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IDAHO DEPARTMENT OF WATER RESOURCES
WELL DRILLER'S REPORT

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MAY 05 2025

WATER RESOURCES
WESTERN REGION

1. WELL TAG NO. D 100093

Drilling Permit No. 914695

Water right or injection well # _____

2. OWNER: Terra Firma, LLC

Name _____

Address PO Box H2City Snowmass Village State CO Zip 81615

3. WELL LOCATION:

Twp. 4 North ☒ or South ☐ Rge. 4 East ☐ or West ☒Sec. 23 SE 1/4 SW 1/4
40 acres 160 acresGov't Lot _____ County CanyonLat. 43 ° 39.7688'N (Deg. and Decimal minutes)Long. 116 ° 47.1696'W (Deg. and Decimal minutes)Address of Well Site 19740 Lower Pleasant RdCity Caldwell

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

Lot. _____ Blk. _____ Sub. Name ParcelID#36371010A0

4. USE:

☐ Domestic ☐ Municipal ☐ Monitor ☐ Irrigation ☐ Thermal ☐ Injection
☒ Other Fire Protection

5. TYPE OF WORK:

☒ New well ☐ Replacement well ☐ Modify existing well
☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☐ Air Rotary ☒ Mud Rotary ☐ Cable ☐ Other _____

7. SEALING PROCEDURES:

Seal material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method/procedure
Neat Cement	0	171	237.6 ft³	Grout Pump

8. CASING/LINER:

Diameter (nominal)	From (ft)	To (ft)	Gauge/Schedule	Material	Casing	Liner	Threaded	Welded
12"	+2	195	.250	Steel	☒	☐	☐	☒
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Was drive shoe used? ☐ Y ☒ N Shoe Depth(s) _____

9. PERFORATIONS/SCREENS:

Perforations ☐ Y ☒ N Method _____Manufactured screen ☒ Y ☐ N Type Wire Wrapped SSMethod of installation Welded in

From (ft)	To (ft)	Slot size	Number/ft	Diameter (nominal)	Material	Gauge or Schedule
195	295	10		12"	SS	.250

Length of Headpipe _____ Length of Tailpipe _____

Packer ☐ Y ☒ N Type _____

10. FILTER PACK:

Filter Material	From (ft)	To (ft)	Quantity (lbs or ft³)	Placement method
3/8 Pea Gravel	171	297	6300lbs	pour in

11. FLOWING ARTESIAN:

Flowing Artesian? ☒ Y ☐ N Artesian Pressure (PSIG) 5Describe control device Artesian Well Cap

12. STATIC WATER LEVEL and WELL TESTS:

Depth first water encountered (ft) 42 Static water level (ft) 0

Water temp. (°F) _____ Bottom hole temp. (°F) _____

Describe access port Welded Plate

Well test:

Drawdown (feet)	Discharge or yield (gpm)	Test duration (minutes)
	90	8 Hrs

Test method:

Pump	Bailer	Air	Flowing artesian
☒	☐	☐	☒
☐	☐	☐	☐

Water quality test or comments: _____

13. LITHOLOGIC LOG and/or repairs or abandonment:

Bore Dia. (in)	From (ft)	To (ft)	Remarks, lithology or description of repairs or abandonment, water temp.	Water	
				Y	N
20	0	3	Top Soil		X
20	3	18	Brown Sandy Clays		X
20	18	42	Brown Clays		X
20	42	80	Brown Sandy Clays	X	
20	80	97	Grey Clays		X
20	97	101	Grey Sands	X	
20	101	135	Grey Sandy Clays		X
20	135	141	Grey Sands	X	
20	141	145	Grey Clays		X
20	145	159	Grey Sands	X	
20	159	176	Grey Clays		X
20	176	178	Grey Sands	X	
20	178	182	Grey Clays		X
20	182	190	Grey Sands	X	
20	190	200	Grey Sandy Clays	X	X
20	200	224	Grey Clays		X
20	224	236	Grey Sands	X	
20	236	243	Grey Clays		X
20	243	253	Grey Sands	X	
20	253	260	Grey Clays		X
20	260	267	Grey Sands	X	
20	267	273	Grey Clays		X
20	273	283	Grey Sands	X	
20	283	285	Grey Clays		X
20	285	289	Grey Sands	X	
20	289	291	Grey Clays		X
20	291	296	Grey Sands	X	
20	296	300	Grey Clays		X

Completed Depth (Measurable): 295

Date Started: 4/24/2024 Date Completed: 5/8/2024

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 Dig Well Idaho, LLC Co. No. 682*Principal Driller Trinity Villines Date 6/13/2024

*Driller _____ Date _____

*Operator _____ Date _____

*Operator _____ Date _____

Other _____ Date _____

Other _____ Date _____

* Signature of Principal Driller and rig operator are required.