's name <u>Johnson</u></p> <p>Type <u>slotted</u> Model No. <u>205</u></p> <p>Diameter <u>6</u> Slot size <u>0.20</u> Set from <u>211</u> feet to <u>220</u> feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>18</u> Material used in seal: <input type="checkbox"/> Cement grout</p> <p><input checked="" type="checkbox"/> Puddling clay <input type="checkbox"/> Well cuttings</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing</p> <p><input checked="" type="checkbox"/> Overbore to seal depth</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent</p> <p>Weld _____</p> <p><input type="checkbox"/> Cemented between strata</p> <p>Describe access port <u>TOP OF WELL</u></p>	Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>1</u> feet	<u>210</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	<p>11. DRILLERS CERTIFICATION</p> <p>We certify that all minimum well construction standards were compiled with at the time the rig was removed.</p> <p>Firm Name <u>Jay Olney Drilling</u> Firm No. <u>280</u></p> <p>Address <u>1200 N. 2nd St. Boise</u> Date <u>12/23/80</u></p> <p>Signed by (Firm Official) <u>Jay Olney</u></p> <p>and _____</p> <p>(Operator) <u>ll 4</u></p>																										
Thickness	Diameter	From	To																																																								
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<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location. <u>AUG 09 1993</u></p>  <p>Subdivision Name _____</p> <p><u>Stillwell</u></p> <p>Lot No. <u>4</u> Block No. <u>2</u></p> <p>County _____</p> <p><u>SE 1/4 SE 1/4 Sec. 29, T. 73 N/S, R. 5 E.</u></p>	<p>USE ADDITIONAL SHEETS IF NECESSARY - FORWARD THE WHITE COPY TO THE DEPARTMENT</p>																																																										

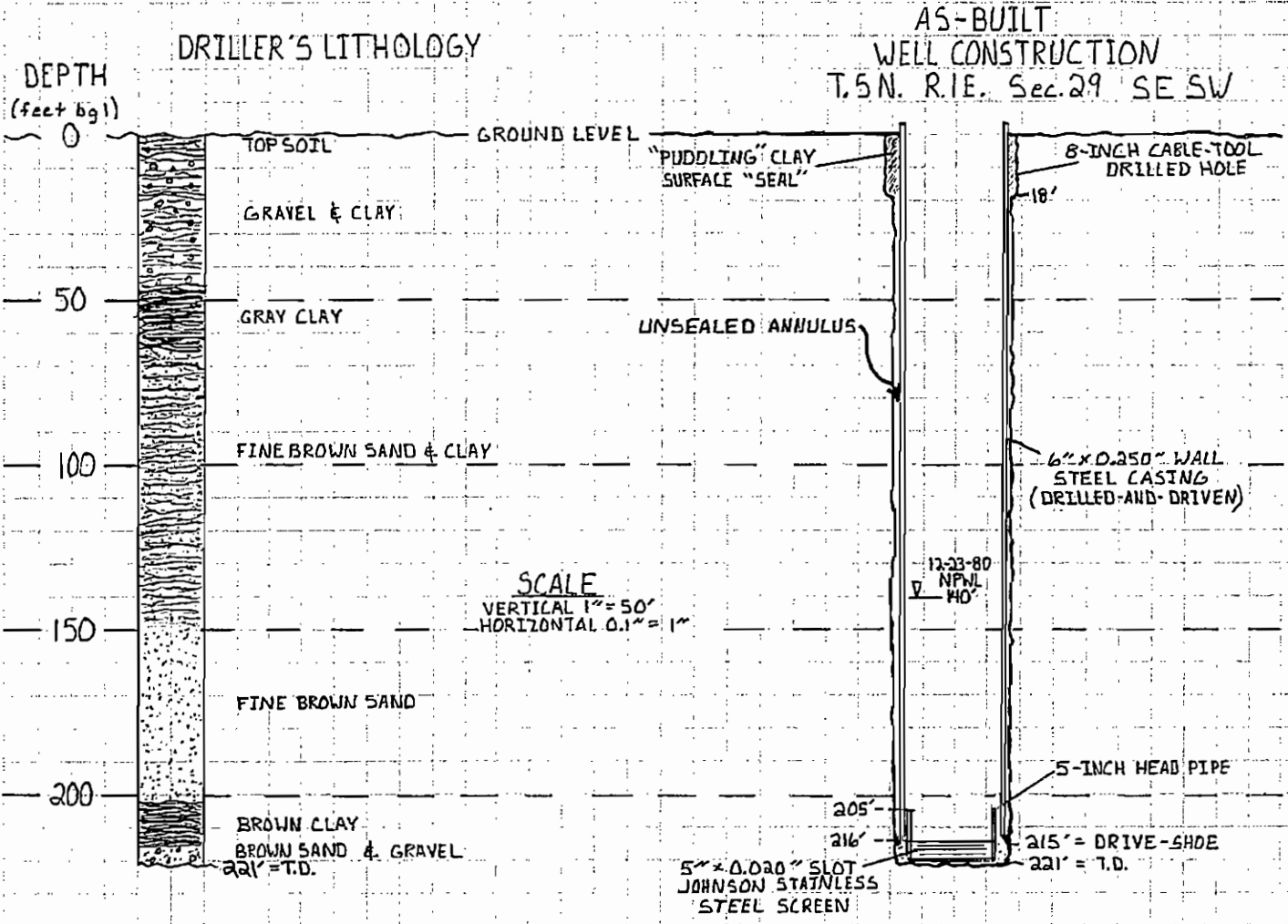
RECEIVED

JUN 26 1981

Department of Water Resources

SUBJECT Head Domestic Well
855 W. Stillwell Dr., Eagle, ID

SHEET 1 OF 1



- Well constructed December 23, 1980 by: Jerry O'Leary Drilling
- Non-pumping water level (NPWL) was 140 feet below ground.
- Pumping water level is unreadable on well log, but it was bailed at 30 gallons/minute for two hours.
- Information shown on this sketch is from the Driller's Report on file at Idaho Department of Water Resources.

10

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: RON RAPP
3951 W. DEERFIELD DR. EAGLE
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: ROB LARSEN
- 4) The drilling company who drilled your well: DON'T KNOW
- 5) Year (or approximate year) your well was drilled: 2000. Water right #: _____
- 6) Overall well depth: 105'. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? YES
- 10) Describe any change in water level or productivity in the last few years: D/K
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: REPLACED
PUMP 1-2008
 - a. Does your well produce sand? YES. If so, how much? SM AMOUNTS
 - b. Who is your pump professional? S.O.S
 - c. To what do you attribute the problems you have experienced? D/K
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208-938-1967

11

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

Buckskin Water Rights
Dry Creek Water Rights

- 1) Your name and address: Janet + John Franden
2300 E Buckskin Ct Eagle 83616
- 2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: water right: Buckskin Subdivision
63-32586, 63-32588 63-18591 (split); 63-2963 (split) 63-32586, 63-32588;
63-2284 → 63-18591
- 4) The drilling company who drilled your well: ~~Coonse~~ Coonse Well Drilling
our domestic well
- 5) Year (or approximate year) your well was drilled: 1997. Water right #: -
- 6) Overall well depth: 142'. Depth to water: 31'
- 7) The use(s) of your well (domestic, irrigation, etc): domestic + irrigation
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? n/a
- 10) Describe any change in water level or productivity in the last few years: none
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: none
 - a. Does your well produce sand? no. If so, how much? _____
 - b. Who is your pump professional? n/a.
 - c. To what do you attribute the problems you have experienced? n/a
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: n/a
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: yes 938-1413

Franden

11-10-97

Form 238-7
3-95

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT 62104

Use Typewriter or Ballpoint Pen

Office Use Only
 Inspected by AS
 Twp 5N Rge 1E Sec 34
1/4 NW 1/4 SE 1/4
 Lat: : : Long: : :

1. DRILLING PERMIT NO. 63-97-W-0537--000
Other IDWR No. Tag-D 0001201

11. WELL TESTS:
 Pump Bailor Air Flowing Artesian

2. OWNER:
Name JOHN & JANET FRANDEN
Address 1920 E MONTEREY DRIVE
City BOISE State ID Zip 83706

Yield gal/min.	Drawdown	Pumping Level	Time

Baumgart Const. 5085 S. Apple - Boise
3. LOCATION OF WELL by legal description:

Water Temp. 56° Bottom hole temp. _____
Water Quality test or comments: _____

Sketch map location must agree with written location.

Depth first Water Encountered _____

Twp. 5 North or South
 Rge. 1 East or West
 Sec. 34 1/4 NW 1/4 SE 1/4
 Gov't Lot _____ County ADA
 Lat: : : Long: : :
 Address of Well Site 2300 E BUCK-
SKIN CT. City EAGLE
(Give at least name of road & distance to road or landmark)

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Lt. 6 Blk. 1 Sub. Name BUCKSKIN SUB.

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10"	0	3	TOP SOIL		X
	3	10	BROWN CLAY		X
	10	20	SANDY CLAY		X
8"	20	31	TAN CLAY		X
	31	34	SAND		X
	34	80	BLUE CLAY		X
	80	85	SAND STREAK	X	
	85	100	BLUE CLAY		X
	100	104	SAND STREAKS	X	
	104	110	BLUE CLAY		X
	110	113	SAND STREAKS	X	
	113	128	BLUE CLAY		X
	128	135	SAND STREAKS	X	
	135	142	BLUE CLAY		X

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sections or Pounds	
BENTONITE	0	20	450 LBS	OVERBORE
5.4 ft ³ , 16" x 8" = 0.16 ft ³ /ft				

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
8"	1 1/2'	36'	25	STEEL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 1/2"	142'	160'	160	PVC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Screen Type PVC

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
82	162	20	-	4 1/2"	PVC	<input type="checkbox"/>	<input checked="" type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
31 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: _____

RECEIVED
NOV 10 1997

RECEIVED WATER RESOURCES
WESTERN REGION
NOV 12 1997

Department of Water Resources

Completed Depth 142 FT. (Measurable)
Date: Started 10-27-97 Completed 10-28-97

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

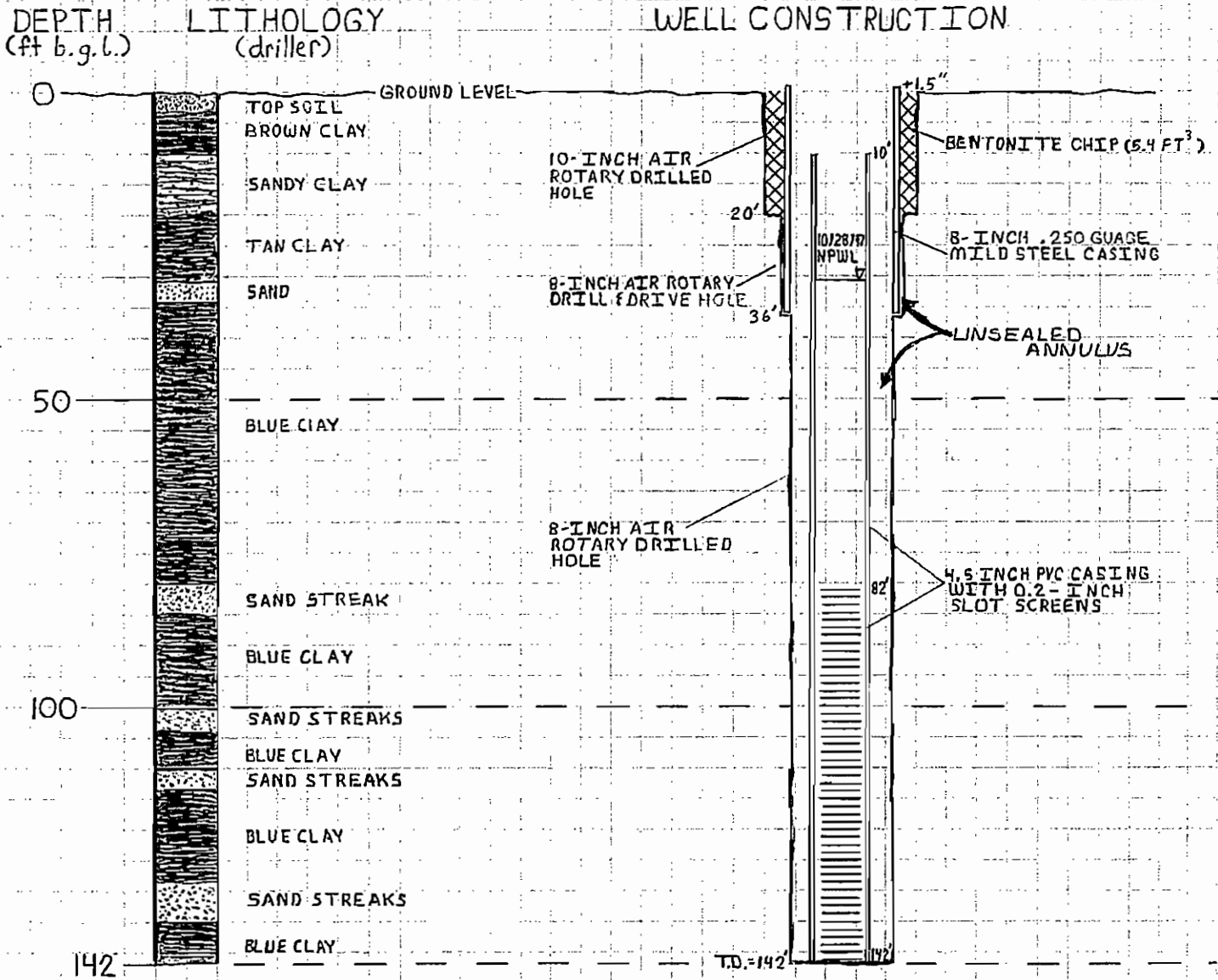
Firm Name COGNATE WELL DRILLING Firm No. 409
Firm Official John E. Cognate Date 10-29-97
and Paul Clark
Supervisor or Operator Date 10-29-97
(Sign once if Firm Official & Operator)

SUBJECT Franden Domestic Well

DATE 10/15/08

2300 E. Buckskin Ct.

SHEET OF



- Well constructed October 28, 1997 by Coonse Well Drilling.
- Non-Pumping Water Level (NPWL) was 31 feet below ground.
- Pumping Water Level (PWL) was not reported.
- Water temperature = 56°F.
- Information shown is from Driller's Report on file at IDWR.

12

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

1) Your name and address: John & Cathy Thornton
5264 N. Sky High Lane Eagle, ID 83616

2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.

3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: NO

4) The drilling company who drilled your well: Loonce Well Drilling

5) Year (or approximate year) your well was drilled: 8-15-²⁰⁰⁵. Water right #: ?

6) Overall well depth: 500. Depth to water: 292.52

7) The use(s) of your well (domestic, irrigation, etc): Domestic

8) Do you have records of the well's construction or maintenance? Yes

9) Do you have records of pump maintenance and/or replacement? Yes but currently there has been NO mtg. or replacement

10) Describe any change in water level or productivity in the last few years: I don't know

11) Do you have records of water levels? By IDWR 2 times
Summer 2008

12) Describe any problems you have experienced with your well or pump: None

a. Does your well produce sand? No. If so, how much? _____

b. Who is your pump professional? Loonce

c. To what do you attribute the problems you have experienced? Well screen installed

13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: None

14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the _____ 208-867-09

GPS
Well Location N 43° 44.596'
Elevation 2867 W 116° 22.438' } NAD 83

63 Thornton

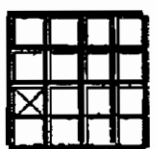
835311

Form 238-7
3/95-C96

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Inspected by _____
Twp 1/4 Rge 1/4 Sec 1/4
Lat : : Long : :

1. DRILLING PERMIT NO. 0-0-4-1676
Other IDWR No. _____
2. OWNER:
Name John and Cathy Thornton
Address 4230 Ballantyne Ln.
City Eagle State ID Zip 83616
3. LOCATION OF WELL by legal description:
Sketch map location must agree with written location



Twp. 5 North or South
Rge. 1 East or West
Sec. 29 S 1/4 NW 1/4 1/4
Gov't lot _____ County Ada

Lat: : : Long: : :
Address of Well Site 500 Sky High Rd. off of
Quarter Dr. _____ City Eagle
(Give at least name of road + Distance to Road or Landmark)
Lt. 5 Blk. 1 Sub. Name Highlander Estates

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____
5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK		AMOUNT		METHOD
Material	From To	Sacks or Pounds		
Bentonite	0 20	700 lbs	Dry Pour	
10"-6" = .319 Ft ³ /Ft	x20 = 7 ft ³	14 bags	x.6 ft ³ = 8.4 ft ³	
6"-6" = .1528 Ft ³ /Ft				

Was drive shoe used? Y N Shoe Depth(s) 495ft
Was drive shoe seal tested? Y N How? _____

8. CASING/LINER:

Diameter	From To	Gauge	Material	Casing Liner	Welded Threaded
6"	+2 495	.250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5"	490 495	.258	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 5ft Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Screen Type Johnson

From To	Slot Size	Number	Diameter	Material	Casing Liner
495 500	.014	—	5"	SS	<input type="checkbox"/> <input checked="" type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
292ft. below ground Artesian Pressure _____ lb
Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:
 Pump Bailer Air Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
40GPM	—	495ft	2hours

Water Temp. 60DegF Bottom hole temp. _____
Water Quality test or comments: _____
Depth first Water Encountered _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia	From	To	Remarks: Lithology, Water Quality & Temp.	Y	N
10"	0	4	Sandy Top Soil		<input checked="" type="checkbox"/>
"	4	20	Brown Clay		<input checked="" type="checkbox"/>
8"	20	23	Brown Clay		<input checked="" type="checkbox"/>
"	23	68	Coarse Sand 45'		<input checked="" type="checkbox"/>
"	68	107	Tan Clay 39'		<input checked="" type="checkbox"/>
"	107	135	Sand 28'		<input checked="" type="checkbox"/>
"	135	194	Tan Clay 59'		<input checked="" type="checkbox"/>
"	194	209	Sand 15'		<input checked="" type="checkbox"/>
"	209	260	Tan Clay 51'		<input checked="" type="checkbox"/>
6"	260	284	Tan Clay 24'		<input checked="" type="checkbox"/>
"	284	296	Sand 12'		<input checked="" type="checkbox"/>
"	296	314	Blue Clay 18'		<input checked="" type="checkbox"/>
"	314	316	Sand 2'		<input checked="" type="checkbox"/>
"	316	327	Tan Clay 11'		<input checked="" type="checkbox"/>
"	327	332	Blue Clay 5'		<input checked="" type="checkbox"/>
"	332	336	Sand 4'		<input checked="" type="checkbox"/>
"	336	358	Tan Clay 22'		<input checked="" type="checkbox"/>
"	358	378	Sand 20'		<input checked="" type="checkbox"/>
"	378	390	Sandy Clay 18'		<input checked="" type="checkbox"/>
"	390	404	Sand 14'		<input checked="" type="checkbox"/>
"	404	410	Tan Clay 6'		<input checked="" type="checkbox"/>
"	410	493	Sand 83'		<input checked="" type="checkbox"/>
"	493	495	Tan Clay 2'		<input checked="" type="checkbox"/>
"	495	500	Sand 5'		<input checked="" type="checkbox"/>

RECEIVED
AUG 19 2005
WATER RESOURCES
WESTERN REGION

Completed Depth: 500 (Measurable)
Date: Started 8-10-05 Completed 8-15-05

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

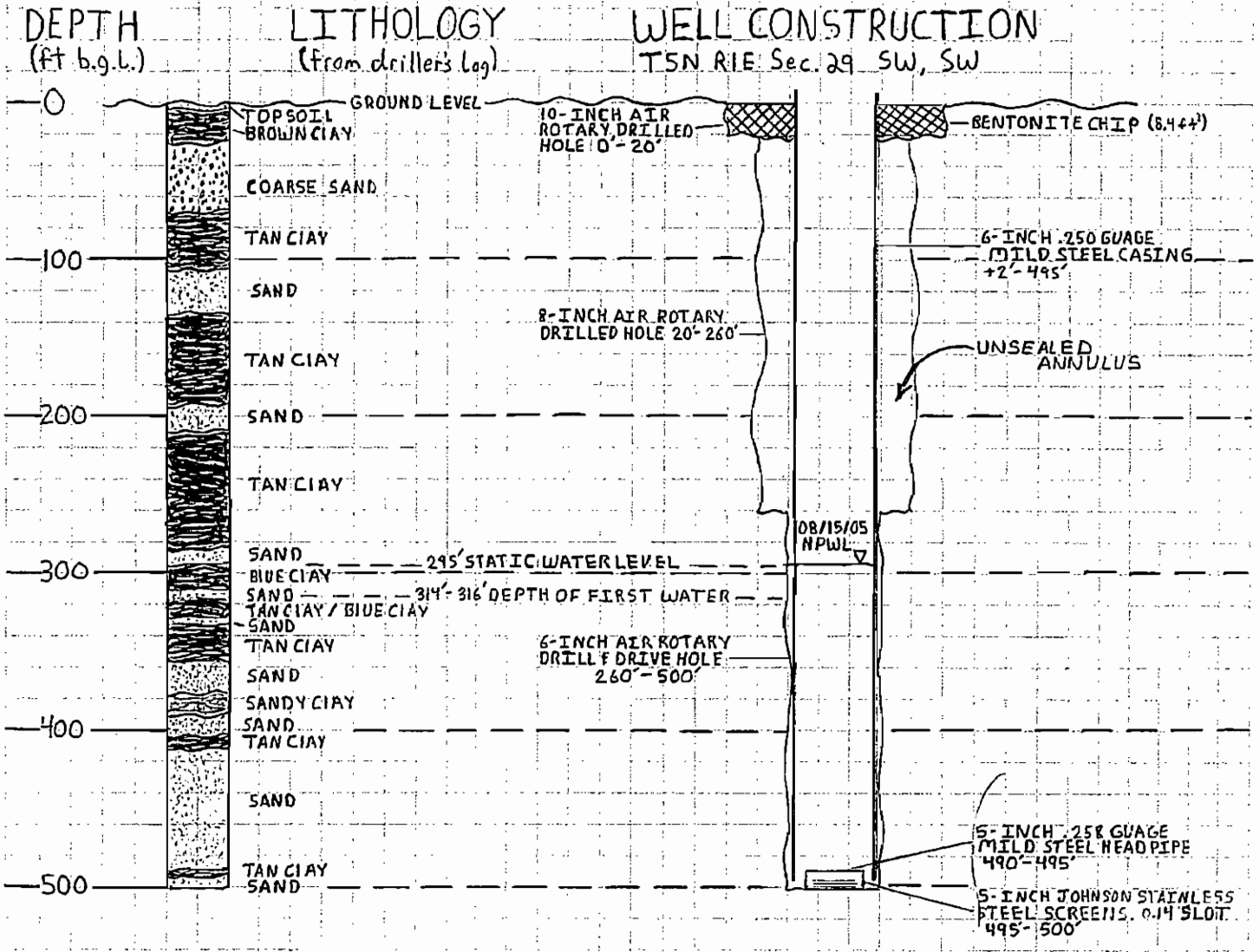
Firm Name COONSE WELL DRILLING Firm No. 409

Firm Official [Signature] Date 8-18-05

Supervisor or Operator [Signature] Date 8-18-05
(Sign once if Firm Official & Operator)

Date: 8/18/2005 Time: 7:57:28 AM

SUBJECT Thornton Domestic Well
5.264 Sky High Rd.



- Well constructed August 15, 2005 by: Coonse Well Drilling.
- Non-Pumping Water Level (NPWL) was 292 feet below ground.
- Pumping Water Level (PWL) was 495 feet below ground after pumping 40 gallons/minute for 2 hours.
- Specific Capacity = 0.20 gpm/ft
- Information shown is from Driller's Report on file at IDWR.

13

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: David & Linda Collett
927 E Valli Hi Ln Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? _____. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____

- 4) The drilling company who drilled your well: _____
- 5) Year (or approximate year) your well was drilled: 2005. Water right #: _____
- 6) Overall well depth: 150ft. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? _____
- 9) Do you have records of pump maintenance and/or replacement? _____
- 10) Describe any change in water level or productivity in the last few years: _____

- 11) Do you have records of water levels? _____

- 12) Describe any problems you have experienced with your well or pump: None

a. Does your well produce sand? _____. If so, how much? _____
b. Who is your pump professional? _____
c. To what do you attribute the problems you have experienced? _____

- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____

- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-1143

63 Collett

832639

Form 238-7
3/95-C96

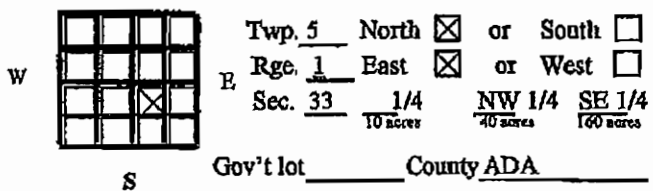
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 1/4 1/4
Lat: _____ Long: _____

1. DRILLING PERMIT NO. - - -389-94
Other IDWR No. _____

2. OWNER:
Name HART DESIGN
Address P.O. BOX 1304
City EAGLE State ID _____ Zip 83616

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



Lat: _____ Long: _____
Address of Well Site 927 VALLI-HI LN
City EAGLE
(Give at least name of road + Distance to Road or Landmark)
Lt. 7 Blk. 1 Sub. Name BUCKWHEAT ACRES

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK	AMOUNT		METHOD
Material	From	To	Sacks or Pounds
Bentonite	0	18	500
			POUR

Was drive shoe used? Y N Shoe Depth(s) 158
Was drive shoe seal tested? Y N How? air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+2	158	250	STEEL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.5"	146	166		PVC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Screen Type pvc

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
166	206	.020		4.5"	PVC	<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
103ft. below ground Artesian Pressure _____ lb
Depth flow encountered 176 ft. Describe access port or control devices: WELL CAP

11. WELL TESTS:
 Pump Bailer Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Pumping Level _____ Time _____
100 _____ 160 _____ 1 HR _____
Water Temp. _____ Bottom hole temp. _____
Water Quality test or comments: _____
Depth first Water Encountered 120

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dir	From	To	Remarks: Lithology, Water Quality & Temp.	Y	N
10	0	14	BROWN CLAY		<input checked="" type="checkbox"/>
10	14	18	SAND		<input checked="" type="checkbox"/>
6	18	23	SAND		<input checked="" type="checkbox"/>
6	23	105	TAN CLAY W/ SAND STRIPS		<input checked="" type="checkbox"/>
6	105	135	GRAVEL		<input checked="" type="checkbox"/>
6	135	143	TAN CLAY W/ SAND STRIPS		<input checked="" type="checkbox"/>
6	143	148	SAND		<input checked="" type="checkbox"/>
6	148	156	TAN CLAY		<input checked="" type="checkbox"/>
6	156	160	COARSE SAND		<input checked="" type="checkbox"/>
6	160	167	BLUE CLAY		<input checked="" type="checkbox"/>
6	167	206	TAN CLAY W/ CRACKS		<input checked="" type="checkbox"/>

ORIGINAL

RECEIVED

MAY 19 2005

WATER RESOURCES
WESTERN REGION

Completed Depth: 206 (Measurable)
Date: Started 4/18/2005 Completed 4/19/2005

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

Firm Name George Post Well Drilling Inc. Firm No. 563

Firm Official _____ Date 4/20/2005

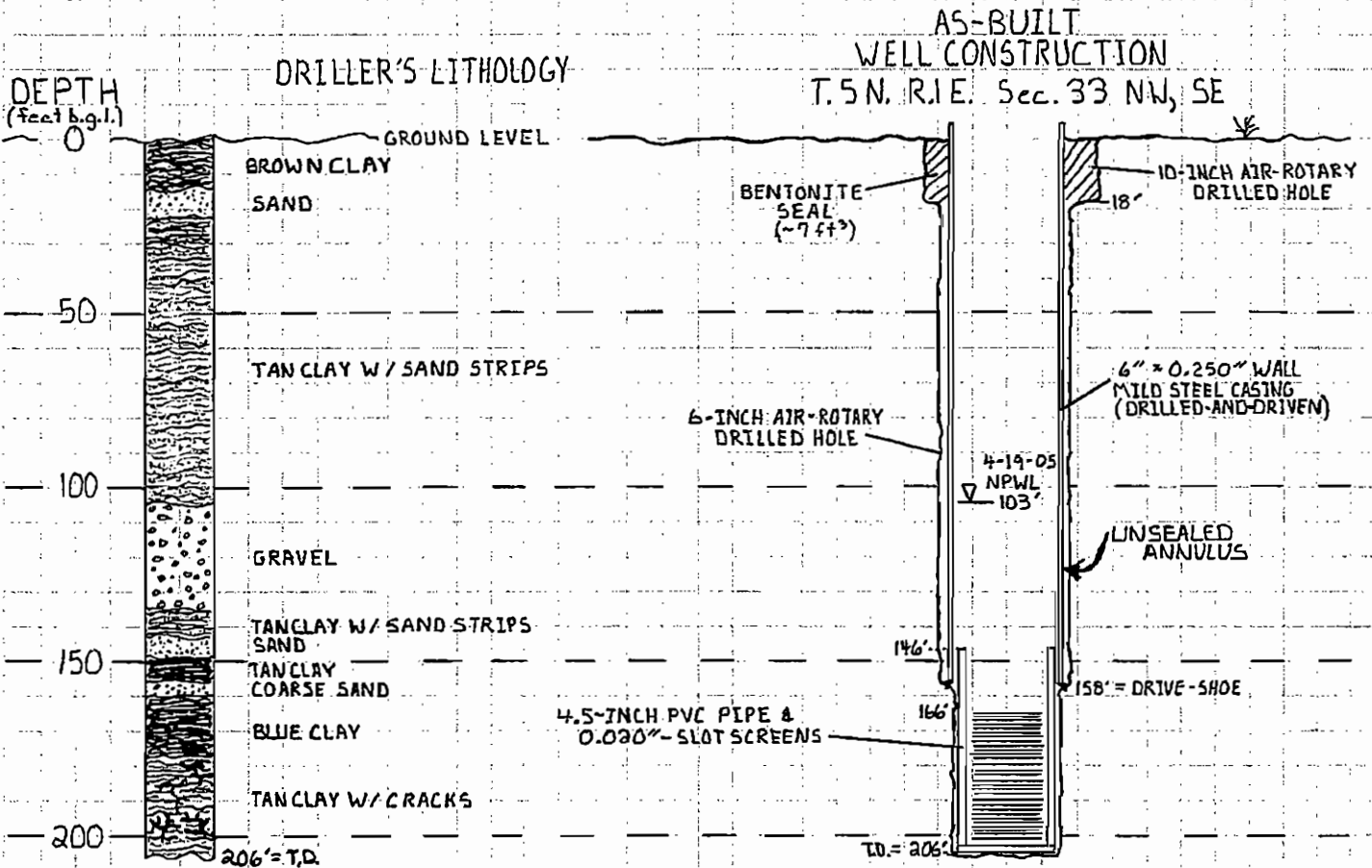
Supervisor or Operator Norm B. Driffel Date 4/20/2005
(Sign once if Firm Official & Operator)

Date: 4/20/2005 Time: 2:26:37 PM

10" 0.545 93/2
6.5" 0.230
3 1/8 x 1/8
5.9 F3

SUBJECT *Collett Domestic Well*
927 E. Valli-Hi Lane

SHEET OF



SCALE
VERTICAL 1" = 50'
HORIZONTAL 0.1" = 1'

- Well constructed April 19, 2005 by: *George Post Well Drilling, Inc.*
- Non-pumping water level (NPWL) was *103'* below ground.
- Information shown is from Driller's Report on file at Idaho Department of Water Resources.

1A

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Julie & Morgan Masner
4325 W. GRAY TAIL CT EAGLE, IA 83611
- 2) Do you have or use a ground water right in the Eagle area? _____. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Jim Mai & Valerie Sontag
- 4) The drilling company who drilled your well: Coonse Well Drilling
- 5) Year (or approximate year) your well was drilled: MARCH 1998. Water right #: _____
- 6) Overall well depth: 103. Depth to water: 25 Feet
- 7) The use(s) of your well (domestic, irrigation, etc): domestic & irrigation
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? NO
- 10) Describe any change in water level or productivity in the last few years: _____

- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: _____

 - a. Does your well produce sand? _____. If so, how much? _____
 - b. Who is your pump professional? Coonse Well Drilling
 - c. To what do you attribute the problems you have experienced? _____

- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____

- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-6171

Masner

Form 238-7
3/95

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

060930

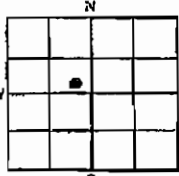
1. DRILLING PERMIT NO. D-000-1815
Other IDWR No. _____

2. OWNER

Name Cornerstone Homes
Address 1043 Downing Dr.
City Eagle State ID Zip 83616

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.



Twp. 5 North or South
Rge. 1 East or West
Sec. 36 1/4SE 1/4NW 1/4
Gov't Lot _____ County _____
Lat: _____ Long: _____

Address of Well Site 4325 Gray Trail
City Eagle

Lt. 6 Blk. _____ Sub. Name Widgeon Lakes

4. USE:

- Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)

- New Well Modify Abandonment Other _____

6. DRILL METHOD

- Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	0	17	400LB	Overbore

Was drive shoe used? Y N Shoe Depth(s) 97 feet
Was drive shoe seal tested? Y N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1.5	97	.25	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5"	93	98	.25	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 5' Length of Tailpipe _____

9. PERFORATIONS/SCREENS

- Perforations Method _____
 Screens Screen Type Houston

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
98	103	.020	-	5"	Stainless	<input checked="" type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

11. WELL TESTS:

- Pump Bailor Air Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
75 GPM	-	90 feet	2 Hours

Water Temp. 58° Bottom hole temp. _____
Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	1	Top Soil		<input checked="" type="checkbox"/>
"	1	10	Hard Pan		<input checked="" type="checkbox"/>
"	10	15	Sandy Clay		<input checked="" type="checkbox"/>
"	15	38	TAN Clay		<input checked="" type="checkbox"/>
6	15	32	TAN Clay	<input checked="" type="checkbox"/>	
"	32	52	Gravel		<input checked="" type="checkbox"/>
"	52	59	SAND	<input checked="" type="checkbox"/>	
"	59	63	TAN Clay		<input checked="" type="checkbox"/>
"	63	65	SAND	<input checked="" type="checkbox"/>	
"	65	72	Sandy Clay		<input checked="" type="checkbox"/>
"	72	75	SAND	<input checked="" type="checkbox"/>	
"	75	95	TAN Clay		<input checked="" type="checkbox"/>
"	95	96	SAND	<input checked="" type="checkbox"/>	
"	96	97	TAN Clay		<input checked="" type="checkbox"/>
"	97	103	SAND	<input checked="" type="checkbox"/>	

RECEIVED
RECEIVED
APR 27 1998
WATER RESOURCES
WESTERN REGION

Completed Depth 103 feet (Measurable)
Date: Started 3-18-98 Completed 3-19-98

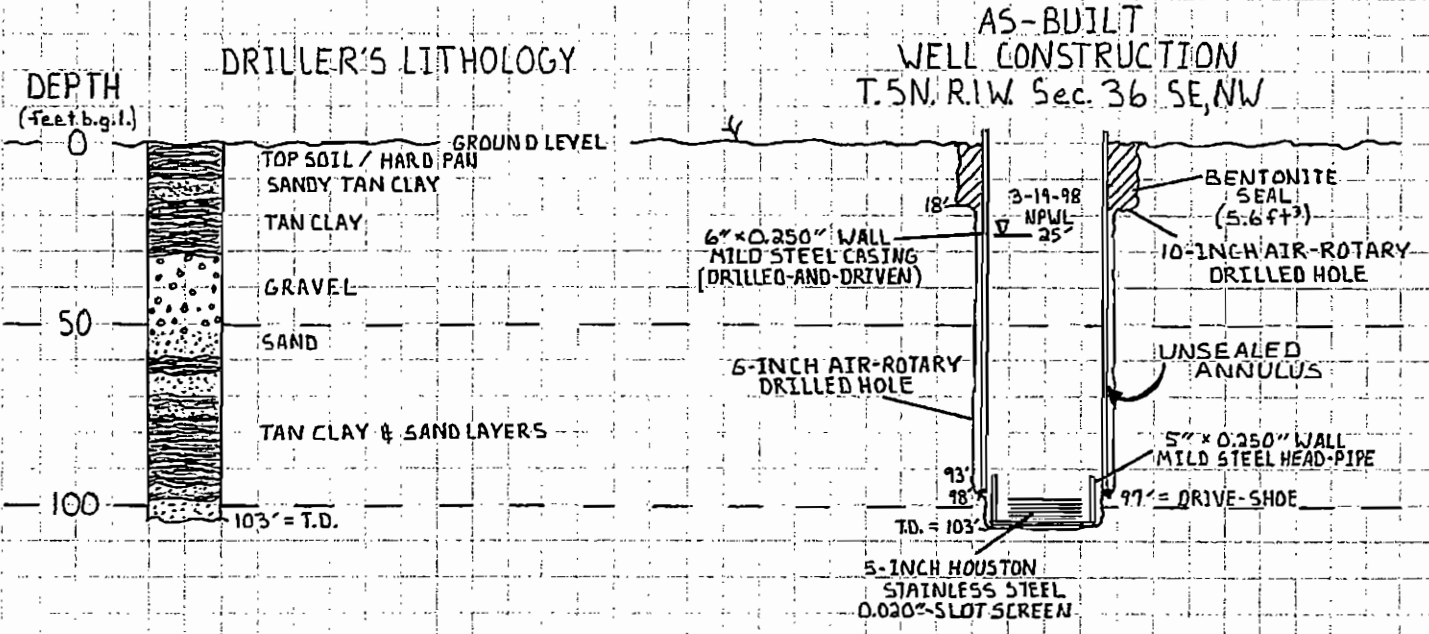
13. DRILLER'S CERTIFICATION

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

Firm Name Course Well Drilling Firm No. 409
Firm Official Ray E. Cooney Date 3-23-98
and
Supervisor or Operator Andy Clark Date 3-21-98
(Sign of Firm Official & Operator)

SUBJECT Masner Domestic Well
4325 W. Gray Teal Ct., Eagle, ID

SHEET OF



- Well constructed March 19, 1998 by: Coonse Well Drilling.
- Non-pumping water level (NPWL) was 25 feet below ground.
- Information shown is from Driller's Report on file at Idaho Department of Water Resources.

15

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: STEVEN C. PERUIS
3939 KREWSIAK LN BOISE IDAHO 83714
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: N/A
- 4) The drilling company who drilled your well: COUSE WELLS DRILLING CO
- 5) Year (or approximate year) your well was drilled: 1980. Water right #: 63-10893
- 6) Overall well depth: 100 feet Depth to water: 20.76 ft to standing water
- 7) The use(s) of your well (domestic, irrigation, etc): domestic + 4 acres of pasture
- 8) Do you have records of the well's construction or maintenance? no
- 9) Do you have records of pump maintenance and/or replacement? no
- 10) Describe any change in water level or productivity in the last few years: none
- 11) Do you have records of water levels? yes
- 12) Describe any problems you have experienced with your well or pump: none
- a. Does your well produce sand? yes. If so, how much? minor
- b. Who is your pump professional? COUSE
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: N/A
FDWR is monitoring our well

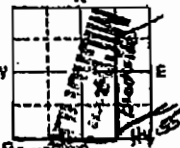
Purvis

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

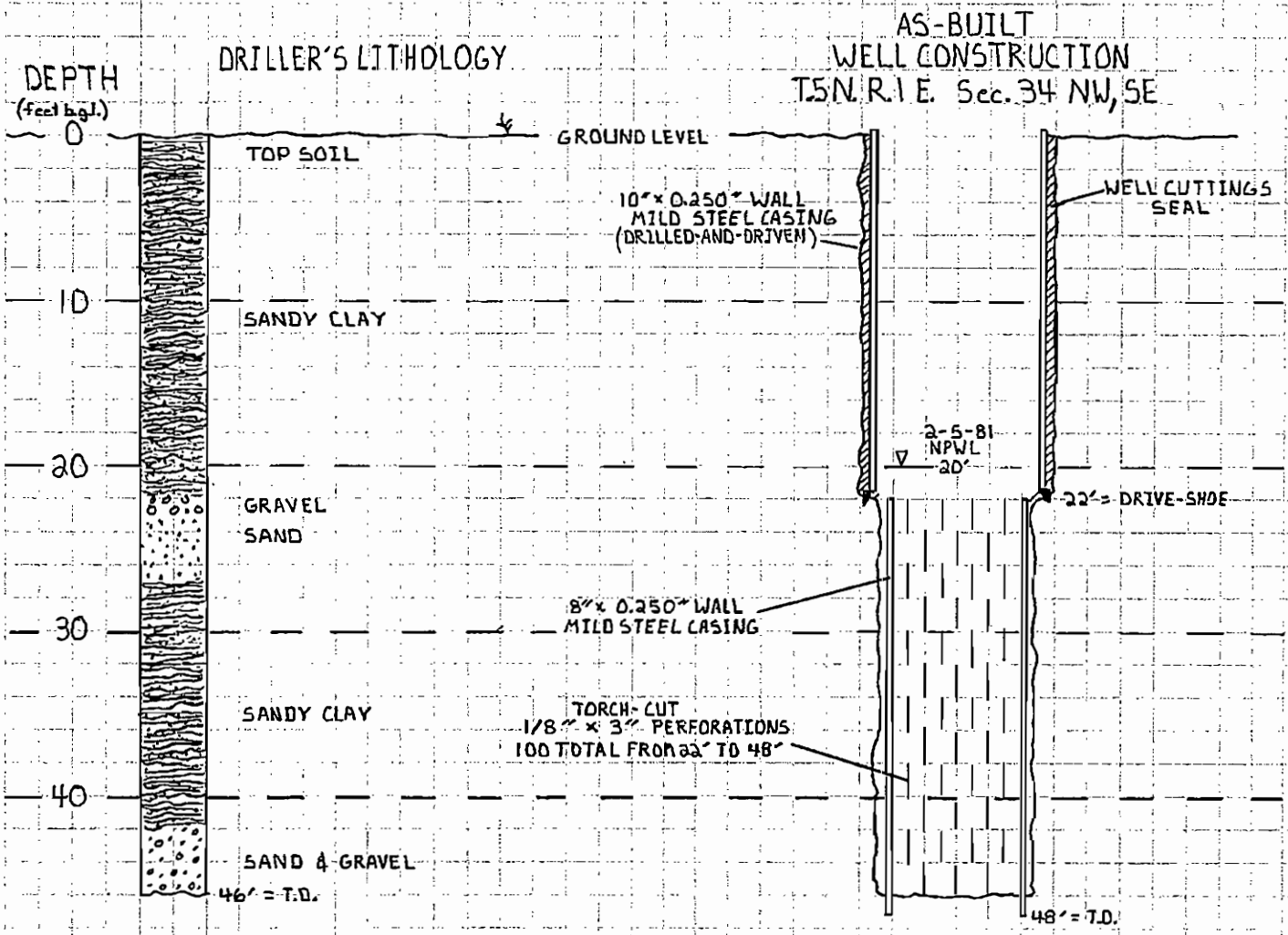
State law requires that this report be filed with the Director, Department of Water Resources
within 30 days after the completion or abandonment of the well.

gms

<p>1. WELL OWNER</p> <p>Name <u>Steve Purvis</u></p> <p>Address <u>Brookside Ln Eagle ID</u></p> <p>Owner's Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>20</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature _____ °F. Quality _____</p>																																														
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Abandoned (describe method of abandoning) _____</p>	<p>8. WELL TEST DATA</p> <p><input checked="" type="checkbox"/> Pump <input type="checkbox"/> Beller <input type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;"><u>50 Gpm</u></td> <td></td> <td style="text-align: center;"><u>1 Hr.</u></td> </tr> <tr> <td colspan="3" style="text-align: center;">35254</td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>50 Gpm</u>		<u>1 Hr.</u>	35254																																							
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35254																																															
<p>3. PROPOSED USE</p> <p><input checked="" type="checkbox"/> Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/> Municipal</p> <p><input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste D'posal or Injection</p> <p><input type="checkbox"/> Other _____ (specify type)</p>	<p>9. LITHOLOGIC LOG</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Hole 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>10"</td> <td>0</td> <td>2</td> <td>Top Soil</td> <td></td> <td></td> </tr> <tr> <td></td> <td>2</td> <td>22</td> <td>Sandy clay</td> <td></td> <td></td> </tr> <tr> <td>8"</td> <td>22</td> <td>23</td> <td>Gravel</td> <td></td> <td></td> </tr> <tr> <td></td> <td>23</td> <td>27</td> <td>Soil</td> <td></td> <td></td> </tr> <tr> <td></td> <td>27</td> <td>42</td> <td>Sandy clay</td> <td></td> <td></td> </tr> <tr> <td></td> <td>42</td> <td>46</td> <td>Sand & silt</td> <td></td> <td></td> </tr> </tbody> </table>	Hole Diam.	Depth		Material	Water		From	To	Yes	No	10"	0	2	Top Soil				2	22	Sandy clay			8"	22	23	Gravel				23	27	Soil				27	42	Sandy clay				42	46	Sand & silt		
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<p>4. METHOD DRILLED</p> <p><input type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input type="checkbox"/> Reverse rotary</p> <p><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____</p>	<p style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center;">DEC 15 1982</p> <p style="text-align: center;">Department of Water Resources</p>																																														
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>250</u> Inches</td> <td><u>10</u> Inches</td> <td><u>1</u> feet</td> <td><u>22</u> feet</td> </tr> <tr> <td><u>250</u> Inches</td> <td><u>8</u> Inches</td> <td><u>22</u> feet</td> <td><u>48</u> feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Was casing drive shoes used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Perforated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input checked="" type="checkbox"/> Torch</p> <p>Size of perforation <u>1/8</u> inches by <u>3</u> inches</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>100</u> perforations</td> <td><u>22</u> feet</td> <td><u>48</u> feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Manufacturer's name _____</p> <p>Type _____ Model No. _____</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth _____ Material used in seal: <input type="checkbox"/> Cement grout</p> <p><input type="checkbox"/> Puddling clay <input checked="" type="checkbox"/> Well cuttings</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing</p> <p><input checked="" type="checkbox"/> Overbore to seal depth <input type="checkbox"/> Weld</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent</p> <p><input type="checkbox"/> Cemented between strata</p> <p>Describe access port _____</p>	Thickness	Diameter	From	To	<u>250</u> Inches	<u>10</u> Inches	<u>1</u> feet	<u>22</u> feet	<u>250</u> Inches	<u>8</u> Inches	<u>22</u> feet	<u>48</u> feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	Number	From	To	<u>100</u> perforations	<u>22</u> feet	<u>48</u> feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	<p style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center;">JUL 16 1981</p> <p style="text-align: center;">Department of Water Resources Western Regional Office</p>														
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<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p>  <p>Subdivision Name _____</p> <p>Lot No. _____ Block No. _____</p> <p>County <u>Blaine</u></p> <p>AW % SE % Sec. <u>34</u>, T. <u>5</u> N. R. <u>1</u> E.M.</p>	<p>10. Work started <u>23 Feb 81</u> finished <u>25 Feb 81</u></p> <p>11. DRILLERS CERTIFICATION <u>de</u></p> <p>I/We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>D & W Phipps</u> Firm No. <u>332</u></p> <p>Address <u>2068 Bentley</u> Date <u>10 May 81</u></p> <p>Signed by (Firm Official) <u>[Signature]</u></p> <p>and (Operator) _____</p>																																														

SUBJECT Purvis Irrigation Well
3939 Brookside Lane, Boise, ID

DATE
SHEET OF



- Well constructed February 25, 1981 by:
D & W Phipps
- Non-pumping water level (NPWL) was
20' below ground.

16

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Bruce and Jean Richardson
3171 W. Deerfield Ct. Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Keith Tucker
- 4) The drilling company who drilled your well: not known
- 5) Year (or approximate year) your well was drilled: 2008. Water right #: _____
- 6) Overall well depth: not known Depth to water: not known
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? no
- 9) Do you have records of pump maintenance and/or replacement? no
- 10) Describe any change in water level or productivity in the last few years: not known
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: none to date
- a. Does your well produce sand? no. If so, how much? _____
- b. Who is your pump professional? none
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-1515

EXHIBIT

A

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

104633

Office Use Only			
Inspected by			
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat	:	Long	:

1. WELL TAG NO. D 0015087
 DRILLING PERMIT NO. _____
 Other IDWR No. _____

2. OWNER:
 Name CARVERSTONE Homes-Richardson
 Address 3171 Deerfield
 City Eagle State IN Zip 83616

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

N		Twp. <u>5</u> North <input checked="" type="checkbox"/> or South <input type="checkbox"/>	
E		Rge. <u>1</u> East <input checked="" type="checkbox"/> or West <input type="checkbox"/>	
S		Sec. <u>31</u> 1/4 SW 1/4 NW 1/4	
W		Gov'l Lot _____ County <u>ADH</u>	
		Lat: _____ Long: _____	
		Address of Well Site <u>3171 Deerfield</u> City <u>Eagle</u>	

(Use at least name of road & distance to road or landmark)

Blk. _____ Sub. Name _____

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

Material	SEAL/FILTER PACK		AMOUNT Sacks or Pounds	METHOD
	From	To		
Bentonite	0	20	650LB	Overbore

Was drive shoe used? Y N Shoe Depth(s) 128 ft
 Was drive shoe seal tested? Y N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
6"	+1.5	128	25	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5"	124	129	25	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 5' Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Screen Type Cook

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
129	134	.020	-	5"	Stainless	<input type="checkbox"/>	<input checked="" type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
38 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: _____

11. WELL TESTS:
 Pump Baller Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
75GPM	-	174	1hr 30min

Water Temp. 58° Bottom hole temp. _____
 Water Quality test or comments: _____

Depth first Water Encounter 55 ft

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
10	0	2	Top Soil		X
"	2	5	Brown Clay		X
"	5	9	Hardpan		X
"	9	15	Sandy Clay		X
"	15	20	Tan Clay		X
6	20	30	Tan Clay		X
"	30	33	Sand		X
"	33	55	Tan Clay		X
"	55	75	Gravel	X	
	75	82	Tan Clay		X
	82	85	Sand	Y	
	85	91	Tan Clay	X	X
	91	97	Sand		X
	97	117	Tan Clay		X
	117	123	Sand	Y	
	123	128	Tan Clay		Y
	128	134	Sand	Y	

RECEIVED
 JUL - 5 2000
 Department of Water Resources

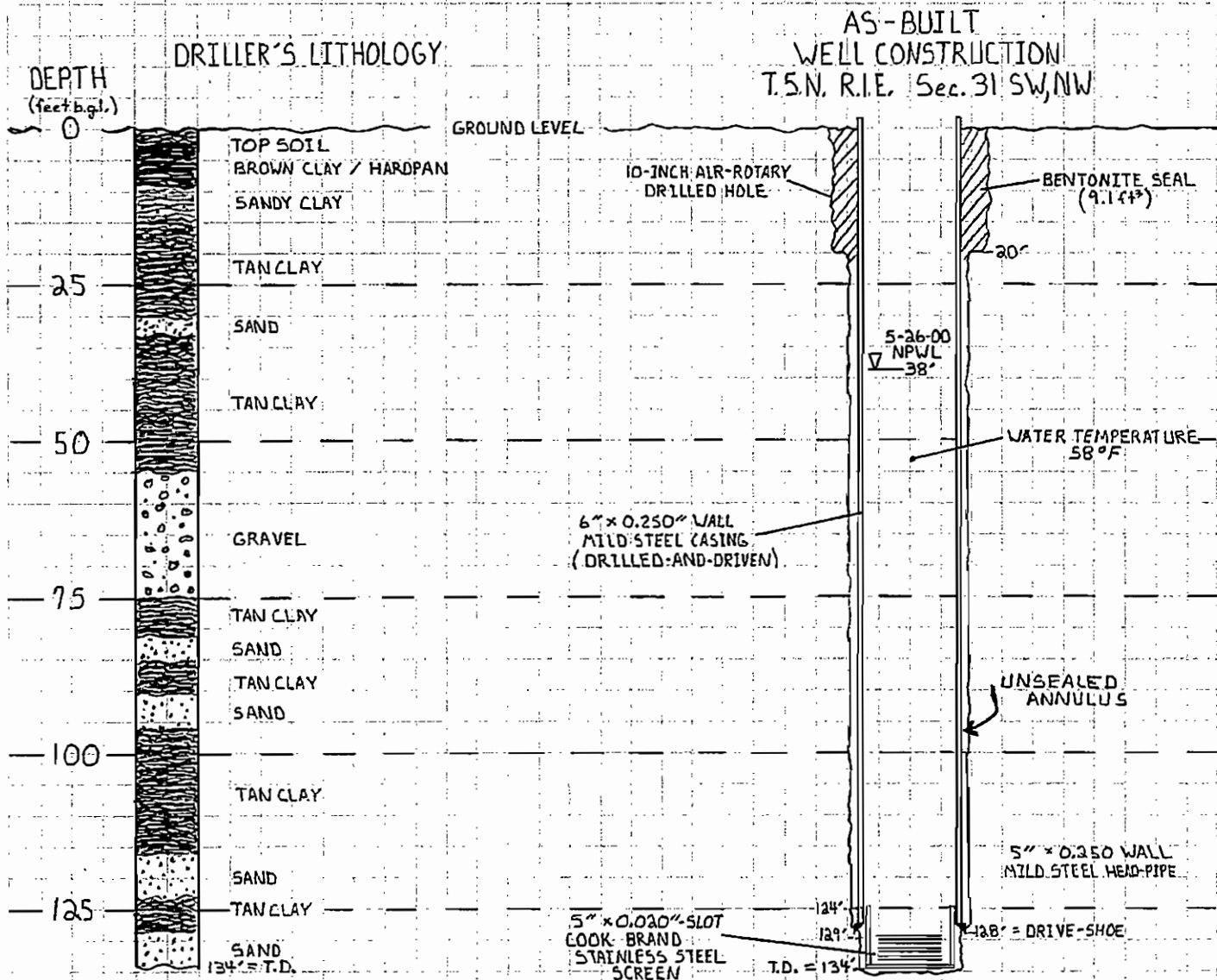
RECEIVED
 JUN 23 2000
 WATER RESOURCES
 WESTERN REGION

Completed Depth 134 Feet (Measurable)
 Date: Started 5-25-00 Completed 5-26-00

13. DRILLER'S CERTIFICATION
 I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
 Company Name Coose Well Drilling Firm No. 409
 Firm Official Chary E Coose Date 5-26-00
 and
 Driller or Operator [Signature] Date 5-26-00
 (Sign once as Firm Official & Operator)

SUBJECT *Richardson Domestic Well*
3171 W. Deerfield Ct.

SHEET OF



- Well constructed May 26, 2000 by: *Coonse Well Drilling*
- Non-pumping water level (NPWL) was 38 feet below ground.
- The well produced approximately 75 gallons-per-minute for 1 1/2 hours by air-lifting from 124 feet below ground.

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Robert Lyons
351 Knob Hill Eagle Id 83616
- 2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
- 4) The drilling company who drilled your well: Howard Mitchell + Bob Lyons
- 5) Year (or approximate year) your well was drilled: 1975. Water right #: 63-8348
- 6) Overall well depth: 500 -. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): _____
- 8) Do you have records of the well's construction or maintenance? no
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: _____
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: _____
 - a. Does your well produce sand? _____. If so, how much? _____
 - b. Who is your pump professional? Coenise pump
 - c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: no
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939 6820

Lyons

USE TYPEWRITER OR BALL POINT PEN

State of Idaho Department of Water Resources

RECEIVED

WELL DRILLER'S REPORT

DEC 28 1973

State 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.

1. WELL OWNER
 Name: Robert E. Lyons
 Address: 5214 B/oom
 Owner's Permit No. 63-8348 WR

7. WATER LEVEL
 Static water level 280 feet below land surface
 Flowing? Yes No G.P.M. flow _____
 Temperature _____ ° F. Quality _____
 Artesian closed-in pressure _____ p.s.i.
 Controlled by Valve Cap Plug

2. NATURE OF WORK
 New well Deepened Replacement
 Abandoned (describe method of abandoning)

8. WELL TEST DATA
 Pump Bailor Other

Discharge G.P.M.	Draw Down	Hours Pumped

3. PROPOSED USE
 Domestic Irrigation Test Other (specify type)
 Municipal Industrial Stock Waste Disposal or Injection

9. LITHOLOGIC LOG 46600

Hole Diam.	Depth		Material	Water	
	From	To		Yes	No
8"	185	185	SOFT SHALE		
8"	185	310	SAND - LOOSE		
8"	310	320	WATER BEARING SAND	X	

TOTAL DEPT 325

4. METHOD DRILLED
 Cable Rotary Dug Other


5. WELL CONSTRUCTION
 Diameter of hole 8 inches Total depth 325 feet
 Casing schedule: Steel Concrete

Thickness	Diameter	From	To
<u>1/4</u> inches	<u>8</u> inches	<u>1</u> feet	<u>285</u> feet
<u>1/4</u> inches	<u>7</u> inches	<u>280</u> feet	<u>325</u> feet

 Was casing drive shoe used? Yes No
 Was a packer or seal used? Yes No
 Perforated? Yes No
 How perforated? Factory Knife Torch
 Size of perforation 5/8 inches by 4 inches

Number	From	To
<u>12</u> perforations	<u>310</u> feet	<u>320</u> feet

 Well screen installed? Yes No
 Manufacturer's name _____
 Type _____ Model No. _____
 Diameter _____ Slot size _____ Set from _____ feet to _____ feet
 Diameter _____ Slot size _____ Set from _____ feet to _____ feet
 Gravel packed? Yes No Size of gravel 7
 Placed from 525 feet to 325 feet
 Surface seal depth 40' Material used in seal Cement grout
 Pudding clay Well cuttings
 Sealing procedure used Slurry pit Temporary surface casing
 Overbore to seal depth

6. LOCATION OF WELL
 Sketch map location must agree with written location.

 Subdivision Name STILLWATER
 Lot No. 6 Block No. 2
 County Ada
SE 1/4 NE 1/4 Sec. 29, T. 5N, R. 1E, E/W

10. Work started Sept 1-74 finished Sept 15-74

11. DRILLERS CERTIFICATION
 Firm Name L & M Drilling Firm No. 297
 Address 971-1 CARTWRIGHT Rd Date _____
 Signed by (Firm Official) James Mitchell
 and
 (Operator) Samuel

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

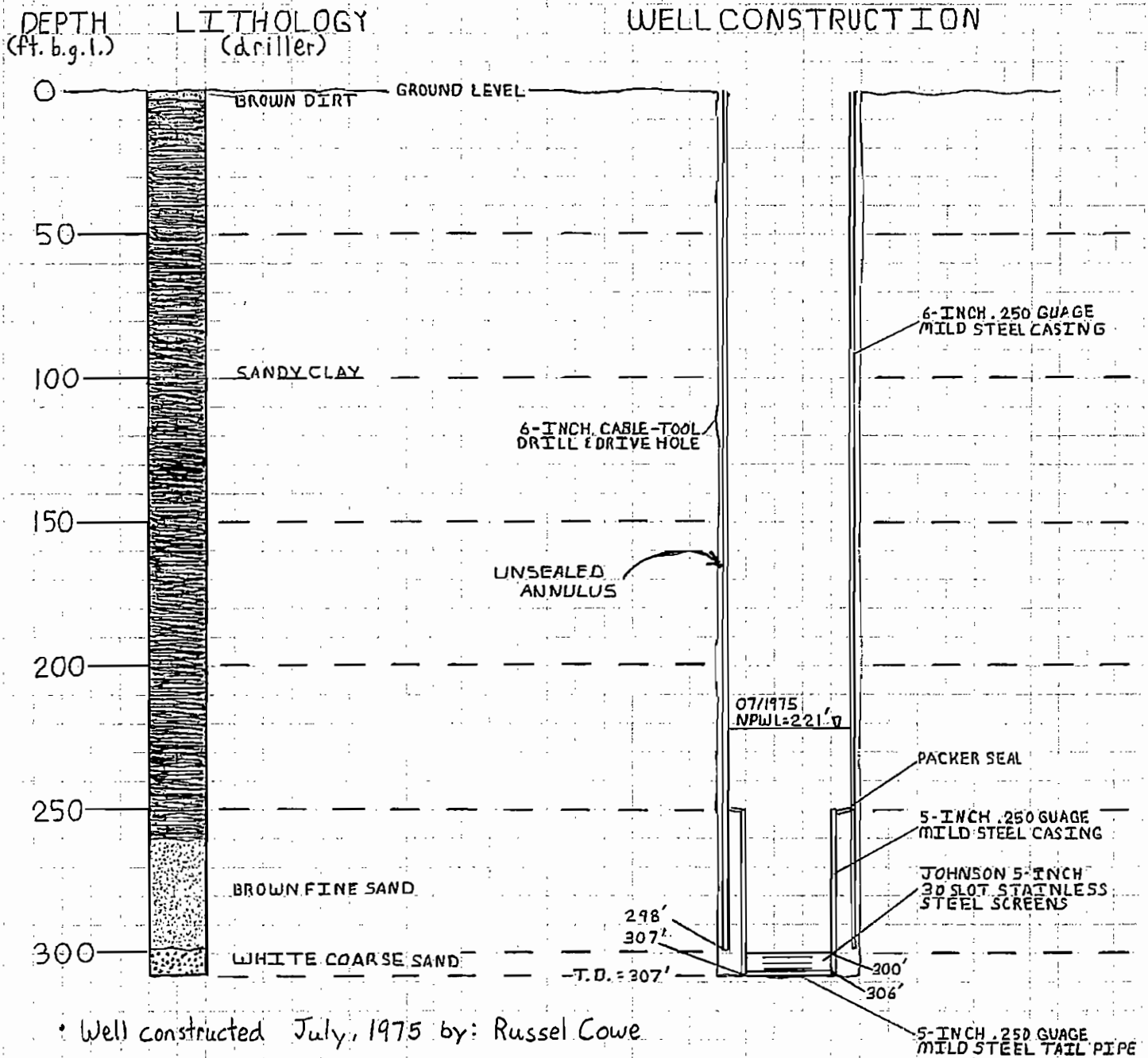
- 1) Your name and address: John Petrovsky. # CJ Thompson
4831 Willow Creek Rd., Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
Original water right was in the name of Walt Stillwell
- 4) The drilling company who drilled your well: See attached (SA)
- 5) Year (or approximate year) your well was drilled: SA. Water right #: SA
- 6) Overall well depth: SA. Depth to water: SA
- 7) The use(s) of your well (domestic, irrigation, etc): domestic & irrigation
- 8) Do you have records of the well's construction or maintenance? SA +
Coonse in Eagle replaced pump in 2002 or 2003; otherwise no.
- 9) Do you have records of pump maintenance and/or replacement? See 8
Contact Coonse
- 10) Describe any change in water level or productivity in the last few years: Per 2008
IDWR measurements, level & productivity stable from 1975 to present
- 11) Do you have records of water levels? See 10—only 1975 and 2008
- 12) Describe any problems you have experienced with your well or pump: 2002/2003 pump
replacement turned out to be a preventative "early life cycle" action. Upon
inspection, while Coonse found the pump to functional, he estimated that it
was over 50% through its life cycle (see below).
- a. Does your well produce sand? Yes. If so, how much? very little
- b. Who is your pump professional? See 8
- c. To what do you attribute the problems you have experienced? _____
Coonse initially thought the cause of the well ceasing to work was the pump.
it turned out to be in the electrical system in the house.
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: Not applicable
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: as long as the work is supervised or verified by IDWR...
call 938-0418

SUBJECT Petrovsky/Thompson Domestic Well

DATE

4831 Willow Creek Rd.

SHEET OF



- Well constructed July, 1975 by: Russel Cowe
- Non-Pumping Water Level (NPWL) was 221 feet below ground.
- Pumping Water Level was 226 feet below ground after pumping 20 gallons/minute for 2 hours.
- Information shown is from Driller's Report at IDWR

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Jim Banducci
2990 Holt Dr Eagle ID 83616
- 2) Do you have or use a ground water right in the Eagle area? . If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Randy & Tracy Hall
- 4) The drilling company who drilled your well: Phippo Drilling
- 5) Year (or approximate year) your well was drilled: 96. Water right #: _____
- 6) Overall well depth: 215. Depth to water: 61.39
- 7) The use(s) of your well (domestic, irrigation, etc): domestic, irrigation
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? no
- 10) Describe any change in water level or productivity in the last few years: unknown
- 11) Do you have records of water levels? IDW? - last 2 yrs
- 12) Describe any problems you have experienced with your well or pump: none
 - a. Does your well produce sand? yes. If so, how much? not sure
 - b. Who is your pump professional? Gem Pump
 - c. To what do you attribute the problems you have experienced? normal use
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: original well went dry this is 2nd well drilled in 1996
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-2223

we have been working with Dennis Owsley
287-4855.

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

BANDUCCI Use Typewriter or Ballpoint Pen

091664

Office Use Only
 Inspected by _____
 Twp _____ Rge _____ Sec _____
 1/4 _____ 1/4 _____ 1/4 _____
 Lat: : : Long: : :
 Air Flowing Artesian

1. DRILLING PERMIT NO. 63-96-W-0221-200
 Other IDWR No. _____

2. OWNER: Randy + Tracy Hall
 Name _____
 Address 2990 Holl Dr.
 City Eagle State ID Zip 83616

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

N		Twp. <u>5</u> North <input checked="" type="checkbox"/> or South <input type="checkbox"/>	
E		Rge. <u>1</u> East <input checked="" type="checkbox"/> or West <input type="checkbox"/>	
S		Sec. <u>33</u> 1/4 <u>SE</u> 1/4 <u>SE</u> 1/4	
W		Gov'l Lot _____ County <u>ADA</u> 10 acres 160 acres	
X		Lat: : : Long: : :	
		Address of Well Site <u>2990 Holl Dr.</u>	
		City <u>Eagle</u>	

(Give at least name of road - Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Scale or Pounds	
<u>Bentonite</u>	<u>4'</u>	<u>18'</u>	<u>300</u>	<u>overbore</u>

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
<u>8"</u>	<u>+2</u>	<u>179</u>	<u>14</u>	<u>Steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
65 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered _____ ft. Describe access port or control devices: N/A

11. WELL TESTS:
 Pump Baller Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>100</u>	<u>—</u>	<u>—</u>	<u>1 hr.</u>

Water Temp. _____ Bottom hole temp. _____
 Water Quality test or comments: N/A

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8"</u>	<u>0</u>	<u>13</u>	<u>TOP SOIL</u>		<input checked="" type="checkbox"/>
	<u>13</u>	<u>18</u>	<u>SAND + CLAY</u>		<input checked="" type="checkbox"/>
	<u>18</u>	<u>19</u>	<u>SAND + CLAY</u>		<input checked="" type="checkbox"/>
	<u>19</u>	<u>30</u>	<u>GRAVEL + CLAY</u>		<input checked="" type="checkbox"/>
	<u>30</u>	<u>47</u>	<u>CLAY</u>		<input checked="" type="checkbox"/>
	<u>47</u>	<u>80</u>	<u>GRAVEL</u>		<input checked="" type="checkbox"/>
	<u>80</u>	<u>90</u>	<u>Brown CLAY</u>	<input checked="" type="checkbox"/>	
	<u>90</u>	<u>109</u>	<u>Brown CLAY</u>		<input checked="" type="checkbox"/>
	<u>109</u>	<u>137</u>	<u>Brown clay + muddy Sand</u>		<input checked="" type="checkbox"/>
	<u>137</u>	<u>160</u>	<u>muddy Sand</u>		<input checked="" type="checkbox"/>
	<u>160</u>	<u>240</u>	<u>Blue CLAY</u>	<input checked="" type="checkbox"/>	
	<u>240</u>		<u>Fine Sand</u>		<input checked="" type="checkbox"/>

RECEIVED

JUL 16 1996

Department of Water Resources

RECEIVED

JUN 28 1996

WATER RESOURCES
WESTERN REGION

SEP 11 1996

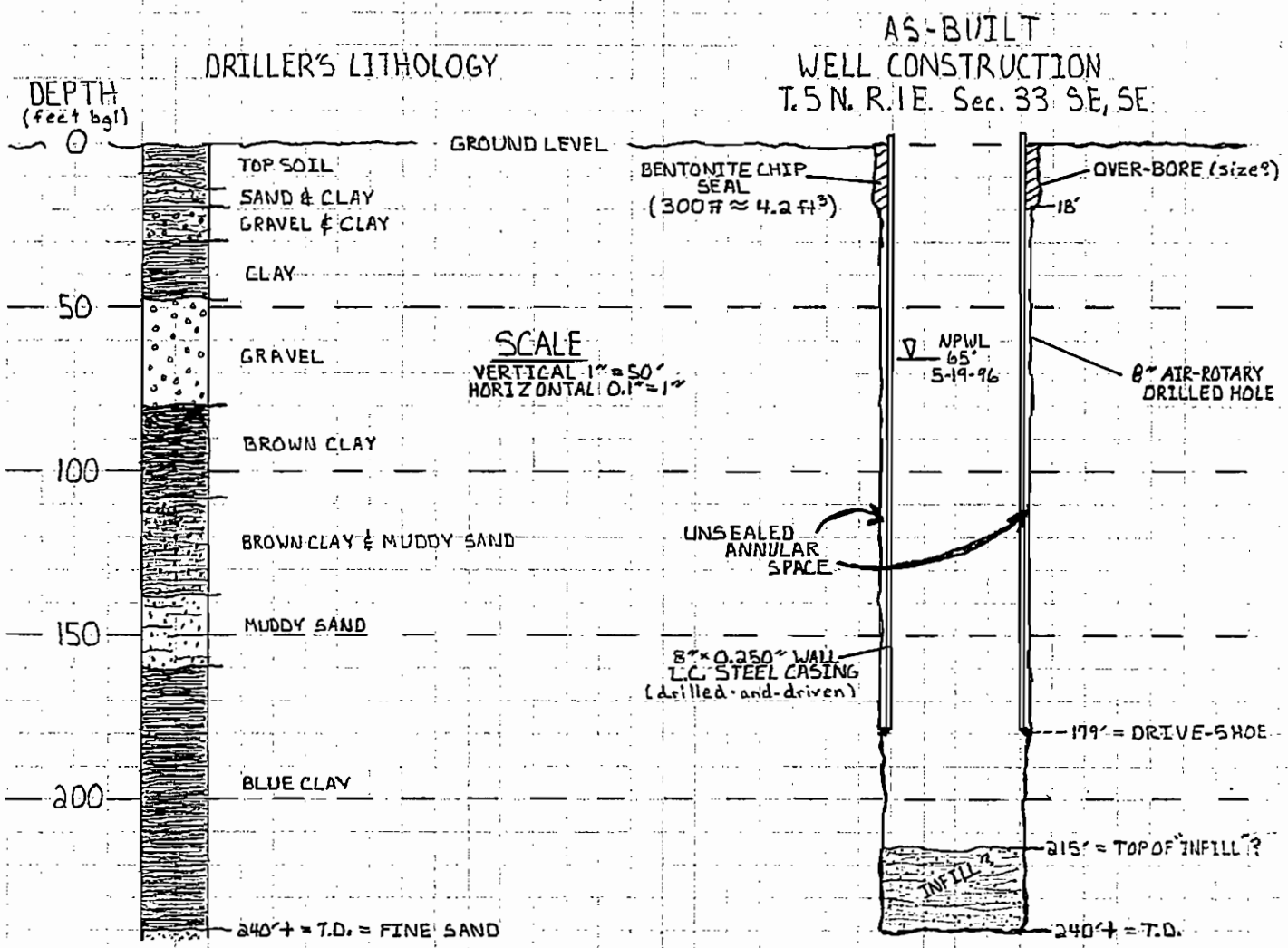
Completed Depth 215 (Measurable)
 Date: Started 4-28-96 Completed 5-19-96

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

Firm Name Phipps Drilling Firm No. 311
 Firm Official Wesley A. Phipps Date 6-10-96
 and
 Supervisor or Operator Andy Payne Date 6-7-96
(Sign once if Firm Official & Operator)

SUBJECT Banducci Domestic Well
2990 Holl Dr., Eagle, ID

DATE 7-6-2009
SHEET 1 OF 1



- Well constructed May 19, 1996 by: Dennis Phipps Well Drilling, Inc.
- Non-pumping water level (NPWL) was 65 feet below ground in May 1996.
- Pumping water level was not measured at 100 gallons/minute.
- Information shown is from Driller's Report on file at Idaho Department of Water Resources.

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Trish & Barry Jones
4032 N. Craft Pl Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? _____. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
- 4) The drilling company who drilled your well: _____
- 5) Year (or approximate year) your well was drilled: _____. Water right #: _____
- 6) Overall well depth: _____. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? _____
- 9) Do you have records of pump maintenance and/or replacement? _____
- 10) Describe any change in water level or productivity in the last few years: _____
- 11) Do you have records of water levels? _____
- 12) Describe any problems you have experienced with your well or pump: _____
- a. Does your well produce sand? _____. If so, how much? _____
- b. Who is your pump professional? _____
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- ★ 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208-938-8938

David, we would like to take advantage of locating the well and depth information. We have hit dead ends when trying to collect



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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Sherrri Randall 278 E Beacon Light
Eagle ID 83614
- 2) Do you have or use a ground water right in the Eagle area? well. If ^{it is required for other} yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: N/A
- 4) The drilling company who drilled your well: ?
- 5) Year (or approximate year) your well was drilled: 1991. Water right #: 63-12015
63-12015
- 6) Overall well depth: 154. Depth to water: 74
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? somewhere in attic
- 9) Do you have records of pump maintenance and/or replacement? N/A
- 10) Describe any change in water level or productivity in the last few years: unknown
- 11) Do you have records of water levels? only one recent check on 7/23/08
- 12) Describe any problems you have experienced with your well or pump: _____

- a. Does your well produce sand? No. If so, how much? _____
b. Who is your pump professional? _____
c. To what do you attribute the problems you have experienced? _____

- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A

- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____

Handwritten: Randall
Handwritten: C

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

Permit # 724936

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Shirley Randall</u></p> <p>Address <u>270 E. Beacon Light Rd.</u></p> <p>Owner's Permit No. <u>63-91-W-464</u></p>	<p>7. WATER LEVEL</p> <p>Static water level <u>60</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature _____ °F. Quality _____</p> <p><i>Describe artesian or temperature zones below.</i></p>																																																																																		
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)</p>	<p>8. WELL TEST DATA</p> <p><input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td><u>100 GPM</u></td> <td><u>150 ft</u></td> <td><u>2 hrs</u></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	<u>100 GPM</u>	<u>150 ft</u>	<u>2 hrs</u>																																																																												
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<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>250</u> inches</td> <td><u>6</u> inches</td> <td><u>2</u> feet</td> <td><u>149</u> feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ inches</td> <td>_____ inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch</p> <p>Size of perforation _____ inches by _____ inches</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Well screen installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Manufacturer's name _____</p> <p>Type _____ Model No. _____</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>20</u> Material used in seal: <input type="checkbox"/> Cement grout</p> <p><input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Pudding clay <input type="checkbox"/> _____</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing</p> <p><input checked="" type="checkbox"/> Overbore to seal depth</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent Weld</p> <p><input type="checkbox"/> Cemented between strata</p> <p>Describe access port _____</p>	Thickness	Diameter	From	To	<u>250</u> inches	<u>6</u> inches	<u>2</u> feet	<u>149</u> feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	_____ inches	_____ inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	<p>11. DRILLERS CERTIFICATION</p> <p>I/We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Boise Valley Pump & Drilling</u> Firm No. <u>207</u></p> <p>Address <u>2950 S. Hudson</u> Date <u>12/10/91</u></p> <p>Signed by (Firm Official) <u>[Signature]</u></p> <p>and (Operator) <u>[Signature]</u></p>																																																		
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<p>6. LOCATION OF WELL</p> <p>Sketch map location <u>must</u> agree with written location.</p> <div style="text-align: center;"> </div> <p>Subdivision Name _____</p> <p>Lot No. _____ Block No. _____</p> <p>County <u>Ada</u></p> <p><u>SE</u> 1/4 <u>SW</u> 1/4 Sec. <u>33</u>, T. <u>5</u> N., R. <u>1</u> E.W.</p>	<p>7. DRILLERS CERTIFICATION</p> <p><i>Handwritten:</i> APPROVED APR 09 1992</p>																																																																																		

22

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Bryce Van Camp
3800 N. Craft Way Eagle ID 83616
- 2) Do you have or use a ground water right in the Eagle area? No. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Tom Kenbolt
- 4) The drilling company who drilled your well: Coonse
- 5) Year (or approximate year) your well was drilled: 2000. Water right #: _____
- 6) Overall well depth: _____. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): Both
- 8) Do you have records of the well's construction or maintenance? No
- 9) Do you have records of pump maintenance and/or replacement? Yes
- 10) Describe any change in water level or productivity in the last few years: None
- 11) Do you have records of water levels? No
- 12) Describe any problems you have experienced with your well or pump: Pump went out once.
- a. Does your well produce sand? No. If so, how much? _____
- b. Who is your pump professional? Coonse
- c. To what do you attribute the problems you have experienced? Use
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 343-1816 or 938-1917

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: SALLY & CRAIG TARBET, 3852 W. PINE
CRK, MERIDIAN, ID 83642
WELL LOCATION: NW 1/4 SEC. 15, T5N, R1E, BM ADA CO. - MAP
2) Do you have or use a ground water right in the Eagle area? YES. If yes, please ON BACK
continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name
the person from whom you purchased: ROWLAND, RUGH
- SALLY MILLER / SALLY BROGAN -
- 4) The drilling company who drilled your well: _____ SPRING
- 5) Year (or approximate year) your well was drilled: 1986. Water right #: 63-10376
- 6) Overall well depth: _____. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? NO
- 10) Describe any change in water level or productivity in the last few years: _____

- 11) Do you have records of water levels? YES
- 12) Describe any problems you have experienced with your well or pump: NONE
AT THIS TIME
- a. Does your well produce sand? NO. If so, how much? _____
b. Who is your pump professional? _____
c. To what do you attribute the problems you have experienced? _____

- 13) If you have had your well deepened or a screen or casing inserted after the well was
drilled, please provide the details as to when, who did the work, what the work entailed,
and how this changed the well's performance: _____

- 14) If you are willing to have your well located (via GPS), measured, and inspected by
Hydro Logic, Inc., please provide a phone number where you can be reached during the
week: 208/890-8899

Tarbet

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

State 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.

<p>1. WELL OWNER</p> <p>Name <u>Hugh Rowland</u></p> <p>Address <u>RT Eagle Idaho</u></p> <p>Owner's Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>70</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature _____ OF. Quality _____</p> <p><i>Describe artesian or temperature zones below.</i></p>																																																																						
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)</p>	<p>8. WELL TEST DATA</p> <p><input checked="" type="checkbox"/> Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;">30</td> <td style="text-align: center;">78'</td> <td style="text-align: center;">2</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	30	78'	2																																																																
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6	104	112	fine gravel & coarse sand	X																																																																			
<p>4. METHOD DRILLED</p> <p><input type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input type="checkbox"/> Reverse rotary</p> <p><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____</p>	<div style="text-align: center;"> <p>RECEIVED</p> <p>MAY 12 1985</p> <p>Department of Water Resources Western Regional Office</p> </div> <div style="position: relative; height: 100px;"> <p style="position: absolute; top: 0; right: 0;">Exit Packer Just above pipe</p> <p style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%);">070 slot 5'</p> <p style="position: absolute; bottom: 0; left: 0;">1' Tail pipe closed bottom</p> </div>																																																																						
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>2.50</u> Inches</td> <td><u>6</u> Inches</td> <td><u>1.5</u> feet</td> <td><u>107</u> feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Perforated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch</p> <p>Size of perforation _____ inches by _____ inches</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Well screen installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Manufacturer's name <u>Johnson</u></p> <p>Type <u>6" tel.</u> Model No. <u>304 S.S.</u></p> <p>Diameter <u>6"</u> Slot size <u>.076</u> Set from <u>107</u> feet to <u>112</u> feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>20</u>. Material used in seal: <input type="checkbox"/> Cement grout</p> <p><input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Pudding clay <input type="checkbox"/> _____</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing</p> <p><input checked="" type="checkbox"/> Overbore to seal depth</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent</p> <p>Weld _____</p> <p><input type="checkbox"/> Cemented between strata</p> <p>Describe access port <u>none</u></p>	Thickness	Diameter	From	To	<u>2.50</u> Inches	<u>6</u> Inches	<u>1.5</u> feet	<u>107</u> feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	<p>10.</p> <p>Work started <u>9-7-85</u> finished <u>9-11-85</u></p>																																						
Thickness	Diameter	From	To																																																																				
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<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;"> <p style="text-align: center;">N</p> <p style="text-align: center;">W E</p> <p style="text-align: center;">S</p> </div> <div> <p>Subdivision Name _____</p> <p>Lot No. _____ Block No. _____</p> </div> </div> <p>County <u>Ada</u></p> <p><u>NW</u> & <u>NW</u> & Sec. <u>15</u>, T. <u>5</u> N. & R. <u>1</u> E. & M.</p>	<p>11. DRILLERS CERTIFICATION <u>ee</u></p> <p>I/We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>Aqua Masters</u> Firm No. <u>130</u></p> <p>Address <u>9170 Colson Dr. Boise</u> <u>9-20-85</u></p> <p>Signed by (Firm Official) <u>Kent P. Beum</u></p> <p>and (Operator) <u>Kent P. Beum</u></p>																																																																						

24

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Lorn H. Adams
4440 N Crest Pl Eagle ID 83616
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Jason
- 4) The drilling company who drilled your well: Insure Valley Drilling
- 5) Year (or approximate year) your well was drilled: 1995. Water right #: _____
- 6) Overall well depth: ?. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? no
- 9) Do you have records of pump maintenance and/or replacement? no
- 10) Describe any change in water level or productivity in the last few years: _____
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: _____
a. Does your well produce sand? occ.. If so, how much? _____
b. Who is your pump professional? _____
c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-7875

Adkins
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT
Use Typewriter or Ballpoint Pen

Office Use Only			
Inspected by	_____		
Twp	Rge	Sec	
1/4	1/4	1/4	
Lat: : : Long: : :	_____		

1. DRILLING PERMIT NO. 63-96-W-0670-000
Other IDWR No. _____

2. OWNER: Pat Pullmer
Name _____
Address 1538 Deerwood
City Eagle State ID Zip 83616

3. LOCATION OF WELL by legal description:

Sketch map location must agree with written location.

N					
W		E			
S					

Twp. 5 North or South
Rge. 1 East or West
Sec. 36 1/4 NE 1/4 NE 1/4
Gov'l Lot _____ County ADP
Lat: : : Long: Croft
Address of Well Site 4440 Cross
City Eagle

Lt. _____ Blk. _____ Sub. Name Buckhorn
Est.

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
<u>Bentite</u>	<u>0</u>	<u>18+</u>	<u>450</u>	<u>Pour</u>

Was drive shoe used? Y N Shoe Depth(s) 118
Was drive shoe seal tested? Y N How? Air

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6</u>	<u>+2</u>	<u>118</u>	<u>250</u>	<u>Steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
29 ft. below ground Artesian pressure _____ lb.
Depth flow encountered 119 ft. Describe access port or control devices: CAIP

11. WELL TESTS:

<input type="checkbox"/> Pump	<input type="checkbox"/> Baller	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min.	Drawdown	Pumping Level	Time
<u>75</u>	<u>100</u>	<u>100</u>	<u>2 Hr</u>

Water Temp. 56 Bottom hole temp. 56
Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment) _____ Depth first Water Encountered _____

Bore Dia	From	To	Remarks: Lithology, Water Quality & Temperature	Water	Y	N
	<u>0</u>	<u>4</u>	<u>TOP Soil</u>			
	<u>4</u>	<u>18</u>	<u>Brn CLAY</u>			
	<u>6</u>	<u>18</u>	<u>" "</u>			
	<u>21</u>	<u>70</u>	<u>Tan CLAY & Sand layers</u>		<input checked="" type="checkbox"/>	
	<u>70</u>	<u>90</u>	<u>Gravel</u>		<input checked="" type="checkbox"/>	
	<u>90</u>	<u>115</u>	<u>Sand & CLAY layers</u>		<input checked="" type="checkbox"/>	
	<u>115</u>	<u>119</u>	<u>Brn CLAY</u>			
	<u>119</u>	<u>123</u>	<u>SAND</u>			<input checked="" type="checkbox"/>

RECEIVED
OCT 03 1996
Department of Water Resources

RECEIVED
SEP 26 1996
WATER RESOURCES
WESTERN REGION

MICROFILMED
DEC 06 1996

Completed Depth 119 (Measurable)
Date: Started 9-12-96 Completed 9-12-96

13. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
Firm Name Treasure Valley Drilling Firm No. 566
Firm Official [Signature] Date 9-23-96
and
Supervisor or Operator [Signature] Date 9-23-96
(Sign once if Firm Official & Operator)

25

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: KAREN & LYLE JORDAN
2417 N. CROFT WBY EAGLE
- 2) Do you have or use a ground water right in the Eagle area? _____. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
Chris Beaux 1998
- 4) The drilling company who drilled your well: CAN-ADA WELL & PUMP CO.
- 5) Year (or approximate year) your well was drilled: Oct 2, 1995. Water right #: Permit # 544 994
- 6) Overall well depth: _____. Depth to water: Don't know
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? original pump
- 10) Describe any change in water level or productivity in the last few years: none
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: _____
never had any problems
 - a. Does your well produce sand? no. If so, how much? _____
 - b. Who is your pump professional? CAN-ADA well & Pump Co.
 - c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____
938-9259

Jordan

Form 238-7
3/95

IDAHO DEPARTMENT OF WATER RESOURCES

WELL DRILLER'S REPORT

Use Typewriter or Ballpoint Pen

064269

Office Use Only
 Inspected by _____
 Twp. _____ Rge. _____ Sec. _____
 _____/1/4 _____/1/4 _____/1/4
 Lat: : : Long: : :

1. DRILLING PERMIT NO. 63-95-W-0709-000
Other IDWR No. _____

2. OWNER:
Name Chris Beaux
Address 170 S. Cole Rd.
City Boise State Id. Zip 83709

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

Twp. 5 North or South
 Rge. 1 East or West
 Sec. 36 1/4 SE 1/4 SE 1/4
 Gov't Lot _____ County Ada
 Lat: _____ Long: _____
 Address of Well Site Beaconite & N. Croft Way

Eagle, Id.
Lt. 2 Blk. 4 Sub. Name Buckhorn Estates

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
Bentonite	1	18	7	Overbore

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
6"	1	98'	250	Steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe _____ Length of Tailpipe _____

9. PERFORATIONS/SCREENS

Perforations Method _____
 Screens Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
29' ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: Sanitary Well Cap

11. WELL TESTS:
 Pump Beller Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
100	0	94	2

Water Temp. _____ Bottom hole temp. _____
 Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
9"	0	3	Top Soil	No	
9"	3	18	Sandy Brown Clay	No	
6"	18	50	Sand & Gravel	NO	
6"	50	58	Sand & Gravel/30 gpm	Yes	
6"	58	88	Brown Clay		X
6"	88	89	Sand /20 gpm dirty	Yes	
6"	89	94	Sticky Brown Clay	No	
6"	94	98	Sand/100 gpm	Yes	

RECEIVED
 OCT 12 1995
 Department of Water Resources

RECEIVED
 SEP 28 1995
 WATER RESOURCES
 WESTERN REGION

DEC 19 1995

Completed Depth 98' (Measurable)
 Date Started 9/12/95 Completed 9/13/95

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

Firm Name Can-Ada Well & Pump Firm No. 304
 Firm Official Earl Skinner Date 9/20/95
 and Earl Skinner
 Supervisor or Operator Earl Skinner Date 9/20/95
 (Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

26

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: M.D. (Butch) Groothuis
3490 N. Saddleman Place Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Bud & Marcie Roundtree
built the house & had the well drilled
- 4) The drilling company who drilled your well: Don't Know
- 5) Year (or approximate year) your well was drilled: 1996. Water right #: 63-11847
- 6) Overall well depth: Don't Know Depth to water: Don't Know
- 7) The use(s) of your well (domestic, irrigation, etc): domestic + lawn
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? NO
- 10) Describe any change in water level or productivity in the last few years: _____

- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: NONE

a. Does your well produce sand? NO. If so, how much? _____
b. Who is your pump professional? Never Used One
c. To what do you attribute the problems you have experienced? _____

- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A

- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208-850-0617



3490 N. Saddleman Pl.
Eagle, ID 83616

27

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Daniel Glivar of 3426 N. Croft Way Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: HASLAM (last name of prior owner)
- 4) The drilling company who drilled your well: COONSE WELL DRILLING
- 5) Year (or approximate year) your well was drilled: 1995. Water right #: ? ^{report} attached
- 6) Overall well depth: 125 ft. Depth to water: ? 115 ft - report attached
- 7) The use(s) of your well (domestic, irrigation, etc): domestic mainly, but also some lawn irrigation
- 8) Do you have records of the well's construction or maintenance? report attached
- 9) Do you have records of pump maintenance and/or replacement? NONE KNOWN OF
- 10) Describe any change in water level or productivity in the last few years: NONE REASILY APPARENT - VERY STRONG WATER FLOWS
- 11) Do you have records of water levels? NONE KNOWN OF
- 12) Describe any problems you have experienced with your well or pump: NONE KNOWN OF
 - a. Does your well produce sand? NO. If so, how much? _____
 - b. Who is your pump professional? DONT HAVE ONE
 - c. To what do you attribute the problems you have experienced? N/A
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 383-3958 (work)

Glivar

Form 238-7
7/84

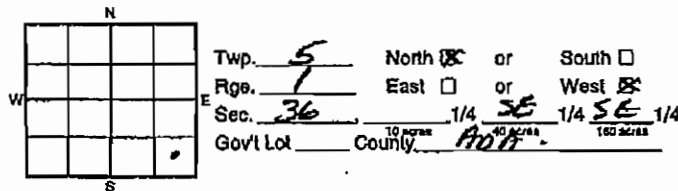
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT
49071

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 63-95-W-0222-000
Other IDWR No. _____

2. OWNER:
Name ROBERT PEDERSEN
Address 494 S. GOSLING WAY
City EAGLE State ID Zip 83616

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



Address of Well Site _____
City EAGLE

(Give at least name of road + Distance to Road or Landmark)

Lt. 3 Blk. 2 Sub. Name BLACKBURN
ESTATES

4. PROPOSED USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK
 New Well Modify or Repair Replacement Abandonment

6. DRILL METHOD
 Mud Rotary Air Rotary Cable Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK		AMOUNT		METHOD
Material	From	To	Barrels or Pounds	
<u>BEUTON 116</u>	<u>0</u>	<u>18</u>	<u>350 LBS</u>	<u>OUTDRILL</u>

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
<u>6"</u>	<u>112'</u>	<u>119'</u>	<u>.25</u>	<u>STEEL</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>8"</u>	<u>114'</u>	<u>119'</u>	<u>.28</u>	<u>STEEL</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 5' Length of Tailpipe 6"

9. PERFORATIONS/SCREENS

Perforations Method WASHDOWN
 Screens Screen Type STAINLESS STEEL

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>119</u>	<u>124</u>	<u>.20</u>	<u>-</u>	<u>5"</u>	<u>ST-STEEL</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

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

11. WELL TESTS:

Pump Bailor Air Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
<u>40</u>	<u>-</u>	<u>115</u>	<u>1HR</u>

Water Temp. 54.0 Bottom hole temp. 54.0

Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bove Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>2</u>	<u>TOP SOIL</u>		<input checked="" type="checkbox"/>
	<u>2</u>	<u>6</u>	<u>BKN CLAY</u>		<input checked="" type="checkbox"/>
	<u>6</u>	<u>18</u>	<u>TAN CLAY</u>		<input checked="" type="checkbox"/>
<u>6</u>	<u>18</u>	<u>41</u>	<u>SANDY CLAY</u>		<input checked="" type="checkbox"/>
	<u>41</u>	<u>52</u>	<u>TAN CLAY</u>		<input checked="" type="checkbox"/>
	<u>52</u>	<u>69</u>	<u>GRAVEL</u>	<input checked="" type="checkbox"/>	
	<u>69</u>	<u>71</u>	<u>COARSE SAND</u>	<input checked="" type="checkbox"/>	
	<u>71</u>	<u>76</u>	<u>TAN CLAY</u>		<input checked="" type="checkbox"/>
	<u>76</u>	<u>83</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	
	<u>83</u>	<u>88</u>	<u>BAN SAND</u>	<input checked="" type="checkbox"/>	
	<u>88</u>	<u>91</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	
	<u>91</u>	<u>96</u>	<u>TAN CLAY</u>		<input checked="" type="checkbox"/>
	<u>96</u>	<u>102</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	
	<u>102</u>	<u>106</u>	<u>TAN CLAY</u>		<input checked="" type="checkbox"/>
	<u>106</u>	<u>108</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	
	<u>108</u>	<u>110</u>	<u>TAN CLAY</u>		<input checked="" type="checkbox"/>
	<u>110</u>	<u>125</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	

RECEIVED RECEIVED

AUG 01 1995

JUN 15 1995

Department of Water Resources

WESTERN REGION

OUT 10 1995

Completed Depth 125 FT. (Measurable)
Date: Started 4-95 Completed 4-7-95

13. DRILLER'S CERTIFICATION

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

Firm Name COOPER WELL DRILLING Firm No. 409

Firm Official Jay E. Cooper Date 4-10-95
and _____

Supervisor or Operator _____ Date _____

(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

28

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: VINCENT LAZZETTA
4243 N CROFT RD PALME ID 83616-2258
- 2) Do you have or use a ground water right in the Eagle area? NO. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
- 4) The drilling company who drilled your well: PHIPPS DRILLING
- 5) Year (or approximate year) your well was drilled: 1999. Water right #: _____
- 6) Overall well depth: 168'. Depth to water: 71'
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC
- 8) Do you have records of the well's construction or maintenance? YES (DRILLERS REPORT)
- 9) Do you have records of pump maintenance and/or replacement? NO #59721
- 10) Describe any change in water level or productivity in the last few years: NONE
- 11) Do you have records of water levels? ONLY THE DRILLERS REPORT
- 12) Describe any problems you have experienced with your well or pump: N/A
 - a. Does your well produce sand? NO. If so, how much? _____
 - b. Who is your pump professional? _____
 - c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208 250 9801 (M)

Iazzetta

Form 238-7
11/97

IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT 59721

Office Use Only		
Inspected by	_____	
Twp	Rge	Sec
1/4	1/4	1/4
Lat	:	Long
:	:	:

1. WELL TAG NO. D 0009844
DRILLING PERMIT NO. 63-99420514 000
Other IDWR No. _____

2. OWNER: ORIO-KAI INC.
Name _____
Address 3775 N LA FRONTIER WAY
City BOSTON State IN Zip 46002

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

N		X	
Twp. <u>5</u>		North <input checked="" type="checkbox"/>	or South <input type="checkbox"/>
Rge. <u>1</u>		East <input checked="" type="checkbox"/>	or West <input type="checkbox"/>
Sec. <u>36</u>		<u>NE 1/4</u>	
Gov't Lot _____		County <u>ADA</u>	
Lat. _____		Long. _____	
Address of Well Site <u>4243 N Center</u>			
City _____			

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sacks or Pounds	
<u>Prepacked</u>	<u>5</u>	<u>16</u>	<u>5 lbs</u>	<u>Temp Cased</u> <u>10" 15"</u>

Was drive shoe used? Yes No Shoe Depth(s) 155'
Was drive shoe seal tested? Yes No How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
<u>6"</u>	<u>1</u>	<u>15.5</u>	<u>2.56</u>	<u>Steel</u>	<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 5' Length of Tailpipe 10"

9. PERFORATIONS/SCREENS
Perforations Method WASH
Screens 1 Screen Type _____

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>155</u>	<u>168</u>	<u>20/3</u>		<u>5"</u>	<u>SS</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
35 ft. below ground Artesian pressure lb.
Depth flow encountered _____ ft. Describe access port or control devices: N/A

11. WELL TESTS:
 Pump Bailor Air Flowing Artesian

Yield gal/min.	Drawdown	Pumping Level	Time
<u>76'</u>		<u>120</u>	<u>6 hr</u>

Water Temp. 78.5° Bottom hole temp. _____
Water Quality test or comments: _____
Depth first Water Encounter 7'

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10"</u>	<u>0</u>	<u>7</u>	<u>TO SOIL</u>		
<u>10"</u>	<u>7</u>	<u>18</u>	<u>SANDY SOIL</u>		
<u>10"</u>	<u>18</u>	<u>43</u>	<u>GRAVEL</u>	<input checked="" type="checkbox"/>	
<u>10"</u>	<u>43</u>	<u>71</u>	<u>GRAVEL CLAY</u>		
<u>10"</u>	<u>71</u>	<u>99</u>	<u>SAND & GRAVEL</u>		
<u>10"</u>	<u>99</u>	<u>107</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	
<u>10"</u>	<u>107</u>	<u>113</u>	<u>CLAY</u>		
<u>10"</u>	<u>113</u>	<u>155</u>	<u>CLAY & SAND</u>	<input checked="" type="checkbox"/>	
<u>10"</u>	<u>155</u>	<u>156</u>	<u>CLAY</u>		
<u>10"</u>	<u>156</u>	<u>169</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	

RECEIVED
AUG 17 1999
WATER RESOURCES
WESTERN REGION

RECEIVED
NOV 3 - 1999
Department of Water Resources

MICROFILMED
FEB 17 2000

Completed Depth 168' (Measurable)
Date: Started 7-7-99 Completed 7-12-99

13. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
Company Name P.H. PROS DRILLING Firm No. 311
Firm Official Wendy A. [Signature] Date 7/30/99
and
Driller or Operator [Signature] Date 7/30/99
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

29

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: MICHAEL + MARINA MAC MURRAY
902 STILLWELL DR, BRUCE, IDAHO 83416
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: CHRIS PHALIN
- 4) The drilling company who drilled your well: CAN-ADN WELL DRILLING
- 5) Year (or approximate year) your well was drilled: 1992 Water right #: 157
- 6) Overall well depth: 213. Depth to water: 147 63-03483N
1-2-1964
- 7) The use(s) of your well (domestic, irrigation, etc) BOTH 63-03416M
1-3-1955
- 8) Do you have records of the well's construction or maintenance? YES
- 9) Do you have records of pump maintenance and/or replacement? N/A WATER LICENSE
6311580
11-4-1991
- 10) Describe any change in water level or productivity in the last few years: UNKNOWN?
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: NONE
- a. Does your well produce sand? NO. If so, how much? _____
- b. Who is your pump professional? CONSC DRILLING + PUMP
- c. To what do you attribute the problems you have experienced? N/A
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: DRILL TO DEEPENED,
SCREEN INSTALLED, NO PROBLEMS
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208 939 7806 H
208 859 4324 C
208 859 4360 A

EXHIBIT

A

30

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Charles Watkins
1313 W Meander Dr, Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? . If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Ron Post
- 4) The drilling company who drilled your well: Unknown
- 5) Year (or approximate year) your well was drilled: 1978. Water right #:
- 6) Overall well depth: No info. Depth to water: No info
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic + lawn
- 8) Do you have records of the well's construction or maintenance? No
- 9) Do you have records of pump maintenance and/or replacement? No
- 10) Describe any change in water level or productivity in the last few years: No information
- 11) Do you have records of water levels? No
- 12) Describe any problems you have experienced with your well or pump: None noticed
- a. Does your well produce sand? No. If so, how much?
- b. Who is your pump professional? Gary Coonse
- c. To what do you attribute the problems you have experienced?
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: No information
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 363-1346

31

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

1) Your name and address: LORING & JULIE EVANS

2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.

3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: BUCKHORN ESTATES LLC

4) The drilling company who drilled your well: PHIPPS PUMPS & DRILLING

5) Year (or approximate year) your well was drilled: 1996. Water right #: don't have one only for irrigation

6) Overall well depth: 120. Depth to water: 120

7) The use(s) of your well (domestic, irrigation, etc): domestic & irrigation

8) Do you have records of the well's construction or maintenance? yes

9) Do you have records of pump maintenance and/or replacement? yes

10) Describe any change in water level or productivity in the last few years: None

11) Do you have records of water levels? yes

12) Describe any problems you have experienced with your well or pump: A portion of the pump was replaced

a. Does your well produce sand? NO. If so, how much? _____

b. Who is your pump professional? CARON PUMP

c. To what do you attribute the problems you have experienced? _____

13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: SAND SCREEN - INSTALLED BY CARON PUMP - THIS IS DESIGNED TO KEEP SAND OUT OF PUMP

14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 1-208-939-9636



Evans

Form 238-7
1995

Permit # 730318

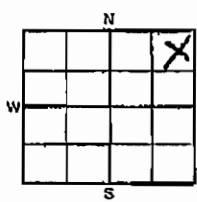
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT 094028
Use Typewriter or Ballpoint Pen

Office Use Only
Inspected by _____
Twp _____ Rge _____ Sec _____
1/4 _____ 1/4 _____ 1/4 _____
Lat: : : Long: : :

1. DRILLING PERMIT NO. 63-96-W-0292-000
Other IDWR No. _____

2. OWNER: 3900 Croft Way
Name: Loring Evans
Address: 726 Stierman Wy
City: Eagle State: ID Zip: 83616

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



Twp. 5 North or South
Rge. 1 East or West
Sec. 36 1/4 NE 1/4 NE 1/4
Gov't Lot _____ County: Ada
Lat: : : Long: : :
Address of Well Site: 116 Beacon Mt Rd
City: Eagle

LI. _____ Blk. _____ Sub. Name: Buckhorn Sub.

4. USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)
 New Well Modify Abandonment Other _____

6. DRILL METHOD
 Air Rotary Cable Mud Rotary Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Bags or Pounds	
<u>Bentonite</u>	<u>3</u>	<u>18</u>	<u>250</u>	<u>Overbore</u>

Was drive shoe used? N Shoe Depth(s) _____
Was drive shoe seal tested? N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Uner	Welded	Threaded
<u>6"</u>	<u>+1</u>	<u>108</u>	<u>74</u>	<u>Steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 4' Length of Tailpipe 1'

9. PERFORATIONS/SCREENS
 Perforations Method: Pull back
 Screens Screen Type: SS

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
<u>109</u>	<u>119</u>	<u>.025</u>		<u>5"</u>	<u>SS</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
45 ft. below ground Artesian pressure _____ lb.
Depth flow encountered N/A ft. Describe access port or control devices: _____

11. WELL TESTS:

Yield gal./min.	Drawdown	Pumping Level	Time
<u>50</u>	<u>10</u>	<u>5.5</u>	<u>1 hr.</u>

Water Temp. _____ Bottom hole temp. _____
Water Quality test or comments: N/A

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>10"</u>	<u>0</u>	<u>8</u>	<u>TOP SOIL</u>		<input checked="" type="checkbox"/>
<u>10"</u>	<u>8</u>	<u>17</u>	<u>SOIL + CLAY</u>		<input checked="" type="checkbox"/>
<u>10"</u>	<u>17</u>	<u>18</u>	<u>SOIL + CLAY</u>		<input checked="" type="checkbox"/>
<u>6"</u>	<u>18</u>	<u>52</u>	<u>CLAY</u>		<input checked="" type="checkbox"/>
<u>6"</u>	<u>52</u>	<u>75</u>	<u>Gravel + SAND</u>	<input checked="" type="checkbox"/>	
<u>6"</u>	<u>75</u>	<u>93</u>	<u>CLAY</u>	<input checked="" type="checkbox"/>	
<u>6"</u>	<u>93</u>	<u>106</u>	<u>CLAY + SAND</u>	<input checked="" type="checkbox"/>	
<u>6"</u>	<u>106</u>	<u>120</u>	<u>SAND</u>	<input checked="" type="checkbox"/>	

RECEIVED
JUL 16 1996

Department of Water Resources

RECEIVED
JUN 28 1996

WATER RESOURCES
WESTERN REGION

SEP 11 1996
Completed Depth 120 (Measurable)
Date: Started 5-15-96 Completed 5-28-96

13. DRILLER'S CERTIFICATION
I/We certify that all minimum well construction standards were complied with at the time the rig was removed.
Firm Name: Phipps Drilling Firm No. 311
Firm Official: Wesley C. Phipps Date: 6-24-96
and
Supervisor or Operator: Andy Phipps Date: 6-7-96
(Sign once if Firm Official & Operator)

FORWARD WHITE COPY TO WATER RESOURCES

32

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: DALE + MARY GASTON
2862 W Deerfield Ct, Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: KEITH P. NICHOLSON
- 4) The drilling company who drilled your well: Phipps Pump + DRILLING
- 5) Year (or approximate year) your well was drilled: 1997. Water right #: _____
- 6) Overall well depth: 120 ft. Depth to water: 53 ft.
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: _____
NOT AWARE OF ANY.
- 11) Do you have records of water levels? yes
- 12) Describe any problems you have experienced with your well or pump: NONE
- a. Does your well produce sand? NO. If so, how much? _____
- b. Who is your pump professional? _____
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____

33

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

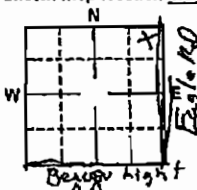
- 1) Your name and address: ROBERT H AND ALABYA WEST
5035 Willow Creek Road, Eagle, ID 83416-2011
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: WALTER STILLWELL
- 4) The drilling company who drilled your well: PHIPPS WELL DRILLING
- 5) Year (or approximate year) your well was drilled: 1984. Water right #: G3-3483 M
- 6) Overall well depth: 330'. Depth to water: 160'
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC & IRRIGATION
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? NO
- 10) Describe any change in water level or productivity in the last few years: NONE KNOWN
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: LOW POWER LEVEL FROM IDAHO POWER HAS CAUSED MY PUMP CONTROLLER TO TURN OFF THE PUMP AT TIMES. THIS HAS BEEN RECTIFIED BY ID POWER PLACING A CONTROLLER ON THE POWER LINE LAST MONTH.
 - a. Does your well produce sand? NO. If so, how much? N/A
 - b. Who is your pump professional? COONSZ DRILLING & PUMP CO. 208/939 0085
 - c. To what do you attribute the problems you have experienced? LOW POWER FROM ID POWER. THE PROBLEM HAS BEEN RECTIFIED
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____

Possible West used this info

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

State 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.

<p>1. WELL OWNER</p> <p>Name <u>John West</u></p> <p>Address _____</p> <p>Owner's Permit No. _____</p>	<p>7. WATER LEVEL</p> <p>Static water level <u>220</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature _____ OF. Quality _____</p> <p><i>Describe artesian or temperature zones below.</i></p>																																																																
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)</p>	<p>8. WELL TEST DATA</p> <p><input checked="" type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">60</td> <td></td> <td style="text-align: center;">4</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	60		4																																																										
Discharge G.P.M.	Pumping Level	Hours Pumped																																																															
60		4																																																															
<p>3. PROPOSED USE</p> <p><input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/> Municipal</p> <p><input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection</p> <p><input type="checkbox"/> Other _____ (specify type)</p>	<p>9. LITHOLOGIC LOG</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore 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>6</td> <td>0</td> <td>2</td> <td>Top Soil</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>2</td> <td>38</td> <td>SAND & Clay</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>38</td> <td>80</td> <td>SAND</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>80</td> <td>160</td> <td>SAND & Clay</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>160</td> <td>181</td> <td>SAND</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>181</td> <td>220</td> <td>SANDY Clay</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>220</td> <td>255</td> <td>SAND</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>255</td> <td>275</td> <td>Muddy SAND</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>275</td> <td>370</td> <td>Coarse SAND</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	6	0	2	Top Soil		<input checked="" type="checkbox"/>		2	38	SAND & Clay		<input checked="" type="checkbox"/>		38	80	SAND		<input checked="" type="checkbox"/>		80	160	SAND & Clay		<input checked="" type="checkbox"/>		160	181	SAND		<input checked="" type="checkbox"/>		181	220	SANDY Clay		<input checked="" type="checkbox"/>		220	255	SAND		<input checked="" type="checkbox"/>		255	275	Muddy SAND		<input checked="" type="checkbox"/>		275	370	Coarse SAND		<input checked="" type="checkbox"/>
Bore Diam.	Depth		Material	Water																																																													
	From	To		Yes	No																																																												
6	0	2	Top Soil		<input checked="" type="checkbox"/>																																																												
	2	38	SAND & Clay		<input checked="" type="checkbox"/>																																																												
	38	80	SAND		<input checked="" type="checkbox"/>																																																												
	80	160	SAND & Clay		<input checked="" type="checkbox"/>																																																												
	160	181	SAND		<input checked="" type="checkbox"/>																																																												
	181	220	SANDY Clay		<input checked="" type="checkbox"/>																																																												
	220	255	SAND		<input checked="" type="checkbox"/>																																																												
	255	275	Muddy SAND		<input checked="" type="checkbox"/>																																																												
	275	370	Coarse SAND		<input checked="" type="checkbox"/>																																																												
<p>4. METHOD DRILLED</p> <p><input type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input type="checkbox"/> Reverse rotary</p> <p><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____</p>	<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;"> <p style="font-size: 2em; font-weight: bold; letter-spacing: 5px;">RECEIVED</p> <p style="font-weight: bold;">MAY 1 1985</p> <p>Department of Water Resources Western Regional Office</p> <p style="font-size: 1.5em; font-weight: bold;">002703</p> </div>																																																																
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><u>.250</u> Inches</td> <td><u>6</u> Inches</td> <td><u>1</u> feet</td> <td><u>318</u> feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch</p> <p>Size of perforation _____ inches by _____ inches</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </tbody> </table> <p>Well screen installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Manufacturer's name <u>Cook</u></p> <p>Type <u>301</u> Model No. _____</p> <p>Diameter <u>5</u> Slot size <u>.020</u> Set from <u>320</u> feet to <u>330</u> feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>18</u> Material used in seal: <input type="checkbox"/> Cement grout</p> <p><input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Puddling clay <input type="checkbox"/> _____</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing</p> <p><input checked="" type="checkbox"/> Overbore to seal depth</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent Weld</p> <p><input type="checkbox"/> Cemented between strata</p> <p>Describe access port _____</p>		Thickness	Diameter	From	To	<u>.250</u> Inches	<u>6</u> Inches	<u>1</u> feet	<u>318</u> feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet																																
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<p>6. LOCATION OF WELL</p> <p>Sketch map location must agree with written location.</p>  <p>Subdivision Name _____</p> <p>Lot No. _____ Block No. _____</p> <p>County <u>Ada</u></p> <p><u>NE</u> & <u>NE</u> & Sec. <u>32</u>, T. <u>5</u> N/R. <u>1</u> EW.</p>	<p>10. Work started <u>4 Sept 84</u> finished <u>18 Sept 84</u></p>																																																																
<p>11. DRILLERS CERTIFICATION</p> <p>(We certify that all minimum well construction standards were complied with at the time the rig was removed.)</p> <p>Firm Name <u>Dennis Phelps</u> Firm No. <u>332</u></p> <p>Address <u>2068 Bentley</u> Date <u>12/84</u></p> <p>Signed by (Firm Official) <u>Dennis Phelps</u></p> <p style="text-align: center;">and</p> <p>(Operator) _____</p>	<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;"> <p style="font-size: 2em; font-weight: bold; letter-spacing: 5px;">RECEIVED</p> <p style="font-weight: bold;">APR 00 1985</p> <p style="font-size: 1.5em; font-weight: bold;">MICROFILMED</p> </div>																																																																

USE TYPEWRITER BALL POINT PEN

Possible West State of Idaho Department of Water Administration

RECEIVED

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Administration within 30 days after the completion or abandonment of the well.

1. WELL OWNER
Name Walt Stillwell
Address _____
Owner's Permit No. _____

2. NATURE OF WORK
 New well Deepened Replacement
 Abandoned (describe method of abandoning)

3. PROPOSED USE
 Domestic Irrigation Test Other (specify type)
 Municipal Industrial Stock Waste Disposal or Injection

4. METHOD DRILLED
 Cable Rotary Dug Other

5. WELL CONSTRUCTION
Diameter of hole 6 inches Total depth 270 feet
Casing schedule: Steel Concrete
Thickness Diameter From To
250 inches 6 inches 0 feet 260 feet
250 inches 5 inches 260 feet 265 feet
350 inches 5 inches 265 feet 270 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet

Was a packer or seal used? Yes No
Perforated? Yes No
How perforated? Factory Knife Torch
Size of perforation _____ inches by _____ inches
Number From To
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet

Well screen installed? Yes No
Manufacturer's name Johnson
Type stainless Model No. _____
Diameter 5 Slot size 35 Set from 260 feet to 265 feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? Yes No Size of gravel _____
Packed from _____ feet to _____ feet

Sealed seal depth 100 Material used in seal Cement grout
 Pudding clay Well cuttings
Sealing procedure used Cherry pit Temporary surface coating
 Overbars to seal depth

6. LOCATION OF WELL
Sketch map location must agree with written location. (2)
Subdivision Name _____
Lot No. _____ Block No. _____
County _____
SE 1/4 Sec. 29, T. 5 N., R. 1 E.

7. WATER LEVEL Department of Water Resources
Static water level 210 feet below land surface
Flowing? Yes No G.P.M. flow _____
Temperature _____ ° F. Quality _____
Artesian closed-in pressure _____ p.s.i.
Controlled by Valve Cap Plug

8. WELL TEST DATA
 Pump Bailor Other
Discharge G.P.M. Draw Down Hours Pumped
20 5 2

9. LITHOLOGIC LOG 042958
Hole Diam. Depth Material Water Yes No
6 0 3 Top soil ✓
3 3 100 Sandy clay ✓
100 115 Brown clay ✓
115 220 Sandy clay ✓
220 260 Brown & yellow sand ✓
260 270 coarse white sand ✓

10. Work started Sept finished Sept 75

11. DRILLERS CERTIFICATION
Firm Name Russell Cove Firm No. 15
Address _____ Date _____
Signed by (Firm Official) _____
and (Operator) Ben McPhain

34

QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: BARB JEKEL, 2862 W. HAVEN DR.
EAGLE, I.O., 83616
- 2) Do you have or use a ground water right in the Eagle area? YES . If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Margaret and Alfred Wolfgram
- 4) The drilling company who drilled your well: Not Known
- 5) Year (or approximate year) your well was drilled: 1980. Water ^{permit} right #: 63-9983
- 6) Overall well depth: 80'?. Depth to water: ?
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic, irrigation
- 8) Do you have records of the well's construction or maintenance? No
- 9) Do you have records of pump maintenance and/or replacement? No
- 10) Describe any change in water level or productivity in the last few years: None
- 11) Do you have records of water levels? No
- 12) Describe any problems you have experienced with your well or pump: Switching relays changed about 2 years ago
- a. Does your well produce sand? No. If so, how much? N/A
- b. Who is your pump professional? None
- c. To what do you attribute the problems you have experienced? N/A
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: ROBERT S. NICCOLLS, JR
PO Box 968 EAGLE ID 83616-0968
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: WAS A RELOCATION COMPANY; PRIOR OCCUPANT, ORIGINAL, WAS WILLIAM GRAY (BILL)
- 4) The drilling company who drilled your well: DENNIS PHIPPS WELL DRILLING
DRILLING PERMIT No 63-94-W-1063-000
- 5) Year (or approximate year) your well was drilled: 1995. Water right #: 6/25#/02 103' STATIC
- 6) Overall well depth: 360'. Depth to water: ORIG: 120' 9/12/08 112' PER IDWR
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC ONLY
- 8) Do you have records of the well's construction or maintenance? COPY, IDWR WELL DRILLER REPORT
NO KNOWN SUBSEQUENT
- 9) Do you have records of pump maintenance and/or replacement? NO
- 10) Describe any change in water level or productivity in the last few years: 6/25/02
TREASURE VALLEY PUMP MEASURED STATIC LEVEL AT 103'
- 11) Do you have records of water levels? ONLY AS SHOWN ABOVE
- 12) Describe any problems you have experienced with your well or pump: NONE
- a. Does your well produce sand? YES. If so, how much? MINIMAL, USE FILTER CLEAN EVERY FEW MONTHS
- b. Who is your pump professional? NONE
- c. To what do you attribute the problems you have experienced? —
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: I HAVE NOT PURCHASED HOME JUNE 2002
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: POSSIBLY 939-2787

WELL LOCATION

4238 N. TRIPLE RIDGE PL., EAGLE, ID

Proceed to the top of the driveway.

Stand in front of the middle of the middle garage bay door

The well is visible from the door approximately 160 feet to the northeast

GPS location

N 43° 43.771'

W 16° 19.924'

Robert S. Niccolls Jr
939-2787

07-1082 Niccols

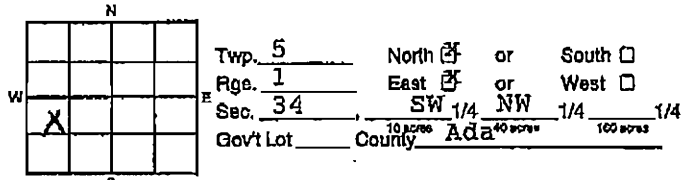
IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT 63083

Use Typewriter
or
Ball Point Pen

1. DRILLING PERMIT NO. 63 - 94 - W - 1063 - 000
Other IDWR No. _____

2. OWNER:
Name Bill Grey
Address 4238 N. Tripleridge
City Eagle State Ida Zip 83616

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



Address of Well Site same City _____
(Give at least name of road + Distance to Road or Landmark)
Lt. 15 Blk. 1 Sub. Name Tripleridge Est.

4. PROPOSED USE:
 Domestic Municipal Monitor Irrigation
 Thermal Injection Other _____

5. TYPE OF WORK
 New Well Modify or Repair Replacement Abandonment

6. DRILL METHOD
 Mud Rotary Air Rotary Cable Other _____

7. SEALING PROCEDURES

SEAL/FILTER PACK			AMOUNT	METHOD
Material	From	To	Sections or Pounds	
<u>Benite.</u>	<u>0</u>	<u>80</u>	<u>1100</u>	<u>Pum.</u>

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
<u>8</u>	<u>+1</u>	<u>207</u>	<u>250</u>	<u>Steel</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 23' Length of Tailpipe 6'

9. PERFORATIONS/SCREENS

Perforations Method _____
 Screens Screen Type 304 Stainless
See page # 2

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

10. STATIC WATER LEVEL OR ARTESIAN PRESSURE:
120 ft. below ground Artesian pressure _____ lb.
Depth flow encountered _____ ft. Describe access port or control devices: welded 4" metal plate

11. WELL TESTS:

Pump Bailer Air Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
<u>12</u>	<u>270</u>	<u>270</u>	<u>2 HR</u>

Water Temp. _____ Bottom hole temp. _____
Water Quality test or comments: _____

12. LITHOLOGIC LOG: (Describe repairs or abandonment) Water

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
<u>8</u>	<u>0</u>	<u>2</u>	<u>Top Soil</u>		<input checked="" type="checkbox"/>
	<u>2</u>	<u>20</u>	<u>SAND</u>		<input checked="" type="checkbox"/>
	<u>20</u>	<u>100</u>	<u>SANDY clay</u>		<input checked="" type="checkbox"/>
	<u>100</u>	<u>105</u>	<u>SANDY clay</u>	<input checked="" type="checkbox"/>	
	<u>105</u>	<u>145</u>	<u>clay</u>		<input checked="" type="checkbox"/>
	<u>145</u>	<u>150</u>	<u>SANDY clay</u>	<input checked="" type="checkbox"/>	
	<u>150</u>	<u>190</u>	<u>Blue sandy clay</u>		<input checked="" type="checkbox"/>
	<u>190</u>	<u>240</u>	<u>Blue sandy clay</u>	<input checked="" type="checkbox"/>	
	<u>240</u>	<u>260</u>	<u>Blue clay</u>	<input checked="" type="checkbox"/>	
	<u>260</u>	<u>270</u>	<u>Blue clay sandy</u>	<input checked="" type="checkbox"/>	
	<u>270</u>	<u>295</u>	<u>Blue clay</u>	<input checked="" type="checkbox"/>	
	<u>295</u>	<u>360</u>	<u>Blue sandy clay</u>	<input checked="" type="checkbox"/>	

RECEIVED
JAN 02 1995
Department of Water Resources
RECEIVED
MAY 05 1995
WATER RESOURCES
WESTERN REGION
MAY 08 1995

Completed Depth 360 (Measurable)
Date Started Nov. 17, 1994 Completed 3-11-95

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

Firm Name Dennis Phipps Well Drill Firm No. 332
Firm Official [Signature] Date 3-21-95
and
Supervisor or Operator [Signature] Date 3-21-95
(Sign once if Firm Official & Operator)

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: SHELBY CONRAD
2022 N. CARLE RD CARLE IN 43606
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: ROGER & BETTY MEIN
- 4) The drilling company who drilled your well: COONSE
- 5) Year (or approximate year) your well was drilled: 2002 [Ⓢ] Water right #: 63-9222 3/30/1979
63-16939 7/15/1903
- 6) Overall well depth: 115'. Depth to water: 105' → 115'
- 7) The use(s) of your well (domestic, irrigation, etc): BOTH
- 8) Do you have records of the well's construction or maintenance? YES
- 9) Do you have records of pump maintenance and/or replacement? YES
- 10) Describe any change in water level or productivity in the last few years: STATIC
WATER LEVEL HAS DECREASED
- 11) Do you have records of water levels? ONLY FROM DRILLING & CITY
OF EAGLE SURVEY
- 12) Describe any problems you have experienced with your well or pump: STATIC
WATER LEVEL HAS DECREASED
- a. Does your well produce sand? NO. If so, how much? _____
- b. Who is your pump professional? COONSE
- c. To what do you attribute the problems you have experienced? INCREASED
USE OF AQUIFER & LESS RECHARGE FROM
GROUND IRRIGATION (FLOW)
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: WELL REPLACED IN 2002
Ⓢ NEW CASING & SCREEN
- MORE CONSISTENT FLOW THRU THE YEAR.
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 938-5104

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Walter H. Meyer, Jr
4640 No. Skyline Dr., Eagle, ID 83626
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
- 4) The drilling company who drilled your well: Chester D. Kinsey
- 5) Year (or approximate year) your well was drilled: 1973. Water right #: 63-10159
- 6) Overall well depth: 258. Depth to water: 158 in 1975
- 7) The use(s) of your well (domestic, irrigation, etc): domestic + lawn + tree irrigation
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: no
noticed, but water level not measured since 1975
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: had pump
replaced 2 times - well was deepened 6 feet
in 1975 because of sand
- a. Does your well produce sand? NO. If so, how much? _____
- b. Who is your pump professional? Caron
- c. To what do you attribute the problems you have experienced? just normal use problems (parts wearing out)
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: had the well deepened
in ~~April~~ August 1975 by Jerry O'Leary because of
sand - deepened 6 feet - no sand problems since
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 208-939-0504

USE TYPEWRITER BALL POINT PEN

Meyer - original

State of Idaho Department of Water Administration

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Administration within 30 days after the completion or abandonment of the well.

Handwritten notes and signatures in the top right corner.

1. WELL OWNER
Name: Walter H. Meyer, Jr.
Address: 3031 Hillway Dr., Boise
Owner's Permit No. 573675

7. WATER LEVEL
Static water level: 188 feet below land surface
Flowing? No
Temperature: 60 F
Quality: Good

2. NATURE OF WORK
New well [checked]
Deepened []
Replacement []
Abandoned []

8. WELL TEST DATA
Galler [checked]
Discharge G.P.M.:
Draw Down:
Hours Pumped: 3 Bailed

3. PROPOSED USE
Domestic [checked]
Irrigation []
Test []
Municipal []
Industrial []
Stock []

9. LITHOLOGIC LOG 042965

Table with columns: Hole Diam., Depth (From, To), Material, Water (Yes, No). Contains handwritten entries for soil layers and depths.

4. METHOD DRILLED
Cable [checked]
Rotary []
Dug []
Other []

5. WELL CONSTRUCTION
Diameter of hole: 6 inches
Total depth: 252 feet
Casing schedule: Steel [checked]
Was a packer or seal used? No [checked]
Perforated? No [checked]
How perforated? Factory [] Knife [] Torch []
Well screen installed? No [checked]
Gravel packed? No [checked]
Surface seal? Yes [checked]
Material used in seal: Fuddling clay [checked]

6. LOCATION OF WELL
Sketch map location must agree with written location.
County: ADA
SW 1/4 SE 1/4 Sec. 30 T. 5 N. R. 1 E

10. Work started 9-7-73 finished 9-20-73

11. DRILLER'S CERTIFICATION
This well was drilled under my supervision and this report is true to the best of my knowledge.
Chesta D. Lawrence
Address: P.O. Box 14, Ada, ID 83414
Signed By: Chesta D. Lawrence Date: 4-2-79

USE-TYPEWRITER OR BALL POINT PEN

1978

State of Idaho Department of Water Administration

NOV 20 1978

Meyer

- Deepening

WELL DRILLER'S REPORT

State law requires that this report be filed with the Director, Department of Water Administration within 30 days after the completion or abandonment of the well.

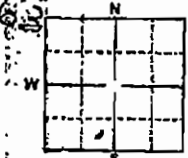
1. WELL OWNER
Name WALTER H Meyer Jr
Address RT 10 KYLINE DR. Eagle ID 83416
Owner's Permit No. _____

2. NATURE OF WORK
 New well Deepened Replacement
 Abandoned (describe method of abandoning)

3. PROPOSED USE
 Domestic Irrigation Test Other (specify type)
 Municipal Industrial Stock Waste Disposal or Injection

4. METHOD DRILLED
 Cable Rotary Dug Other

5. WELL CONSTRUCTION
Diameter of hole 6 inches Total depth 258 feet
Casing schedule: Steel Concrete
Thickness Diameter From To
250 inches 6 inches 0 feet 258 feet
____ inches _____ inches _____ feet _____ feet
____ inches _____ inches _____ feet _____ feet
____ inches _____ inches _____ feet _____ feet
____ inches _____ inches _____ feet _____ feet
Was a packer or seal used? Yes No
Perforated? Yes No
How perforated? Factory Knife Torch
Size of perforation _____ inches by _____ inches
Number From To
____ perforations _____ feet _____ feet
____ perforations _____ feet _____ feet
____ perforations _____ feet _____ feet
Well screen installed? Yes No
Manufacturer's name _____
Type _____ Model No. _____
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Gravel packed? Yes No Size of gravel _____
Placed from _____ feet to _____ feet
Surface seal depth ? Material used in seal Cement grout
 Pudding clay Well cuttings
Sealing procedure used Sherry pit Temporary surface casing
 Overbore to seal depth

6. LOCATION OF WELL
Sketch map location must agree with written location.

Subdivision Name Skyline Sub
Lot No. 7 Block No. 7
County ADA
S. 4 X 6 E X Sec. 30, T. 5 N, R. 1 E

7. WATER LEVEL
Static water level 158 feet below land surface
Flowing? Yes No G.P.M. flow _____
Temperature _____ ° F. Quality _____
Artesian closed-in pressure _____ p.s.i.
Controlled by Valve Cap Plug

8. WELL TEST DATA
 Pump Bailor Other
Discharge G.P.M. 25 Draw Down 78' Hours Pumped 19

9. LITHOLOGIC LOG
042961
Hole Diam. Depth From To Material Water Yes No
6 249 258 0 249 258 Blue shale /
6 258 258 0 258 258 Orange clay /
6 258 258 0 258 258 White sand /

10. Work started 8/14/75 finished 8/2/75

11. DRILLERS CERTIFICATION
Firm Name Jerry O. Loney Firm No. 250
Address RT 10 KYLINE DR. Eagle ID 83416 Date 8/4/75
Signed by (Firm Official) Jerry O. Loney
and Jerry O. Loney
(Operator)

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

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: ERIC C. & JOYCE E. LEIGH, 2257 PARK LANE, EAGLE, IDAHO 83616-3339
- 2) Do you have or use a ground water right in the Eagle area? YES. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: N/A
- 4) The drilling company who drilled your well: COONSE WELL DRILLING, EAGLE, ID.
- 5) Year (or approximate year) your well was drilled: 4-24-90 Water right #: IS PENDING -
EXISTING WATER RIGHT IS BY STATUTE -
- 6) Overall well depth: 108'. Depth to water: 12' DRILLING PERMIT #
03-90-2-081
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic & Domestic irrigation
- 8) Do you have records of the well's construction or maintenance? YES
- 9) Do you have records of pump maintenance and/or replacement? YES
- 10) Describe any change in water level or productivity in the last few years: APPEARS TO
BE A CONSISTANT WATER LEVEL
- 11) Do you have records of water levels? NONE MEASURED
- 12) Describe any problems you have experienced with your well or pump: -ONLY A
CRACK IN PITLESS ADAPTOR THAT REQUIRED REPLACEMENT
 - a. Does your well produce sand? NO. If so, how much? N/A
 - b. Who is your pump professional? COONSE WELL DRILLING
 - c. To what do you attribute the problems you have experienced? FAULTY BRONZE
CASTING FOR PITLESS ADAPTOR
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 1-800-939-1065 - NOTE: I AM NOT REQUESTING THAT THIS
INSPECTION BE MADE, BUT IF HYDRO LOGIC, INC NEEDS TO INSPECT
OUR WELL WE ARE AGREEABLE TO SUCH

Leigh

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

State 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.

<p>1. WELL OWNER</p> <p>Name <u>ERIC C & JOYCE LEIGH</u></p> <p>Address <u>10022 RIPLEY ST BOISE, IDA</u></p> <p>Owner's Permit No. <u>63-90-Z-081</u></p>	<p>7. WATER LEVEL</p> <p>Static water level <u>12</u> feet below land surface.</p> <p>Flowing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No G.P.M. flow _____</p> <p>Artesian closed-in pressure _____ p.s.i.</p> <p>Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug</p> <p>Temperature <u>54</u> OF. Quality <u>GOOD</u></p> <p><i>Describe artesian or temperature zones below.</i></p>																																																																																														
<p>2. NATURE OF WORK</p> <p><input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement</p> <p><input type="checkbox"/> Well diameter increase</p> <p><input type="checkbox"/> Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)</p>	<p>8. WELL TEST DATA</p> <p><input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Discharge G.P.M.</th> <th>Pumping Level</th> <th>Hours Pumped</th> </tr> <tr> <td style="text-align: center;">45</td> <td style="text-align: center;">75</td> <td style="text-align: center;">1</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Discharge G.P.M.	Pumping Level	Hours Pumped	45	75	1																																																																																								
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<p>3. PROPOSED USE</p> <p><input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/> Municipal</p> <p><input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection</p> <p><input type="checkbox"/> Other _____ (specify type)</p>	<p>9. LITHOLOGIC LOG 70833</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Bore 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>8</td> <td>0</td> <td>3</td> <td>TOP SOIL</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>3</td> <td>18</td> <td>BROWN CLAY</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>18</td> <td>26</td> <td>REDISH CLAY</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>6</td> <td>26</td> <td>35</td> <td>SAND & GRAVEL</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td></td> <td>35</td> <td>48</td> <td>SAND</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td></td> <td>48</td> <td>62</td> <td>BROWN CLAY</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>62</td> <td>66</td> <td>SAND</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td></td> <td>66</td> <td>63</td> <td>SAND</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td></td> <td>63</td> <td>71</td> <td>BROWN CLAY</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>71</td> <td>74</td> <td>SAND</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td></td> <td>74</td> <td>85</td> <td>BROWN CLAY</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>85</td> <td>88</td> <td>SAND</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td></td> <td>88</td> <td>95</td> <td>BROWN CLAY</td> <td></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>95</td> <td>108</td> <td>SAND</td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> </tbody> </table>	Bore Diam.	Depth		Material	Water		From	To	Yes	No	8	0	3	TOP SOIL		<input checked="" type="checkbox"/>		3	18	BROWN CLAY		<input checked="" type="checkbox"/>		18	26	REDISH CLAY		<input checked="" type="checkbox"/>	6	26	35	SAND & GRAVEL	<input checked="" type="checkbox"/>			35	48	SAND	<input checked="" type="checkbox"/>			48	62	BROWN CLAY		<input checked="" type="checkbox"/>		62	66	SAND	<input checked="" type="checkbox"/>			66	63	SAND	<input checked="" type="checkbox"/>			63	71	BROWN CLAY		<input checked="" type="checkbox"/>		71	74	SAND	<input checked="" type="checkbox"/>			74	85	BROWN CLAY		<input checked="" type="checkbox"/>		85	88	SAND	<input checked="" type="checkbox"/>			88	95	BROWN CLAY		<input checked="" type="checkbox"/>		95	108	SAND	<input checked="" type="checkbox"/>	
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<p>4. METHOD DRILLED</p> <p><input type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input type="checkbox"/> Reverse rotary</p> <p><input checked="" type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____</p>	<p>RECEIVED APR 30 1990 Department of Water Resources Western Regional Dir.</p>																																																																																														
<p>5. WELL CONSTRUCTION</p> <p>Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Thickness</th> <th>Diameter</th> <th>From</th> <th>To</th> </tr> <tr> <td><u>2.50</u> Inches</td> <td><u>6</u> Inches</td> <td><u>1</u> feet</td> <td><u>96</u> feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ Inches</td> <td>_____ Inches</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </table> <p>Was casing drive shoe used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was a packer or seal used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input type="checkbox"/> Gun</p> <p>Size of perforation _____ inches by _____ inches</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Number</th> <th>From</th> <th>To</th> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> <tr> <td>_____ perforations</td> <td>_____ feet</td> <td>_____ feet</td> </tr> </table> <p>Well screen installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Manufacturer's name <u>Cook</u></p> <p>Type <u>STAINLESS STEEL</u> Model No. <u>304</u></p> <p>Diameter <u>5</u> Slot size <u>20</u> Set from <u>98</u> feet to <u>103</u> feet</p> <p>Diameter _____ Slot size _____ Set from _____ feet to _____ feet</p> <p>Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____</p> <p>Placed from _____ feet to _____ feet</p> <p>Surface seal depth <u>26</u> Material used in seal: <input type="checkbox"/> Cement grout</p> <p><input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Puddling clay <input type="checkbox"/> _____</p> <p>Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing</p> <p><input checked="" type="checkbox"/> Overbore to seal depth <input type="checkbox"/> Solvent</p> <p>Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent</p> <p>Weld _____</p> <p><input type="checkbox"/> Cemented between strata</p> <p>Describe access port _____</p>	Thickness	Diameter	From	To	<u>2.50</u> Inches	<u>6</u> Inches	<u>1</u> feet	<u>96</u> feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	_____ Inches	_____ Inches	_____ feet	_____ feet	Number	From	To	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	_____ perforations	_____ feet	_____ feet	<p>RECEIVED MAY 02 1990 Department of Water Resources</p>																																																														
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<p>6. LOCATION OF WELL</p> <p>Sketch map location <u>must</u> agree with location _____</p> <p style="text-align: center;">MICROFILMED</p> <p>Subdivision Name _____</p> <p style="text-align: center;">JUN 10 1991</p> <p>Lot No. _____ Block No. _____</p> <p>County <u>ADA</u></p> <p>SE <input type="checkbox"/> NW <input type="checkbox"/> Sec. <u>1</u> T. <u>4</u> N <input type="checkbox"/> S <input type="checkbox"/> R. <u>1</u> W <input checked="" type="checkbox"/> E <input type="checkbox"/></p>	<p>RECEIVED APR 26 1990 Department of Water Resources</p>																																																																																														
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<p>6. LOCATION OF WELL</p> <p>Sketch map location <u>must</u> agree with location _____</p> <p>Subdivision Name _____</p> <p>Lot No. _____ Block No. _____</p> <p>County <u>ADA</u></p> <p>SE <input type="checkbox"/> NW <input type="checkbox"/> Sec. <u>1</u> T. <u>4</u> N <input type="checkbox"/> S <input type="checkbox"/> R. <u>1</u> W <input checked="" type="checkbox"/> E <input type="checkbox"/></p>	<p>11. DRILLERS CERTIFICATION</p> <p>I/We certify that all minimum well construction standards were complied with at the time the rig was removed.</p> <p>Firm Name <u>COOSE Well Drilling</u> No. <u>409</u></p> <p>Address <u>EAGLE, IDA</u> Date <u>4-24-90</u></p> <p>Signed by (Firm Official) <u>Jerry E. Coose</u></p> <p>and _____</p> <p>(Operator)</p>																																																																																														

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: George W Keyes
3898 N. Saddeman PL. Eagle ID 83611
- 2) Do you have or use a ground water right in the Eagle area? Yes If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: _____
DONNA MACK
- 4) The drilling company who drilled your well: ?
- 5) Year (or approximate year) your well was drilled: 1992 Water right #: ?
- 6) Overall well depth: ? Depth to water: ?
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic
- 8) Do you have records of the well's construction or maintenance? NO
- 9) Do you have records of pump maintenance and/or replacement? NO
- 10) Describe any change in water level or productivity in the last few years: no
essential change
- 11) Do you have records of water levels? NO
- 12) Describe any problems you have experienced with your well or pump: NO
 - a. Does your well produce sand? Yes If so, how much? Filter change yearly
 - b. Who is your pump professional? _____
 - c. To what do you attribute the problems you have experienced? _____
?
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 209 938 0574

Possible Keys

Form 2387
8/90

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

USE TYPEWRITER OR
BALLPOINT PEN

State 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.

1. WELL OWNER
Name Erwin Westerman
Address 944 W. Halstead Dr Boise ID
Drilling Permit No. 63-91-W-240
Water Right Permit No. _____

2. NATURE OF WORK
 New well Deepened Replacement
 Well diameter increase
 Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)

3. PROPOSED USE
 Domestic Irrigation Test Municipal
 Industrial Stock Waste Disposal or Injection
 Other _____ (specify type)

4. METHOD DRILLED
 Rotary Air Hydraulic Reverse rotary
 Cable Dug Other _____

5. WELL CONSTRUCTION
Casing schedule: Steel Concrete Other _____
Thickness _____ Diameter _____ From _____ To _____
250 inches 8 inches + 1 feet 135 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
Was casing drive shoe used? Yes No
Was a packer or seal used? Yes No
Perforated? Yes No
How perforated? Factory Knife Torch Gun
Size of perforation 3/16 inches by 3 inches
Number _____ From _____ To _____
480 perforations 184 feet 228 feet
156 perforations 131 feet 144 feet
_____ perforations _____ feet _____ feet
Well screen installed? Yes No
Manufacturer's name _____
Type _____ Model No. _____
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Gravel packed? Yes No Size of gravel _____
Placed from _____ feet to _____ feet
Surface seal depth 18 Material used in seal: Cement grout
 Bentonite Puddling clay _____
Sealing procedure used: Slurry pit Temp. surface casing
 Overbore to seal depth
Method of joining casing: Threaded Welded Solvent
Weld _____
 Cemented between strata
Describe access port _____

6. LOCATION OF WELL
Sketch map location must agree with written location
N
W X E
S
County Ada
Subdivision Name Hasan Estates
Lot No. 10 Block No. 1
N S E W
SE 1/4 NW 1/4 Sec. 34, T. 5 S. R. 1 W

7. WATER LEVEL
Static water level 90 feet below land surface.
Flowing? Yes No G.P.M. flow _____
Artesian closed-in pressure _____ p.s.i.
Controlled by: Valve Cap Plug
Temperature _____ of. Quality _____
Describe artesian or temperature zones below.

8. WELL TEST DATA
 Pump Bailor Air Other _____
Discharge G.P.M. 50 Pumping Level _____ Hours Pumped 5

9. LITHOLOGIC LOG

Bore Diam.	Depth		Material	Water	
	From	To		Yes	No
8	0	2	Top Soil		X
	2	20	SAND		X
	30	63	SAND + clay		X
	63	90	Blue clay		X
	90	118	Blue clay	X	
	118	130	SAND + Blue clay	X	
	130	160	Blue clay		X
	160	170	Blue clay	X	
	170	188	Blue clay		X
	188	200	Blue clay	X	
	200	215	Blue clay		X
	215	220	Blue clay	X	
	220	228	Blue clay		X

10. Work started 11 July 91 finished 22 Aug 91

11. DRILLERS CERTIFICATION
I/We certify that all minimum well construction standards were
compilled with at the time the rig was removed.
Firm Name Dennis Phipps Firm No. 332
Address Meridian ID Date 1 Sept 91
Signed by (Firm Official) Dennis Phipps
and
(Operator) Mark Phipps

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

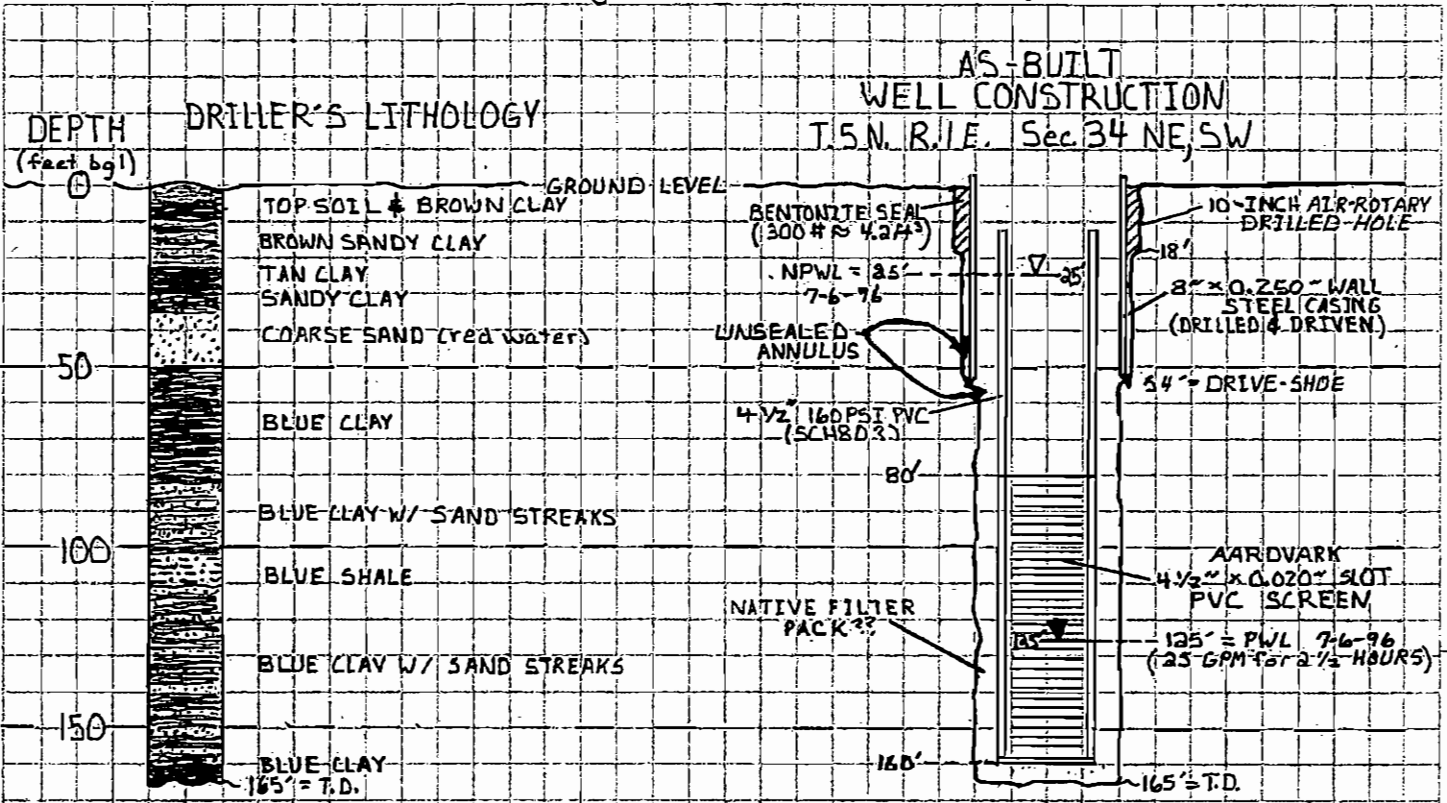
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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: STEPHEN DICK 3675 N. SANDLEMAN PLACE, EAGLE, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? Y. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: WARREN RANAL - IRRIGATION, DOMESTIC
- 4) The drilling company who drilled your well: COONKE
- 5) Year (or approximate year) your well was drilled: 96. Water right #: _____
- 6) Overall well depth: 160. Depth to water: 35
- 7) The use(s) of your well (domestic irrigation, etc): _____
- 8) Do you have records of the well's construction or maintenance? Y
- 9) Do you have records of pump maintenance and/or replacement? Y
- 10) Describe any change in water level or productivity in the last few years: SAME
- 11) Do you have records of water levels? N - VISUAL PERIODIC INSPECTION.
- 12) Describe any problems you have experienced with your well or pump: LOST ONE PUMP - 6 YRS AGO
- a. Does your well produce sand? N. If so, how much? _____
- b. Who is your pump professional? COONKE
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 870-3990

SUBJECT Dick (Pennisi) Domestic Well
3675 N. Saddleman Pl., Eagle, ID

DATE 6-3-2009
SHEET 1 OF 1



SCALE
VERTICAL 1" = 50'
HORIZONTAL

- Well constructed July 6, 1996 by Coonse Well Drilling.
- Non-Pumping Water Level (NPWL) was 25 feet below ground.
- Pumping Water Level (PWL) was 125 feet below ground after pumping at 25 gallons/minute for 2 1/2 hours.
- Specific capacity = 0.25 gpm/foot
- Water temperature = 55°F.
- Information shown on this sketch is from the Driller's Report on file at Idaho Department of Water Resources.

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: B.E. McDONALD 3800 N SADDLEMAN PL
EAGLE, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? Yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: RAY BRUBAKER
- 4) The drilling company who drilled your well: DENNIS PHIPPS
- 5) Year (or approximate year) your well was drilled: 1991. Water right #: UNK
- 6) Overall well depth: 191'. Depth to water: 40
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? yes
- 10) Describe any change in water level or productivity in the last few years: UNK
- 11) Do you have records of water levels? yes
- 12) Describe any problems you have experienced with your well or pump:
Pump Replaced 1997 and 2005
 - a. Does your well produce sand? yes. If so, how much? _____
 - b. Who is your pump professional? CAEDON PUMP
 - c. To what do you attribute the problems you have experienced? SAND
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939 4094 / 861 0765

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Minkiewicz, Vince & Patricia
3047 W. Deerfield Ct Eagle Id 83616
- 2) Do you have or use a ground water right in the Eagle area? no. If yes, please ~~continue~~. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: NA
- 4) The drilling company who drilled your well: _____
- 5) Year (or approximate year) your well was drilled: 1998. Water right #: NA
- 6) Overall well depth: 123 ft. Depth to water: 51 ft.
- 7) The use(s) of your well (domestic, irrigation, etc): domestic
- 8) Do you have records of the well's construction or maintenance? yes
- 9) Do you have records of pump maintenance and/or replacement? no NA
- 10) Describe any change in water level or productivity in the last few years: NA
- 11) Do you have records of water levels? yes - some recent ones
- 12) Describe any problems you have experienced with your well or pump: silt & sand which may be normal in this area
- a. Does your well produce sand? yes. If so, how much? more than I would like
- b. Who is your pump professional? SOS Well Drilling & Pump Co.
- c. To what do you attribute the problems you have experienced? Meridian
I've been told some sand is normal in this area
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: NA
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-5642

EXHIBIT

A

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Richard A & Dr. Dessal Lagerstrom
1262 W. Beaconlight Rd. Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? yes. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: Rudy Wolf
- 4) The drilling company who drilled your well: _____
- 5) Year (or approximate year) your well was drilled: 1978. Water right #: A 63 18350
- 6) Overall well depth: 150'. Depth to water: _____
- 7) The use(s) of your well (domestic, irrigation, etc): domestic, ~~and~~ 8 head livestock
- 8) Do you have records of the well's construction or maintenance? no
- 9) Do you have records of pump maintenance and/or replacement? '91, '92, '93 - Burgess Pump
- 10) Describe any change in water level or productivity in the last few years: _____
- 11) Do you have records of water levels? no
- 12) Describe any problems you have experienced with your well or pump: foot valve replacement (1991-1993)
 - a. Does your well produce sand? some. If so, how much? very little - table spoon/sec.
 - b. Who is your pump professional? Burgess Pump
 - c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: _____
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____

EXHIBIT

A

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: THOMAS + ANNE RITTER
- 2) Do you have or use a ground water right in the Eagle area? If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: LANE - HE PURCHASED FROM HAIGER. WELL WAS DRILLED UNDER NAME TED NEEL (SEE ATTACHED)
- 4) The drilling company who drilled your well: SEE ATTACHED
- 5) Year (or approximate year) your well was drilled: UNK. Water right #: 63-19190 SEE PROTEST
- 6) Overall well depth: 150. Depth to water: 84.2 FT (9-11-08)
- 7) The use(s) of your well (domestic, irrigation, etc): DOMESTIC & LIVESTOCK
- 8) Do you have records of the well's construction or maintenance? SEE ATTACHED
- 9) Do you have records of pump maintenance and/or replacement? I MAY HAVE
- 10) Describe any change in water level or productivity in the last few years: SAND + PUMP ISSUES.
- 11) Do you have records of water levels? IDWR HAS BEGUN MONITORING (6-4-08 86.5 DTW ; 9-11-08 84.2 DTW)
- 12) Describe any problems you have experienced with your well or pump: SAND, PRESSURE TANK REPLACED TWICE, PUMP REPLACED @ 1993
- a. Does your well produce sand? YES. If so, how much? INTERMITTENT
- b. Who is your pump professional? BURGESS
- c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: NO
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: 939-1760

USE TYPEWRITER OR
BALL POINT PEN

#20

State of Idaho
Department of Water Resources

WELL DRILLER'S REPORT

State 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.

1. WELL OWNER

Name Ted Neal
Address R1 Egel Idaho
Owner's Permit No. _____

7. WATER LEVEL

Static water level 80 feet below land surface
Flowing? Yes No G.P.M. flow 2 1/2
Temperature _____ ° F. Quality Good 10 grains Gallon
Artesian closed-in pressure _____ p.s.i.
Controlled by Valve Cap Plug

2. NATURE OF WORK

New well Deepened Replacement
 Abandoned (describe method of abandoning)

8. WELL TEST DATA

Discharge G.P.M.	Draw Down	Hours Pumped
<u>6.0</u>	<u>Not Known</u>	<u>6</u>

3. PROPOSED USE

Domestic Irrigation Test Other (specify type)
 Municipal Industrial Stock Waste Disposal or Injection

9. LITHOLOGIC LOG

Hole Diam.	Depth		Material	Water Yes
	From	To		
6"	18'	18'	Sandy silt	
6"	18'	35'	Sandy clay layer	
6"	35'	86'	Coarse sand	<input checked="" type="checkbox"/>
6"	86'	102'	Clay	
6"	102'	127'	Silt	<input checked="" type="checkbox"/>
6"	127'	146'	Clay	
6"	146'	150'	Bottom sand	<input checked="" type="checkbox"/>
Well Completed August 1968				

4. METHOD DRILLED

Cable Rotary Dug Other

5. WELL CONSTRUCTION

Diameter of hole 6" inches Total depth 150 feet
Casing schedule: Steel Concrete
Thickness Diameter From To
0.50 inches 6.5R inches +1 feet 144 feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet
_____ inches _____ inches _____ feet _____ feet

Was casing drive shoe used? Yes No
Was a packer or seal used? Yes No
Perforated? Yes No
How perforated? Factory Knife Torch
Size of perforation _____ inches by _____ inches
Number From To
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet
_____ perforations _____ feet _____ feet

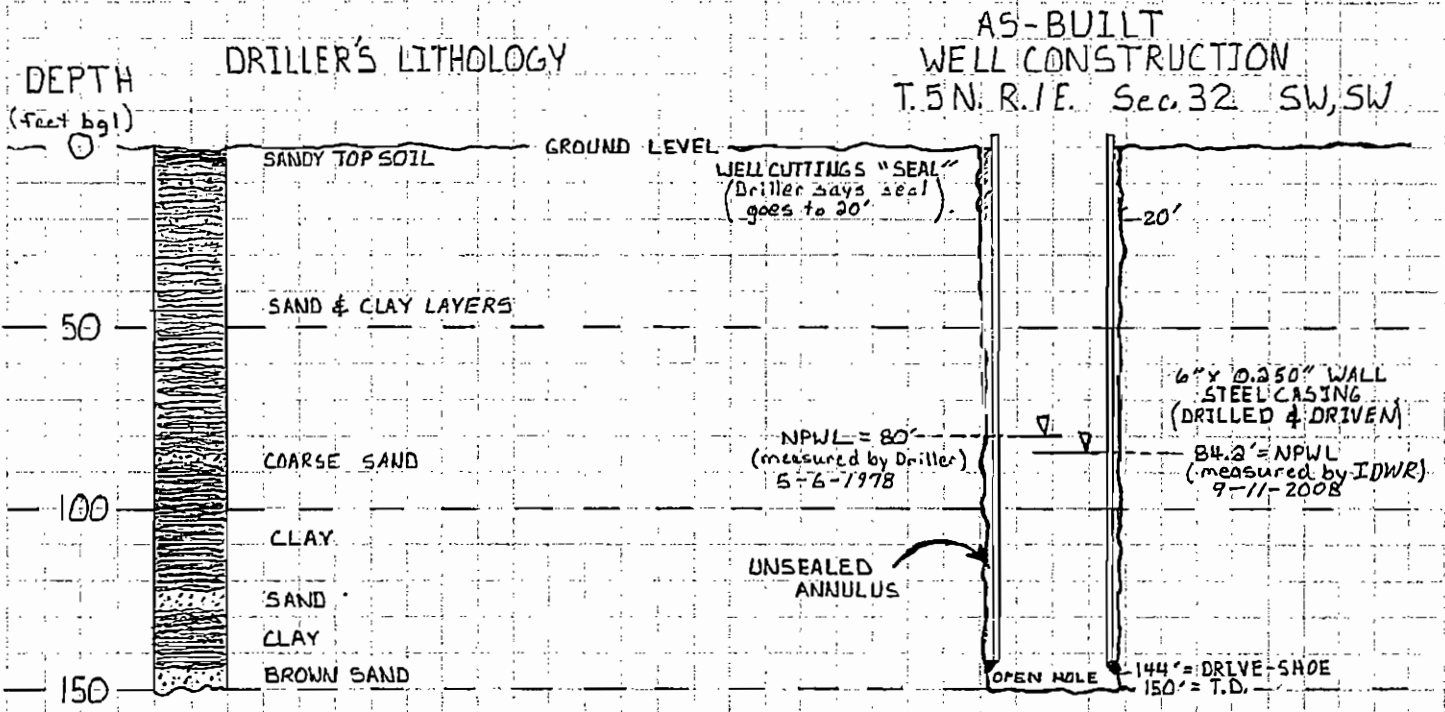
Well screen installed? Yes No
Manufacturer's name _____
Type _____ Model No. _____
Diameter _____ Slot size _____ Set from _____ feet to _____ feet
Diameter _____ Slot size _____ Set from _____ feet to _____ feet

Gravel packed? Yes No Size of gravel _____
Placed from _____ feet to _____ feet

Surface seal depth 20 Material used in seal Cement grout

SUBJECT Ritter Domestic Well
1270 W. Beacon Light Rd.

DATE 6/4/2009
SHEET 1 OF 1



- Well constructed May 6, 1978 by:
David Knie Well Drilling
- Non-pumping Water Level (NPWL) was
 - 80' below ground on 5-6-78 as measured by driller.
 - 84.2' below measure point on 9-11-08 as measured by Idaho Department of Water Resources (IDWR).
- Pumping water level was not reported.
- Water chemistry by driller:
pH = 7; good; 10 grain hardness.
- Information shown is from Driller's Report on file at IDWR.

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QUESTIONNAIRE FOR PROTESTANTS TO M3 EAGLE WATER RIGHT APPLICATION

- 1) Your name and address: Linda Burke / Kevin Culligan
256 E. Beacon Light Rd. Eagle, ID 83616
- 2) Do you have or use a ground water right in the Eagle area? No. If yes, please continue. If you have no information on a particular item, just say so.
- 3) If the well and/or water right was included when you bought your property, please name the person from whom you purchased: well included with property purchase from Steve Dunham
- 4) The drilling company who drilled your well: unknown
- 5) Year (or approximate year) your well was drilled: unknown Water right #: _____
- 6) Overall well depth: 90 ft Depth to water: 70 ft
- 7) The use(s) of your well (domestic, irrigation, etc): Domestic
- 8) Do you have records of the well's construction or maintenance? No
- 9) Do you have records of pump maintenance and/or replacement? No (pump replaced 4 years ago)
- 10) Describe any change in water level or productivity in the last few years: No
- 11) Do you have records of water levels? No
- 12) Describe any problems you have experienced with your well or pump: pump wore out
 - a. Does your well produce sand? Yes. If so, how much? minimal
 - b. Who is your pump professional? Randy Morrison (H.H. Heston Drilling)
 - c. To what do you attribute the problems you have experienced? _____
- 13) If you have had your well deepened or a screen or casing inserted after the well was drilled, please provide the details as to when, who did the work, what the work entailed, and how this changed the well's performance: N/A
- 14) If you are willing to have your well located (via GPS), measured, and inspected by Hydro Logic, Inc., please provide a phone number where you can be reached during the week: _____

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M3 Protestants All Well Data

=no well log
 =google earth
 =on site data

Name (last)	Name (first)	Well Location Info.	City	Google E Photo?	Google Elev.	Lat.	Long.	Northing	Easting	Water Right No	Priority Date	Well Driller's Report No.	Drilling Permit No: 63-	Well Tag No.	Log obtai ned	depth	Screen top	Screen bottom	DTW when drilled	date drilled
Rapp	Ron and Cheryl	3954 W. Deerfield Dr.	Eagle	yes	2591	43 43 43.40	116 24 08.10	15885522.4470	1798362.3230						no	65?				2000?
Franden	Janet and John	2300 E. Buckskin Ct.	Eagle	yes	2663	43 43 30.85	116 19 32.38	15884407.4820	1818610.0590	63-32586, 63-32588, 63-16591(split), 63-2963(split), 63-32586, 63-32587, 63-2284, 63-48591		62104	97-W-0537-000	D0001201	yes	142	82	142	31	1997
Thornton	John	5264 N. Sky High Lane	Eagle	yes	2835	43 44 34.31	116 22 25.50	15890730.9790	1805854.0560			835311	0-0-4-1676		yes	500	495	500	292	8/15/2005
Collett	David and Linda	927 E. Valli Hi Ln	Eagle	yes	2677	43 43 32.44	116 20 32.91	15884532.7210	1814165.7200			832639	389-94		yes	206	166	206	103	4/18/2005
Masner	Morgan and Julie	4325 W Gray Teal Ct.	Eagle	yes	2578	43 43 45.24	116 24 28.8	15885697.7810	1796841.6470			60930	98-W-0142-000	D0001815	yes	103	98	103	25	3/18/1998
Purvis	Steven	3939 Brookside Ln	Eagle	yes	2674	43 43 39.93	116 19 11.89	15885338.8140	1820106.5400	63-10893	1974, 1981	85254			yes	46	22	48	20	2/25/1981
Richardson	Bruce and Jean	3171 W. Deerfield Ct.	Eagle	yes	2600	43 43 38	116 23 35.9	15884993.0520	1800729.7510						no					6/30/1905
Lyons	Robert and Joan	351 Knob Hill	Eagle	yes	2805	43 44 23.22	116 21 24.89	15889642.5530	1810310.3970	63-08348	9/5/1976	46600			yes	320	310	320		9/15/1976
Thompson/Petrovsky	Carol/John	4831 Willow Crk Rd	Eagle	yes	2755	43 44 20.83	116 21 27.05	15889399.4160	1810153.7610	63-03483E	1/7/1966	828530			yes	307	300	305	221	05 1975
Banducci	Jim	2990 Holl Dr	Eagle	yes	2642	43 43 20.36	116 20 8.62	15883324.2450	1815958.4550			91664	96-W-0221-200		yes	240	179	open hole	65	5/18/1996
Jones	Trish and Barry	4032 N. Croft Pl.	Eagle	yes	2612	43 43 43.04	116 23 40.5	15885500.7130	1800388.3840						no					
Randall	Sherri	278 E. Beacon Light	Eagle	yes	2638	43 43 18.83	116 21 2.00	15883138.3340	1812041.2450	63-12015		724936	91-W-464		yes	154	149	154	60	12/10/1991
Van Camp	Bruut and Rebecca	Buckhorn Estates Sub #2, 3800 N. Croft Way	Eagle	yes	2602	43 43 34.60	116 23 40.27	15884646.5710	1800411.5060			766925		D0015704	yes	147	137	147	32	10/2/2000
Tarbet	Sally and Craig	N. Willow Creek Rd.	Eagle	unsure	3044	43 46 41.26	116 20 3.71	15903661.5670	1816155.5110	63-10376					yes	112	107	112	70	9/11/1985
Adkins	Lorn and Laurie	4440 N Croft Pl	Eagle	yes	2620	43 43 56.5	116 23 36.43	15886865.2680	1800677.1460			57537	96-w-0670-000		yes	123	118	open hole	29	9/17/1996
Jordan	Karen and Lyle	3417 N Croft Way	Eagle	yes	2593	43 43 21.9	116 23 49.38	15883356.2510	1799752.1700			64269	95-W-0709-000		yes	98	98	open hole	27	9/13/1995
Groothuis	Marion and Judy	3490 N Saddleman Pl 5N/1E 34 se/4 of sw/4	Eagle	yes	2650	43 43 24.09	116 19 34.68	15883721.8880	1818446.7940	63-11847, 63-11697, 63-02284, 63-02903	3/6/1992	725624	92-W-295		yes	127	47	127	10	5/25/1992
Glivar	Daniel and Cheryl	Buckhorn Estates Sub #2, 3426 N. Croft Way	Eagle	yes	2604	43 43 23.53	116 23 40.44	15883526.0170	1800407.2120			49071	95-0222-000		yes	125	119	124	30	4/7/1995
Iazetta	Vincent	Buckhorn Estates Sub #3, 4243 N. Croft Place	Eagle	yes	2616	43 43 48.38	116 23 43.89	15886039.3920	1800135.6210			59721	99 W-0514-000	D0009844	yes	168	155	168	30	7/12/1999
McMurray	Michael and Martha	902 W Stillwell Rd / 5N/1E 29 se4 of sw/4	Eagle	yes	2708	43 44 15.0	116 21 56.25	15888792.8150	1808015.4160	63-0301m, 63-03483n	1/3/1955, 1/7/1966	725450	92-W-136		yes	215	213	open hole	147	11/30/1991
Head	David	855 Stillwell Dr / 5N/1E 29 se4 of sw/4	Eagle	yes	2709	43 44 15	116 21 56	15888792.9560	1808033.7630	63-03483A	1/7/1966	826617			yes	221	216	221	140	12/23/1980
Watkins	Charles	1313 W. Meander Dr.	Eagle	yes	2647	43 43 36.15	116 22 11.98	15884851.7540	1806890.9190						no					
Evans	Loring and Julie	3900 Croft Way	Eagle	yes	2593	43 43 38.43	116 23 43.05	15885032.7400	1800204.6220			730348	96-W-0292		yes	120	109	119	45	5/28/1996
Gaston	Dale and Mary	2862 W. Deerfield Ct.	Eagle	yes	2616	43 43 36.05	116 23 11.61	15884808.8030	1802514.1030						no	120				53
West	Robert and Alasya	5035 Willow Creek Rd.	Eagle	yes	2780	43 44 26.09	116 21 23.70	15889933.7220	1810395.4690	63-3483m	1/7/1966	2703			poss.	330	330	320	220	9/18/1984
Jekel/Tiffany	Barb/Bill	2862 Haven Dr (original owner: Connie Murry)	Eagle	yes	2650	43 44 0.81	116 23 18.02	15887311.4410	1802025.1080	63-9983	9/17/2003				no	80?				1980
Niccolls	Robert and La Vonne	none listed (not in Dex, Ph book or super pages)	Eagle	yes	2787	43 43 46.26	116 19 55.44	15885953.5200	1816904.8250			63083	94-w-1063-000		yes	360	184	348	120	3/11/1995
Conrad	Shelby and Angela	2022 N. Eagle Rd / 4N/1E 4 nw/4 sw/4	Eagle	yes	2603	43 42 48.36	116 21 11.66	15880048.7350	1811356.1970	63-16939, 63-9222	7/15/1903, 3/30/1979	789382	0-0-2-9009		yes	115	105	115	32.00	12/6/2002
Meyer	Walter	4640 N. Skyline Dr.	Eagle	yes	2713	43 44 12.03	116 22 52.69	15888460.8880	1803875.6610	63-10159		042965, 829825			yes	258	253	open hole	158	8/2/1975
Leigh	Eric and Joyce	2257 N Park Ln	Eagle	yes	2561	43 42 56.33	116 24 20.36	15880751.7330	1797496.6180	63-33034	24/1990, 04/10/	723571	90-z-081		yes	108	98	103	12	4/24/1990
Keys	George	3898 N. Saddleman Pl.	Eagle	yes	2754	43 43 38.49	116 19 37.01	15885178.0120	1818263.9260						no					
Dick	Stephen	3675 N. Saddleman Pl.	Eagle	yes	2670	43 43 29.97	116 19 42.56	15884312.3460	1817863.5420			730491	96-W-0451-000		yes	160	80	160	25	7/6/1996
McDonald	G.E.	3800 N. Saddleman Pl.	Eagle	yes	2679	43 43 34.84	116 19 31.81	15884811.6760	1818648.6120			724725	91-w-260		yes	220	119	open hole	40	8/24/1991
Minkiewicz	Vincent and Patricia	Buckhorn Estates Sub #4, 3047 W. Deerfield Ct.	Eagle	yes	2613	43 43 37.12	116 23 27.28	15884908.6220	1801363.1150			732562	98-w-0681-000	D0007515	yes	123	99	123	43	9/22/1998
Lagerstrom	Richard and Dessa	1262 W. Beacon Light Rd / 4N/1W 5 nw/4 of se/4	Eagle	yes	2624	43 43 20.86	116 22 13.5	15883303.3110	1806791.1040	A63-18351, A63-18350	7/28/1975	781965			yes	150	144	open hole	80	5/6/1978
Ritter	Thomas and Anne	1270 W Beacon Light Rd / 5N/1E 32 sw/4 of sw/4	Eagle	yes	2624	43 43 20.86	116 22 13.5	15883303.3110	1806791.1040	63-19190	11/1/1981	781965			yes	150	144	open hole	80	5/6/1978
Burke	Linda	256 E. Beacon Light	Eagle	yes	2637	43 43 17.40	116 21 3.62	15882992.6630	1811923.4590											

M3 Protestants All Well Data

Name (last)	Name (first)	2007 HLI 24 hour		2006 HLI 24 hour		Will Allow HLI to Inspect	Contact #	comments
		Water Level	Date/Time of HLI W.L.	Water Level	Date/Time of HLI W.L.			
Rapp	Ron and Cheryl					yes	938-1967	No Log, Info From Questionnaire only, previous owner Ron Larsen
Franden	Janet and John					yes	938-1413	
Thomton	John					yes	867-09??	Used owner GPS, different from mark's
Collett	David and Linda					yes	939-1143	
Masner	Morgan and Julie					yes	939-6171	
Purvis	Steven					no-IDWR does		perforated, maybe modified, questionnaire says 100' deep, IDWR monitors well
Richardson	Bruce and Jean			42.35	06/27/2006 09:55	yes	939-1515	only info on Q is date, adress, and Phone #, toc=0.92
Lyons	Robert and Joan	259.81	06/15/2007 13:22	258.72	06/24/2006 17:50	yes	939-6820	toc=0.6'
Thompson/Petrovsky	Carol/John					yes-if IDWR Sup.	938-0418	Owner Supplied Log, can find online under Stillwell
Banducci	Jim					yes, wkn w/Owsley	939-2223	open hole 179' down, drilled to 240' probably caved up to 215
Jones	Trish and Barry					yes	938-8938	owners know nothing
Randall	Sherrri					no		open hole 149' down
Van Camp	Bruut and Rebecca					yes	343-1816, 938-1917	
Tarbet	Sally and Craig					yes	890-8899	may be wrong well location, Q says there could be a map included, well log under Rowland
Adkins	Lorn and Laurie					yes	939-7875	not for sure about well log, appears to be open hole, casing down to 118'
Jordan	Karen and Lyle					yes	938-9259	Q has water right permit # 544 994?, open hole 6" casing down to 98'?
Groothuis	Marion and Judy					yes	850-0617	online log under Rountree.
Glivar	Daniel and Cheryl					yes	383-3958 wrk	online log under pedersen
Iazetta	Vincent					yes	250-9801	online log under Delo-Kal, Inc
McMurray	Michael and Martha					yes	939-7806 H, 859 4324	online log under Phalen, I believe well was deepened and screened on 4/92, no log for deepening
Head	David					yes	938-8508	Has not filed protest(M.U.), online log under stillwell lot 4 blk 2, DTW on Q = 158'
Watkins	Charles					yes	363-1346	no log, previous owner Ron Post
Evans	Loring and Julie					yes	939-9636	
Gaston	Dale and Mary					no		can not find log, info from Q
West	Robert and Alasya			226.02	06/22/2006 16:08	no		Used info from John West Well Log, not for sure if this is the correct well log due to discrepancies, they let us measure before
Jekel/Tiffany	Barb/Bill					no		no log, depth from Q
Niccolls	Robert and La Vonne					possibly	939-2787	6/25/02- treasure valley pump W.L.=103', 09/12/08- IDWR W.L. = 112', from Q, log under Grey, GPS from ome owner
Conrad	Shelby and Angela					yes	938-5104	
Meyer	Walter					yes	939-0504	open hole, had to replace the pump twice due to sand. Two logs is a deepening
Leigh	Eric and Joyce					if needed	1-800-939-1065	No WR by given date
Keys	George					yes	938-0574	Possile log under westermier
Dick	Stephen					yes	870-3990	Log under Dick
McDonald	G.E.					yes	939-4094, 861-0765	Log under Brubaker
Minkiewicz	Vincent and Patricia					yes	939-5642	Log under Swanson
Lagerstrom	Richard and Dessa					no		owned by Bruce Smith Family Trust, log under Neel I believe this is the same well and Ritter
Ritter	Thomas and Anne					yes	939-1760	IDWR W.L. = 86.5' 6/4/08, 84.2' 9/11/08, log under Neel
Burke	Linda							Can not Find Log, No Questionnaire