STATE OF FLORIDA WELL COMPLETION REPORT

Southwest Northwest

PLEASE, FILL OUT ALL APPLICABLE FIELDS (*Denotes Required Fields Where Applicable)

St. Johns River South Florida Suwannee River DEP

Date Stamp

Delegated Authority (if Applicable) Osceola County	Official Use Only
1.*Permit Number 49WP2010380 *CUP/WUP Number *DID Number 62-524 De	lineation No
2.*Number of permitted wells constructed, repaired, or abandoned *Number of permitted wells not constructed, repaired.	red, or abandoned0
3.*Owner's Name Osceola County 4.*Completion Date 10/28/19 5. Florida Unic	jue ID2
6. Canoe Creek Rd. st. Cloud FL.	
*Well Location - Address, Road Name or Number, City, ZIP	
7.*County Osceola *Section 01 Land Grant *Township	28 S *Range 31 E
8. Latitude Longitude	
	D 83 WGS 84
Domestic Landscape Irrigation Agricultural Irrigation Modern Supply Recreation Area Irrigation Livestock Teacher Supply (Limited Use/DOH) Nursery Irrigation Research Supply (Community or Non-Community/DEP) Commercial/Industrial Golf Course Irrigation Golf Course Irrigation HN Class V Injection Recharge Commercial/Industrial Disposal Aquifer Storage and Recovery Drainage Remediation: Recovery Air Sparge Other (Describe)	te Investigations onitoring est arth-Coupled Geothermal VAC Supply VAC Return
Other (Describe)	
12. *Drill Method Auger Cable Tool Rotary Combination (Two or More Methods) Jetted ✓ S Horizontal Drilling Hydraulic Point (Direct Push) Other	onic
13.*Measured Static Water Level 6 ft. Measured Pumping Water Level ft. After Hours at 14.*Measuring Point (Describe) ground surface Which is ft. Above Below Land Surface 15.*Casing Material: Black Steel Galvanized PVC Stainless Steel Not Cased Other	*Flowing: Yes No
16. *Total Well Depth 31 ft. Cased Depth ft. *Open Hole: From To ft. *Screen: From 26 To	31 ft. Slot Size .010
17.*Abandonment: Other (Explain) Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Bentonite	Other
Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Bentonite Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Bentonite Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Bentonite	Other Other Other Other
18.*Surface Casing Diameter and Depth: Dia in. Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Ben	tonite Other
Diain. Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Ben	tonite Other
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Dia in. From ft. To ft. No. of Bags Seal Material (Check One): Neat Cement Ben	tonite Other tonite Other tonite Other
Dia in. Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Ben Dia in. Fromft. Toft. No. of Bags Seal Material (Check One): Neat Cement Ben	tonite Other tonite Other tonite Other
22. Pump Type (If Known): Centrifugal Jet Submersible Turbine Iron ppm Sulfate ppm Horsepower Pump Capacity (GPM) Pump Depth ft. Intake Depth ft. Laboratory Test Field Test K	Chloride ppm
24. Water Well Contractor:	
*Contractor Name CARL A. LEONHARDT *License Number 9521 E-mail Address lisa@edsenvironme	ntal.com
*Contractor's Signature (Print or Type) Glen Pennington (I certify that the information provided in this report is accurate and true.)	

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT 2379 BROAD STREET, BROOKSVILLE, FL 34604-6899 PHONE: (352) 796-7211 or (800) 423-1476 WWW.SWFWMD.STATE.FL.US

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT 4049 REID STREET, PALATKA, FL 32178-1429 PHONE: (386) 329-4500 WWW.SJRWMD.COM

NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT 152 WATER MANAGEMENT DR., HAVANA, FL 32333-4712 (U.S. Highway 90, 10 miles west of Tallahassee) PHONE: (850) 539-5999 WWW.NWFWMD.STATE.FL.US SOUTH FLORIDA WATER MANAGEMENT DISTRICT P.O. BOX 24680 3301 GUN CLUB ROAD WEST PALM BEACH, FL 33416-4680 PHONE: (561) 686-8800 WWW.SFWMD.GOV

SUWANNEE RIVER WATER MANAGEMENT DISTRICT 9225 CR 49 LIVE OAK, FL 32060 PHONE: (386) 362-1001 or (800) 226-1066 (Florida only)

WWW.MYSUWANNEERIVER.COM

					Grain Size (F, M, C)mf	
From					Grain Size (F, M, C)	
From		***************************************			Grain Size (F, M, C)	
From		To			Grain Size (F, M, C)	
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From					Grain Size (F, M, C)	
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From					Grain Size (F, M, C)	
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*Detailed Site Map of Well Location



OF THE STAT

STATE OF FLORIDA WELL COMPLETION REPORT

Southwest PLEASE, FILL OUT ALL APPLICABLE FIELDS (*Denotes Required Fields Where Applicable) Northwest

St. Johns River South Florida Suwannee River DEP

Date Stamp

✓ Delegated Authority (If Applicable) Osceola County	Official Use Only
00 704 5	P. C. N.
1.*Permit Number 49WP2010375 *CUP/WUP Number *DID Number 62-524 De	
2.*Number of permitted wells constructed, repaired, or abandoned *Number of permitted wells not constructed, repaired.	red, or abandoned0
3.*Owner's Name Osceola County 4.*Completion Date10/28/19 5. Florida Unio	que ID1
6 Canoe Creek Rd. st. Cloud FL.	
*Well Location - Address, Road Name or Number, City, ZIP	
7.*County*Section06Land Grant*Township	28 S *Range 32 E
8. Latitude Longitude	
9. Data Obtained From: GPS 🗸 Map Survey Datum: NAD 27NA	D 83 WGS 84
□ Domestic □ Landscape Irrigation □ Agricultural Irrigation ☑ N □ Bottled Water Supply □ Recreation Area Irrigation □ Livestock □ T □ Public Water Supply (Limited Use/DOH) □ Nursery Irrigation □ E □ Public Water Supply (Community or Non-Community/DEP) □ Commercial/Industrial □ H	ite Investigations lonitoring est arth-Coupled Geothermal VAC Supply VAC Return
Other (Describe)	ar sammen
12. *Drill Method Auger Cable Tool Rotary Combination (Two or More Methods) Jetted	Sonic
Horizontal Drilling Hydraulic Point (Direct Push) Other 13.*Measured Static Water Level 6 ft. Measured Pumping Water Level ft. After Hours at 14.*Measuring Point (Describe) ground surface Which is ft. Above Below Land Surface 15.*Casing Material: Black Steel Galvanized VPVC Stainless Steel Not Cased Other	"Flowing: Yes No
16. *Total Well Depth 31 ft. Cased Depth ft. *Open Hole: From To ft. *Screen: From 26 To	31 ft. Slot Size .010
17.*Abandonment: Other (Explain) From ft To ft No. of Bags Seal Material (Check One): Neat Cement Bentonite	Other
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Horsepower Pump Capacity (GPM) Pump Depth ft. Intake Depth ft Laboratory Test Field Test	Chloride ppm
24. Water Well Contractor: *Contractor Name CARL A. LEONHARDT *License Number 9521 E-mail Address lisa@edsenvironm	ental.com
*Contractor's Signature *Driller's Name (Print or Type) Glen Penningto	

*	Perm	it P	Va	49W	P20	10375

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT 2379 BROAD STREET, BROOKSVILLE, FL 34604-6899 PHONE: (352) 796-7211 or (800) 423-1476 WWW.SWFWMD.STATE.FL.US

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SUWANNEE RIVER WATER MANAGEMENT DISTRICT 9225 CR 49 LIVE OAK, FL 32060

PHONE: (386) 362-1001 or (800) 226-1066 (Florida only) WWW.MYSUWANNEERIVER.COM

*DRILL CUTT M=Medium,			e)	50	90 04	or, and it. or at formati	on onunges. Hote cavilles and t	depth to producing zone. Grain Size: F=Fine,
				ft.	Color	Lt. Gr./brn to Grey	Grain Size (F, M, C) mf	Material Sand And silty Sand
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From	ft.	To_		_ft.	Color		Grain Size (F, M, C)	
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							Grain Size (F, M, C)	
From	ft.	To_		ft.	Color		Grain Size (F, M, C)	
From	ft.	To_		_ft.	Color _		Grain Size (F, M, C)	Material
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*Detailed Site Map of Well Location



STATE OF FLORIDA PERMIT APPLICATION TO CONSTRUCT REPAIR, MODIFY, OR ABANDON A WELL PLEASE FILL OUT ALL APPLICABLE FIELDS (*Denotes Required Fields Where Applicable □Northwest ☐St. Johns River The water well contractor is responsible for completing South Florida this form and forwarding the permit application to appropriate delegated authority where applicable

Suwannee River

TOEP

Permit No	
Florida Unique ID	
Permit Stipulations Re	equired (See Attached)
and the second s	

491,7201038

■ Delegated Authority (If Applicable) Osceola County ABOVE THIS LINE - FOR OFFICIAL USE ONLY FI 34741 1 Courthouse Sq STE 2100 Kissimmee Osceola County *ZIP *Telephone Number *State *Owner, Legal Name if Corporation *Address Canoe Creek Rd. Saint Cloud FL 34471 *Well Location - Address, Road Name or Number, City 3 0128310000002200000 Block Lot *Parcel ID No. (PIN) or Alternate Key (Circle One) 4, 01 28 31 Osceola Check if 62-524: Yes ✓ No Subdivision *Township *Range *County *Section or Land Grant carl@edsenvironmental.com 9521 407-295-3532 Carl Leonhardt *Telephone Number E-mail Address *License Number *Water Well Contractor 32811 FI Orlando 4712 Old Winter Garden Rd 6 ZIP State *Water Well Contractor's Address *Type of Work: / Construction Repair Modification Abandonment *Reason for Repair, Modification, or Abanconment 8. *Number of Proposed Wells 1 Date Stamp 9. *Specify Intended Use(s) of Well(s) Site Investigation Agricultural Irrigation Domestic Landscape irrigation Monitoring Recreation Area Irrigation Livestock Bottled Water Supply Test Nursery Irrigation Public Water Supply (Limited Use/DOH) Earth-Coupled Geothermal Commercial/Industrial Public Water Supply (Community or Non-Community/DEP) HVAC Supply Golf Course Irrigation HVAC Relum Recharge Commercial/Industrial Disposal Aquifer Storage and Recovery Drainage Class V Injection: Remediation. Recovery Air Sparge Other (Describe) Official Use Only (Note: Not all types of webs are permitted by a given permitting authority) 12 Estimated Start Date 10/19/19 10 *Distance from Septic System if < 200 ft NA 11 Facility Description 13.*Estimated Well Depth 31 ft *Estimated Casing Depth ft *Primary Casing Diameter 4 in. Open Hole: From To 14. Estimated Screen Interval: From ²⁶ To ³¹ ft. Black Steel Galvanized ✓ PVC Stainless Steel 15.*Primary Casing Material: Not Cased Other 16. Secondary Casing: Telescope Casing Liner Surface Casing Diameter 17. Secondary Casing Material: Black Steel Galvanized PVC Stainless Steel Other 18.*Method of Construction, Repair, or Abandonment.

✓ Auger Cable Tool Jetted Rotary Combination (Two or More Methods) Hand Driven (Well Point, Sand Point) Hydraulic Point (Direct Push) Horizontal Drilling Plugged by Approved Method Other (Describe) 19. Proposed Grouting Interval for the Primary, Secondary, and Additional Casing: To 26 Seal Material (Bentonite v Neat Cement Bentonite____ To____ Seal Material (Neat Cement Other Other Seal Material (__ Bentonite Neat Cement From To Neat Cement Other To Seal Material (Bentonite List number of existing unused wells on site 028.07829201 20. Indicate total number of existing wells on site 0 21.*Is this well or any existing well or water withdrawal on the owner's contiguous property covered under a Consumptive/Water Use Permit (CUP/WUP) or CUP/WUP Application? Yes No If yes, complete the following: CUP/WUP No. District Well ID No. Longitude -81 16202298 22. Latitude 28.08318797 NAD 27 __NAD 83 ____WGS 84 Datum: Map Survey 23 Data Obtained From. GPS __ countly that it am the owner of the property that the information provided is accurate, and that it are awarded by responsibilities under Chapter 373. Floride Statutes, former than opproperly abandon: this well by i config that it is information provided is accurate, and that it have information the owner of their investors to five an attention of owner consents to allow operational the VMD or Delegation Authority access to the well sife country the construction repair modification or abandonment authorized by mis permit. Lineaby earth, text tail silicomp with the applicable rules of Tha SC. Florda Administrative Content are well use permit or artificial recharge permit. I needed that see on white otherwise growing permit construction. In After certify total all information provided in this agriculture is absolute and that I will obtain macessary approval from their telepret state or local governments. I taggicable it agrees to provide a well-complete on report to the Dathort which all disks after completion of the control configuration and section.

BELOW THIS LINE - FOR OFFICIAL USE ONLY

9521

Receipt No

*License No

Expiration Date

*Signature of Owner or Agent

Avdeclogist Approval

10/16/19

*Date

THIS PERMIT IS NOT VALID UNTIL PROPERLY SIGNED BY AN AUTHORIZED OFFICER OR REPRESENTATIVE OF THE WMD OR DELEGATED AUTHORITY. THE PERMIT SHALL BE AVAILABLE AT THE WELL SITE DURING ALL CONSTRUCTION, REPAIR, MODIFICATION, OR ABANDONMENT ACTIVITIES.

Signature of Contractor

STATE OF FLORIDA PERMIT APPLICATION TO CONSTRUCT, REPAIR, MODIFY, OR ABANDON A WELL

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E .		
V	OLD CO	

☐ Southwest ☐ Northwest	PLEASE FILL OUT A
☐ St. Johns River ☐ South Florida ☐ Suwannee River	The water well contra this form and forward appropriate delegate
DDEP	

■ Delegated Authority (If Applicable) Osceola County

PLEASE FILL OUT ALL APPLICABLE FIELDS ("Denotes Required Fields Where Applicable)

The water well contractor is responsible for completing

The water well contractor is responsible for completing this form and forwarding the permit application to the appropriate delegated authority where applicable.

Permit No.	
Florida Unique ID	and the second s
Permit Stipulations Re	quired (See Attached)
62-524 Quad No	Delineation No.
CUP/WUP Application	

**Control Legal Name if Corporation **Address **Colly **State **ZIP **Telephone Number **Telephone Number **Control Control Co		4.6 - A OTT 0400		FL	34741	
2 Careb Cheek Rd. Sent Closed TL. 34471 Well Location - Address, Road Name or Number, City 3 (3683) 3 (3683) 3 (3783) 3 (3883) 3	The state of the s	AND THE RESIDENCE OF THE PARTY	and the property of the proper		The second secon	elephone Number
Weel Contractors Construction Repair Modification Abardonment City State City State City State City State City State City State City	: :	Address	City	0.0.0		
3 oseas/2000000000000000000000000000000000000	The state of the s	r Number, City				
Parcel ID No (PIN) or Alternate Key (Crole One) 3						
Special contrained Grant Township Range County Subdivision Check if 02-524; Yes No.	*Parcel ID No. (PIN) or Alternate Key (C			Lot	Block	Unit
Scarl Learners		sample to the control of the control	Subdivision		Check if 62-	524: Yes No
Water Weil Contractor Ticense Number Graphone Number E-mail Address Afficiant Marker Graden R Afficiant Marker Graden R Afficiant R Affician				carl@eds	environmental com	
Water Well Commander's Address City Water Well Commander's Address Number of Proposed Wells 1 Specify Intended Use(s) of Well(s) 2 Specify Intended Use(s) of Well(s) 2 Specify Intended Use(s) of Well(s) 3 Specify Intended Use(s) of Well(s) 2 Omestic Bottled Water Supply (Limited Use/DOH) Recreation Area Irrigation Livestock Monitoring Public Water Supply (Limited Use/DOH) Recreation Area Irrigation Public Water Supply (Limited Use/DOH) Recreation Area Irrigation Public Water Supply (Limited Use/DOH) Class V Injection: Class V Injection: Recharge Commencial/Industrial Disposal Aquiler Storage and Recovery Other (Descrete) Thise Notal Inject of Well sare permitted by a given permitting out and by a permitting out and by a given permitting out and by a series of the permitting out and by a given permitting out and by a series of the permitting out and by a serie		Control Contro	Acquegg, to the deposit of a convenience of the con	E-mail	Address	- Marie Carlot Commission (Commission Commission Commis
Type of Work — Construction Repair Modification Abandonment Number of Proposed Wells ! 9 Specify Intended Use(s) of Well(s): Domestic Landscape irrigation Agricultural Irrigation Site investigation Monitoring Public Water Supply (Limited Use) ON Proposed Well of Monitoring Public Water Supply (Limited Use) ON Proposed Monitoring Public Water Supply (Community of Non Community) (DEP) Monitoring Test Coupled Geothermal Public Water Supply (Community of Non Community) (DEP) Monitoring Geother Supply (Community of Non Community) (DEP) Monitoring HVAC Supply HVAC Su	6 4712 Old Winter Garden Rd		Orlando		FL	and the second state of th
8 "Number of Proposed Wells ! "Research of Wells of Well(s): Domestic Bolloted Water Supply Cereation Area Irrigation Livestook Mursen Livestook Livestook Mursen					State	ZIP
8. "Number of Proposed Wells" Domestic Domestic Domestic Bottled Water Supply (Limited Use/DOH) Recreation Area Irrigation Livestook Public Water Supply (Limited Use/DOH) Recreation Area Irrigation Public Water Supply (Community or Non-Community) DEP) Golf Course Irrigation HVAC Supply HVAC Return Class V Injection Class V Injection Recharge Commercial/Industrial HVAC Return Class V Injection Remediation: Recovery Air Sparge Other (Describe) Other (Describe) Other (Describe) 10 'Distance from Septic System if \$200 ft. NA 11 Facility Description 11 'Primary Casing Diameter and the State of Total St	7. *Type of Work: ✓ Construction	Repair Modification	Abandonment	to Come Hustan	on or thurstorman	
Domestic Bottled Water Supply (Limited User/DOH) Public Water Supply (Community or Non-Community/DEP) Golf Course Irrigation Public Water Supply (Limited User/DOH) Public Water (Supply Supply (Limited User/DOH) Public Water (Supply (Reaso	in for Repair, Mourical	idn or Abandoninen.	Date Stamp
Bottlet Water Supply (Limited Use/DOH) Public Water Supply (Limited Use/DOH) Public Water Supply (Limited Use/DOH) Class I Injection Recovery Air Sparge Other (Describe)		scape Irrigation A	gricultural Irrigation			
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Public Water Supply (Community or Non-Community/DEP) Golf Course Irrigation HVAC Supply Class I Injection Recharge Commercial/Industrial Disposal Aquifer Storage and Recovery Drainage Official Use Only Official	Public Water Supply (Limited Use/DC)H)	lursery irrigation		d Geothermal	
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