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September 17, 2010

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BY HAND DELIVERY

Florida Public Service Commission
Ann Cole, Commission Clerk
Office of Commission Clerk
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

Re: Docket No. 100104-WU – In Re: Application for increase in water rates in Franklin County by Water Management Services, Inc.

Dear Ms. Cole:

Enclosed for filing in the above referenced docket on behalf of Water Management Services, Inc. ("WMSI") are the original and seven (7) copies each of the rebuttal testimony and exhibits of the following WMSI witnesses:

1. Gene D. Brown 07815-10
2. Frank Seidman 07816-10
3. Barbara S. Withers 07817-10
4. Michael Scibelli 07818-10

Please acknowledge receipt of these documents by stamping the extra copy of this letter "filed" and returning the copy to me.

Thank you for assistance with this filing.

Sincerely,

Lisa C. Scoles

Lisa C. Scoles, Esq.

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Enclosures

cc: Joseph McGlothlin, Office of Public Counsel
Ralph Jaeger/Erik Sayler, Office of the General Counsel

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BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

DOCKET NO. 100104-WU

WATER MANAGEMENT SERVICES, INC.

IN RE: APPLICATION FOR INCREASE IN WATER RATES IN FRANKLIN COUNTY BY WATER MANAGEMENT SERVICES, INC.

REBUTTAL TESTIMONY & EXHIBITS OF:

GENE D. BROWN

DOCUMENT NUMBER-DATE
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REBUTTAL TESTIMONY OF GENE D. BROWN

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

IN DOCKET NO. 100104-WU

IN RE: APPLICATION FOR INCREASE IN

WATER RATES IN FRANKLIN COUNTY BY

WATER MANAGEMENT SERVICES, INC.

Q. Please state your name, profession and address.

A. My name is Gene Brown. I am President of Water Management Services, Inc. (WMSI). My business address is 250 John Knox Road, Unit 4, Tallahassee, FL 32303.

Q. Have you previously presented testimony in this proceeding?

A. Yes, I presented testimony on behalf of the Applicant, WMSI.

Q. What is the purpose of your rebuttal testimony?

A. The purpose is to respond to portions of the testimony presented by the Office of Public Counsel (OPC) witnesses Ramas and Woodcock and Florida Public Service Commission (PSC or Commission) staff witnesses Dobias and Chelette.

Q. Would you please address those portions of the direct testimony of Ms. Ramas to which you would like to respond.

A. I would like to respond to all parts of her testimony, more or less in the order set forth in her table of contents.

Q. On page 6, she expresses concern with the way the utility is currently being managed. Can you respond to that?

A. Yes. I have managed the company for 35 years through good times and bad. The utility did fine for eight or ten years after our last rate case in the early 90's. But in late 2000, the federal government and the state of Florida decided to tear down the bridge to St. George Island, along with our water supply main. The new bridge was built with government funding, but WMSI was required to build a new supply main at a cost of approximately $7,000,000, all with no public or governmental assistance. In an order entered in March of 2006, this Commission allowed WMSI to recover most of those costs over an extended period of time. The utility did okay the following year, 2007. But, in 2008, the company's water sales and revenue began dropping with revenue ending up approximately $125,000 less than in 2007. This decrease was primarily due to two factors, both of which were beyond the control of WMSI. First, we began to see a large increase in the number of shallow wells, which had a disproportionate impact on WMSI because of the new block rates imposed in the 2006 order. Second, we began to lose commercial sales because of restrictions imposed by the Department of Health.

Q. Why didn't you file a rate case in early 2009?

A. I was starting to put the financial information together for a water rate case when the Franklin County Commission asked WMSI and several other utilities to prepare formal and detailed proposals to submit to the county for sewer on the island. At that time, I was convinced that someone had to furnish sewer to our customers on the island, at least in the concentrated center commercial area. I thought it was in the best interests of our customers and our shareholders that sewer should be provided by WMSI. In my mind, this would create a huge increase in commercial water sales so we would not have to shift the loss to residential customers. My plan was to survive 2009, which I thought could not be any worse than 2008, while we processed a PSC sewer case. My plan was to impose overall water and sewer rates which would establish a revenue requirement with no increase in the rates charged to our customers for water service. My engineers and I thought it would save money for our remaining customers. Even the engineer for our primary competitor in the sewer presentations made to Franklin County acknowledged that the rule of thumb among engineers is that there is a 50% savings for the customer when the same company provides water and sewer. For example, if a water bill would be $50 from one company and another $50 for sewer from another company, a combined water and sewer company could offer the same service for $75. We were also attempting to regain the commercial sales from those commercial customers whose water use had been drastically reduced by

administrative order from the health department, and from those whose accounts had been closed for lack of sewer service, some by order of the Franklin County Circuit Court. This was a prudent decision based upon the facts known to me at the time. We already had two highly qualified sewer operators working for us, and I thought it would be more efficient and economical for all our customers for us to furnish sewer rather than having it furnished by a separate company with no current presence on the island. I was trying to avoid a rate increase for our other water customers, which did not work and which brings us to this current proceeding.

Q. Why was the wastewater project discontinued?

A. After spending a great deal of time and money, and after four of the five county commissioners told me that they were in favor of sewer in the dense commercial area, the county commission voted unanimously in late 2009 to ask WMSI to withdraw its application for sewer on the island. I knew there was no chance of installing sewer service on the island with the county fighting the project, so I withdrew by PSC application.

Q. What has been the trend since that time?

A. Water sales and revenue have continued to drop. The year 2009 was worse than 2008, and 2010 will be even worse than 2009.

Q. In her testimony, Ms. Ramas says that a lot of the company's cash flow problems are due to excessive cash transfers to you and your affiliates. Is this a legitimate concern?

A. No, it is not. This company's problems are not due to money I have taken. They are due to the fact that water sales have been dropping about $100,000 per year for the past three years, while expenses and demands on the system have been increasing.

Q. Please refer to Ms. Ramas' Exhibits DR2 and DR3. She states on page 9 of her testimony that during the test year of 2009, you and Brown Management took out $131,038 more than you put into the company. Is that true?

A. No, that is false and misleading. In order to hit those numbers, Ms. Ramas had to include all of my salary as set forth in the payroll account, and all of the rent paid to Brown Management Group as set forth in the rental account. When you take those amounts out of Ms. Ramas' numbers, I actually put more into the company during the 2009 test year than I took out.

Q. How about this year, 2010?

A. If you give me credit for my salary, which was reduced by $30,000, and if you give Brown Management credit for rent on its building, the two of us

have put $154,280 more into the company than we have taken out during the first 8 months of this year. That is $19,285 per month.

Q. Will you ever get this back?

A. No, I guess they call this "regulatory lag," but to me it is real money that can never be recovered.

Q. Do the interim rates help?

A. These interim rates have not gone into effect yet. When they do, they only amount to around $9,000 per month, which WMSI cannot touch. The final rates, even assuming they will be more than the interim rates, will not be billed and collected until next spring, probably around March. In the meantime, WMSI continues to lose large sums of money which can never be recovered and which makes it more difficult to maintain the high level of service we have been providing to our customers.

Q. Back to the schedules prepared by Ms. Ramas as Exhibits DR2 and DR3, have you looked at the overall transfer of funds since January 1, 2008?

A. Yes. After you take the salary and rent out of Ms. Ramas' numbers, and bring the schedule forward through August 31, 2010, the "net difference cash out vs. cash in" shows $34,296 more going in than coming out for the last two years and eight months.

Q. How did you arrive at that number?

A. After I read Ms. Ramas' testimony, I asked my controller and my CPA to get together and prepare a summary schedule showing the net affect if you take the salary and rent out of Exhibit DR2 and DR3 and bring these exhibits up to date. Attached as Exhibit (GB-1)___ is a schedule showing a yearly breakdown and summary of those numbers.

Q. What do the numbers show if you start at the beginning of the test year, 2009, and come forward?

A. If you start with the beginning of the test year, 2009, and come forward through the end of August, 2010, the numbers show that Brown Management and I have put $156,842 more into WMSI than we have taken out during the past 18 months. That is almost $9,000 a month. That is money I can never recover, even if we are successful in this pending rate case.

Q. Are there any problems caused by being a small, privately owned utility?

A. Running a small, privately owned utility is not like running a large company with access to the equity markets or even a small public utility with taxing authority and access to government grants and loan programs. Several years ago, about the time our revenues started dropping, our major lender terminated our $3,000,000 line of credit because of capitalization

problems the bank was having due to the falling real estate market in Franklin County. This left WMSI with all its assets encumbered and with no ability to borrow for emergencies and cover cash flow deficits such as we were experiencing. This inability to borrow has been a general problem for small businesses nationwide during the last few years, but it is a special problem for a company like WMSI with a negative balance sheet and an income statement showing consistent losses in the hundreds of thousands of dollars. WMSI has also been severely impacted by a series of government decisions. When the Department of Transportation (DOT) decided to tear down a privately owned five mile long water supply main, it had economic consequences. When the Northwest Florida Water Management District (NWFWMD or the District) decided to legalize and encourage shallow wells throughout St. George Island, after insisting on block rates for WMSI, it had and continues to have economic consequences. When the Franklin County Commission decided to oppose sewer on St. George Island after encouraging WMSI to get involved and present plans to the county for sewer, it had economic consequences. Fire protection is another example of a problem that should be a public responsibility, but which falls to WMSI to solve. Franklin County collects an assessment against every property on St. George Island for fire protection, but does not give one dollar to WMSI. Nevertheless, we are expected to install and maintain almost 200 fire hydrants with consistent high pressure throughout a distribution system that has been determined to

be only partially "used and useful." We are providing fire protection for at least 35 houses that do not use any of our water, as well as thousands of vacant properties which contribute nothing to the utility. A small private utility remains almost invisible until a rate increase is requested.

Q. But why would you ever need to take more than just your salary and rent from the company?

A. Almost all of the funds transferred from the company to either me personally or to Brown Management Group have been used to pay the debt service on loans that were used to pay debts of the utility. Essentially, equity investments in Brown Management Group have been used to pay the debt service on debts incurred by Brown Management Group and me personally to obtain funds to make up the cash flow deficit of the utility company during the past 10 years or so. That is the only way the company has survived while losing over $1,000,000 since this commission last set our rates in February 2006. As shown by our federal tax returns, WMSI lost $124,782 in 2006, $103,664 in 2007, $292,506 in 2008 and $354,156 in 2009, as shown by (GB-2) ___. We have also lost $266,302 through the first eight months of 2010, as shown by Exhibit (GB-3) ___. That is a total of $1,141,410 in less than five years.

Q. Do you have any examples of these types of loans to Brown Management Group or to you personally?

A. Yes, and every Brown Management Group loan has to be guaranteed by me personally. I especially remember a $150,000 second mortgage loan on my house because I had to talk my wife into signing as co-owner. She signed only because I was able to show her that the funds were being used to support the utility company, a portion of which she also co-owned.

Q. Any other examples?

A. Yes, there have been many other such loans over the 35 years that I have been the manager and co-owner of the company. Most of these have been repaid, but there is still over $750,000 in unpaid personal and BMG loans that have been used to fund the cash-flow deficit of the utility. All of these required my personal guarantee, and all but two required me to pledge assets owned by me personally or by Brown Management Group. One is a $360,000 loan which was used exclusively to pay the debt on the Department of Environmental Protection (DEP) loan, which required payments of $417,000 per year, using assets owned by Brown Management Group as collateral. The same assets had been pledged earlier to obtain funds for an earlier DEP payment. Another is a $150,000 mortgage loan using real estate owned by Brown Management Group as collateral. There are also two personal, unsecured lines of credit requiring my personal endorsement. Earlier this year, I personally borrowed an additional $25,000 to make the Regulatory Assessment Fee payment to the

PSC. There is nothing in our rates to help repay these loans, which I will have to do personally.

Q. What is the current monthly debt service on these loans?

A. It is over $12,000 per month, including $3,300 per month for $3,000,000 of life insurance. All or part of this insurance was required to obtain the $3,000,000 line of credit which I mentioned earlier. The pledge of this entire $3,000,000 in life insurance will be required by Citizens State Bank as security for the $5,000,000 loan which will pay off the existing $3,000,000 line of credit and fund the improvements recommended by PBS&J. Citizens State Bank may require more than $3,000,000 in life insurance coverage for a $5,000,000 loan. Accordingly, a $3,300 monthly life insurance expense and the expense for any additional life insurance required by Citizens will need to be included in the "true-up" phase of this case as an additional cost of debt.

Q. Throughout her testimony, Ms. Ramas expresses "concern" with your management expertise. Do you have any response to that?

A. Yes, as I mentioned earlier, I have managed this company for 35 years, through good times and bad. The last three or four years have been one of the bad times. But I am actually quite proud of the way our management team has been able to continue providing a high level of service with great water to all our customers despite the serious revenue shortfalls. We

provide great service, 24 hours a day, 7 days a week, 365 days a year. Because our service territory is a rental, resort area, many of our service calls are made at night and on weekends. The Florida Department of Environmental Protection is our primary regulator and they do comprehensive inspections (sanitary surveys) of our system almost every year. The last two have been basically perfect, with no deficiencies. We are also in full compliance with the statutes, rules and regulations administered by all our other regulators, such as the NWFWMD, the Federal Environmental Protection Agency (EPA), Franklin County and, the PSC. We have no service complaints, and we have had only a couple of billing complaints. The billing complaints involved customers who did not like paying a deposit, as required by our tariff and the PSC rules. Our bookkeeping is not perfect, but it is in substantial compliance with the National Association of Regulatory Utility Commissioners (NARUC). Our journal entries are complete with great detail, even if there are a few mistakes. They track every dollar and every transaction with complete descriptions so that necessary corrections can be made in proceedings such as this. The staff audit report in this case has six findings with no disclosures or exceptions. The PSC audit report from the last rate case in 1992 contained 17 disclosures and 26 exceptions, covering 74 pages as compared with 16 pages in the current report. We have a dedicated professional staff, and our management team and operators have worked for the utility for an average of 22 years each. We have redundancy, or

"back-up," in our water delivery system. We have the same type of back-up with our personnel. We have two highly qualified, licensed operators, so that at least one of them is always on site or nearby. We won an award from the Florida Rural Water Association for having the second best water in Florida. Our employees are cross-trained, so that we have more than one person qualified to manage and operate our cross-connection control program, our billing system and many other essential functions in running a water utility company. You do not achieve this level of success with poor management.

Q. On page 10 of her testimony, Ms. Ramas refers to an $85,000 transaction with SMC Investment Properties, Inc. Could you explain that?

A. Yes. SMC Investment Properties is a sub-s corporation which held two or three passive real estate investments for Sandra Chase, who owns 100% of the stock. During 2008 and part of 2009, SMC and Brown Management Group were co-owners of two single family rental properties. Brown Management Group advanced part of the cash for these properties, and when they were both sold in 2009, Brown Management received a 100% interest in the purchase money mortgages and notes representing most of the sales price. When the $85,000 was advanced to SMC, the offsetting entry was a charge to Brown Management Group, not a loan receivable. The substance of the transaction was that the funds were charged against

Brown Management Group's account and advanced to Brown Management Group which then advanced the funds to its joint venture partner, SMC. If this had been a loan from WMSI to SMC, the WMSI books would have reflected a loan receivable from SMC, not an increase in the amount of money advanced to BMG. WMSI was reimbursed in full with a check for $144,500, which was deposited in WMSI's account on June 19, 2009. So far as I know, SMC does not own any property at this time, and Brown Management Group has the two mortgages on the two joint venture properties together with a few other passive assets which will be discussed later in my testimony.

Q. How was this treated on Ms. Ramas' Exhibit DR-3?

A. She classified this as a loan to SMC, not as an advance to BMG. To maintain an "apples-to-apples" comparison, Exhibit (GB-1) ___ for 2008 uses the DR-3 numbers. But our financial statements clearly show there was no loan from WMSI to SMC.

Q. Also on page 10, Ms. Ramas makes a reference to a $100,000 note receivable from an associated company. Could you tell us about that?

A. Yes, when WMSI remodeled its plant and office building on St. George Island as part of the limited proceeding which resulted in the final order in February 2006, I added a vacant second story because I thought it could be used for storage or future expansion. However, the PSC disallowed the

entire cost of the second story and Brown Management Group bought that floor at a profit to WMSI. The $100,000 note receivable was a part of the purchase price of the second story, and that note has been paid in full, with interest at 7%.

Q. Please respond to the recommended adjustments to operating income, starting with the allocation of employee costs to affiliate operations on page 13.

A. In the last rate case based upon a 1992 test year, I had an active law practice and development company, and I was involved in other legal and business matters. Based on that, the PSC found that a 10% allocation to affiliates was appropriate. Now I have one sub-s corporation, which holds a limited number of passive assets, including the following: three note/mortgage receivables; three rental properties; and one note receivable. There is a grand total of seven checks per month from these assets. The WMSI employees do not spend any time outside the office working on any of these passive investments. In my direct testimony, I estimated that Bob Mitchell, Sandra Chase and I spend two hours per week on my affiliates. Since that time, I have dissolved several of the other affiliates that were discussed in my direct testimony upon which part of the two hour per week estimate for Sandra Chase and me was based. She does not spend any significant time on my one remaining affiliate, BMG. I believe it is unreasonable to allocate two hours per week of my

time or her time to this one affiliate in light of the fact that I have to manage the utility company seven days per week, 24 hours per day, 365 days per year. There are many times that I handle water company business from my home at night and during weekends. Accordingly, upon reflection, I agree with the allocation of two hours per week of Bob Mitchell's time, but I do not believe that any of my time or Sandra Chase's time should be allocated. Sandra Chase and I do not work "9 to 5." There have been many times that one or both of us have had to handle WMSI business after "normal" hours. We also both work more than the 40 hour work week used in Ms. Ramas' calculation. Water service has to be provided every hour of every day.

Q. What do you believe is a fair allocation of rent?

A. I do not believe there should be any allocation of rent. There is no additional expense to the utility for personal business or affiliate business that I take care of at the utility company office. On the other hand, I do not charge the utility for duties performed from my home after hours at night and on weekends. Managing a utility company cannot be accomplished according to a set schedule. Emergencies and spontaneous management situations arise daily. Accordingly, it is more beneficial for me to be at the utility office full-time than away from the office a couple of hours each week to perform personal business. In consideration for being available 24 hours a day, seven days a week, 365 days a year, it is

reasonable to allow me as the utility manager to spend a couple of hours each week on personal business. I continue to work more than 40 hours per week for WMSI. Managing this utility company is not a 40-hour per week job with a set schedule. It is and always will be my top priority.

Q. On page 19, Ms. Ramas recommends that the accounting allowance for WMSI's adjusted test year be reduced by $14,333 to $3,667 per year. Do you agree with that?

A. No, it would be impossible to comply with all the PSC, NARUC and Internal Revenue Service (IRS) reporting and disclosure requirements for $3,667 per year. At $150 per hour for CPA level services, that would be about two hours per month. The PSC has made it clear that utilities should close out their books on a monthly basis and that they should maintain a detailed plant matrix while complying with all the other NARUC standards as referenced in the WMSI accounting manual attached to the retainer agreement with the Withers CPA firm. There is no way we can do everything required by that manual for $3,667 per year. We have a hardworking controller, but this company needs the expertise of a CPA. If we had been able to afford that in the past, some of the confusion raised in this case, such as the journal entries regarding the trailers, could have been avoided. My CPA, Barbara Withers, will further explain in her rebuttal testimony the need for this high level of service.

Q. On page 23, Ms. Ramas recommends that WMSI's adjusted test year expenses for engineering be reduced by $42,500. Do you agree with that?

A. No, I do not. When I hired PBS&J, they spent two days on the island working with our personnel and examining our operations. I then met with them in Tallahassee to discuss our continuing need for their services. I asked for their estimate to provide engineering support for the utility to maintain its operations at a reasonable level of safe, reliable service to our customers. The result of that was the $48,000 per year retainer agreement reflected in the Minimum Filing Requirements (MFRs). When our monthly payments to PBS&J recently dropped from $5,000 per month to $4,000 per month under our agreement, I wrote a letter to PBS&J outlining specific needs so that we could set some priorities. Attached as Exhibit (GB-4) ___ is a copy of that letter. The St. George Island Volunteer Fire Department is now pressing WMSI for high pressure pumps within the distribution system to enhance fire flow. This is the same distribution system that OPC argues is not 100% "used and useful." Without the hydraulic water modeling referenced in my letter to PBS&J, we cannot determine where such pumps should be installed. This is an example of the engineering issues we encounter on a regular basis.

Q. On pages 23 through 25, Ms. Ramas argues that $2,500 should be removed from consulting costs in connection with the DEP loan. Do you agree?

A. No, I do not. We saved the rate payers a substantial amount of money when we obtained a $6,000,000 loan at 2.99% compared with the market rate, which was around 9% at the time. Keeping that loan in good standing was essential to WMSI and its customers. It was also important to extend the amortization from 20 years to 30 years to better match the PSC depreciation schedule on the plant constructed with the loan proceeds. Sigma Project Solutions was paid $2,500 to help us accomplish both of those goals and possibly prevent WMSI from filing bankruptcy. Consulting services of this type will continue to be necessary as long as WMSI has loans to be renewed, extended or modified, so this $2,500 should be allowed as a recurring expense. With Sigma's help, WMSI reduced its debt service by $121,000 per year.

Ms. Ramas argues that this savings is not relevant because BMG and I took out $131,000 more than we put into WMSI during the test year. That statement is just false. As shown by my earlier testimony and by Exhibit (GB-1) ___, BMG and I actually put more into the company than we took out during the test year. And we put another $254,200 extra into the company during the first eight months of 2010. Again, WMSI's problem is lack of water revenue.

Q. On pages 25 and 26, Ms. Ramas states that additional adjustments should be made to contract labor. Do you agree?

A. Yes, I agree that all of the contract labor costs for Charlie Painter and Hank Garrett during the 2009 test year should be removed.

Q. On pages 26 through 28, Ms. Ramas recommends an adjustment of $3,198 relating to the Frank Seidman expense. Do you have an opinion on that?

A. My opinion is that Frank Seidman is worth every dollar he has charged the utility. I will leave it up to his rebuttal testimony to deal with the exact numbers.

Q. On pages 28 through 30, Ms. Ramas recommends the removal of all costs related to the Rose Law Firm, and to Robert Nixon, CPA. Do you agree?

A. No, I do not. The lawyers at the Rose Law Firm provided me with valuable legal advice and strategy regarding the PSC and rate structure. They also put me in touch with an out-of-state investment banker that I worked with for a period of time. Bob Nixon and one of his accountants met with me for several hours at his office in St. Petersburg. They provided assistance and accounting advice to my controller and me in calculating our rate base according to the prior orders of the PSC. I know this was helpful to me and, in my opinion, it also helped to reduce the

ultimate charges that will be made by our present consultants. Bob Nixon also talked with two bankers at Mercantile Bank in St. Petersburg about our financial needs and referred me to them. I met with those bankers in St. Petersburg and worked with them about financing the improvements referenced in the PBS&J report. Although a loan did not materialize, this type of consulting is necessary and reasonable for a company seeking financing and refinancing to provide cash flow and funding for necessary improvements. These costs to Sigma Solutions, Rose Law Firm and Bob Nixon for financial consulting in connection with possible loans are ordinary, reasonable and necessary. Such costs were incurred solely on behalf of the customers of WMSI, which is dependent on debt financing and refinancing. Financing for a small private business is complicated and problematic. Expenses in pursuit of financing should not be disallowed simply because every attempt is not successful. Perhaps some of the Rose Law Firm expense should be reclassified as general legal, and maybe some of the Nixon expense should be reclassified as general accounting, but both expenses should be allowed.

Q. On page 32, Ms. Ramas states that the company's rate case expenses should be reduced if they result from lack of supporting engineering documentation. Do you agree?

A. From the outset, WMSI has made it clear that the utility is not asking for permanent rates based on the capital improvements until and unless there

is a "true up" phase to assure that the improvements have been completely engineered and bid so the exact cost can be determined. Before that phase, the PSC will be asked to determine which of the PBS&J options should be selected, and enter a finding that those improvements are prudent, as well as used and useful, so that financing can be obtained. WMSI has already spent $61,000 in laying out specific engineering findings and options. It would be imprudent and foolish to spend another $100,000 for final plans and bid documents before the PSC approves the overall plan and selects the best options, *e.g.*, do we build the ground storage tank on the same site or a different site?

Q. On pages 32 and 33, Ms. Ramas states that the company failed to remove the amortization expense associated with the prior rate case. Do you agree?

A. Yes. We reduced our rates when the amortization period expired, but apparently no adjustment was made in this filing.

Q. On pages 33 through 35, Ms. Ramas recommends that the salaries of Ms. Chase and Ms. Molsbee be reduced. Do you agree?

A. No. The decision regarding the level of pay for these two women was not made in a vacuum. One needs to understand the historical background regarding these employees. Ms. Chase was hired in 1980 and began working for the utility in January, 1981, where she has worked

continuously for almost 30 years. Ms. Molsbee began working for the utility in 1983. She has not worked continuously since that time, but has been back with WMSI since 2005. When I hired her back, I needed another DEP certified operator. She agreed to work for the utility with the promise of a large raise if and when she became certified. At the time she was rehired, Hank Garrett was the WMSI certified operator. Mr. Garrett was hired in 1982 and worked for WMSI until 1987 when he left to work for the City of Apalachicola for a higher salary and better benefits. When I realized how difficult it was to find a qualified operator to live and work in Franklin County, I hired Mr. Garrett back with a salary and promised benefits that exceeded those at the City of Apalachicola. He was working at WMSI as the manager and sole operator when Ms. Molsbee was rehired. However, after Ms. Molsbee began working on her DEP license, Mr. Garrett was hired by Eastpoint Water & Sewer for a still higher salary and better benefits. Ms. Molsbee then became WMSI's full-time manager and Mr. Garrett became a consultant so he could continue as our licensed operator and part-time employee. Because we needed more operations help than Mr. Garrett could provide, we also hired Charlie Painter, the licensed operator for the City of Carrabelle, on a consulting, part-time basis just like Mr. Garrett. Soon after Ms. Molsbee was rehired, she assumed the responsibility for billing and customer relations. At that time, our customer base had grown to well over 1900. In 2008, Ms. Molsbee obtained her DEP operators license so that she was qualified to run all of

our operations on the island without our having to employ any other operators, such as Mr. Garrett and Mr. Painter. To obtain this license, Ms. Molsbee spent about $3,000 of her own money, as well as a great deal of effort on her own time. So after she obtained her license, I gave her the promised raise. She brought to my attention that Mr. Garrett was being paid $68,980 annually by Eastpoint Water & Sewer, plus health insurance, a generous state retirement/pension fund and other benefits for a total package in excess of $70,000 per year. She also reminded me that she was doing all of the billing, most of the collections and management of all customer relations on the island, whereas Eastpoint, like Carrabelle and Apalachicola, had separate departments for each of these functions. Based on this, I increased her salary to $60,000 per year, effective January 1, 2009. Otherwise, WMSI would have been in jeopardy of losing her to another utility company. After giving the raise to Ms. Molsbee, I rehired Mr. Garrett as assistant operator, with the promise of a truck and an executive pension plan, among other things. This allowed the utility to have redundancy and assurance that there is always a qualified operator on site or nearby in the county. This also allowed WMSI to terminate the consulting agreements with both Charlie Painter and Hank Garrett, which saved the company over $12,000 per year.

During this time, Sandra Chase was doing whatever needed to be done for WMSI, including the day-to-day management of both Hank Garrett and Nita Molsbee, as well as all other administrative functions of

the utility. Among other things, Ms. Chase got a certified operators license from DEP and she became certified as a cross-connection control administrator by attending a certified program at the University of Florida in Gainesville. From time to time throughout her career with WMSI, she has been solely responsible for the billing and customer relations as well as the cross connection control program. During this 30 year period of employment, Ms. Chase could have assumed the responsibilities of Hank Garrett or Nita Molsbee. She is invaluable to the company, and it would be unreasonable to expect her to earn less than $70,000 per year when one of her subordinates, who did not have as many years with the company, accepted a job with another utility at $70,000 per year. This company has doubled in size and complexity since the 1992 rate case and Ms. Chase has more overall responsibility than anyone else in the company, except me. She helps provide redundancy throughout the company because of her knowledge about the operations and administration. She is qualified to assume my duties if I should become incapacitated. This type of redundancy with highly qualified personnel is the reason we do not have water outages or water quality problems. Our top five management personnel have worked an average of 22 years each for the company. Among other advantages, this allows WMSI to pay only $201 per year in unemployment compensation taxes. This saves almost $3,000 per year over the taxes WMSI would have to pay otherwise. This has real value to the utility customers, but it is not possible to maintain such qualified,

experienced employees unless they are paid as much or more than they could make working for another utility. Hank Garrett demonstrated to all WMSI employees what the market rate is in Franklin County, and I used that as a guide in setting the salaries of both Ms. Molsbee and Ms. Chase. I also rehired Hank Garrett as an assistant operator because he is so valuable to the company as specifically recognized by the PSC in finding of Fact No. 58 on pages 74 and 75 of the final order in the 1992 rate case. I was able to keep all three of these valuable employees, Chase, Garrett and Molsbee, by cutting my own salary by $30,000 per year. This allowed me to keep the overall payroll $12,609 less during the test year of 2009 than the preceding year, 2008, as shown by Exhibit (GB-5) ___. In other words, we did not increase overall salaries and labor during the test year—we decreased them by over $12,000. We achieved greater coverage and efficiency while maintaining the same loyal, dedicated employees who understand this business and their obligation to the customers. It would be unfair and unreasonable to cut any of those salaries.

Q. Would you please explain your deferred compensation pension plan.

A. Yes, but first I would like to correct another inaccurate statement by Ms. Ramas. On page 41 of her testimony, she states, "it does not appear that the company is promptly funding its 401(k) pension accruals." That is not true. Our payment to Charles Schwab is due on or before the date we file our federal income tax return, which is always September 15 of the year

following the tax year. As I testified earlier, this was paid on schedule for 2009 and it will be paid as required for 2010. It was paid on September 14 in 2006, on September 13 in 2007, on July 18 in 2008, and on September 11, 2009. To the best of my knowledge it has been paid timely every year since the inception of the plan.

WMSI's deferred compensation plan is part of the company's employee benefit plan. It applies to all of WMSI management personnel, not just Sandra Chase and me. The terms of eligibility are set forth on page 1 of the plan which requires that the employee must (1) be highly compensated; (2) be part of a select management group; (3) be at least 55 years of age; and (4) have worked for the company a total of 25 years or more. Consistent with my philosophy of retaining the same qualified personnel throughout their career, this plan is designed to keep good people as long as possible, including an extra five years after they begin thinking about retirement. The plan has been used as a special incentive to keep Sandra Chase, Nita Molsbee and Hank Garrett. It was specifically referenced as an incentive to persuade Hank Garrett to leave his job and pension at Eastpoint and return to WMSI. It was used last year as one of the incentives in hiring another young employee who recently graduated from Apalachicola High School. He plans to make WMSI a career and get his operators license. WMSI cannot compete with other governmental utilities for good employees when they have such outstanding pension and benefit programs and we do not. It does not seem fair or reasonable that

WMSI cannot have fair and reasonable pensions comparable with state employees. The WMSI plan was designed to retain good employees for an additional five years, similar to the state "DROP" program. There was no reason to implement the deferred compensation plan in 1992 when the first part of the Employee Benefit Plan was approved because none of our employees qualified.

In 2008, I met in Tampa with two lawyers and a pension expert to explore the options to meet WMSI's requirements for a deferred compensation plan. They requested a fee of $25,000 to prepare an amendment to our plan, so I made a decision to do it myself. After further research and consultation with our outside plan administrator in New York, I prepared an amendment to our existing plan to be effective July 1, 2009. Under the WMSI plan, if a female employee such as Ms. Chase or Ms. Molsbee retires at age 65, she would have a life expectancy of 20 years. Assuming that female employee has accrued $200,000 in her WMSI pension plan account, that employee would receive $833 per month plus interest at 3% for the rest of her life. For a male, such as me, who retires at age 75 with $200,000 in their account, the life expectancy would be 10 years with a payment of $1,667 per month; plus interest at 3%. These are not unreasonably large payouts for retired employees who have basically devoted all or most of their professional lives to one utility company and its customers. On page 38 of her testimony, Ms. Ramas states that the cost of these pensions "should not be passed on to the

company's customers." Why not? This is a reasonable and necessary expense of operating a perpetual business which strives to keep dedicated employees. The cost of frequent employee turnover as shown by various studies and confirmed by my personal experience is greater than the cost of incentive programs such as the WMSI pension plan. The costs of the pension plans at all the public utilities in the area are passed on to the taxpayers or customers of those utilities all of which compete with WMSI for good employees. It is common knowledge that the state of Florida and all of its agencies have a very generous retirement/pension plan with a "DROP" program to reward and motivate long-term state employees to continue working past an age that they might otherwise retire. All of that is paid by the taxpayers, not the individual employees. It is difficult for WMSI to compete for good employees without a similar program. And it is difficult to explain to WMSI's 25+ year managers why they cannot have a program similar to the other utilities in the county, or similar to the pension plans enjoyed by the state employees who regulate them.

Q. Ms. Ramas also argues that the amendment to the WMSI Employee Benefit Plan should not be allowed because it is not immediately funded. Would you have a problem with the PSC adding a requirement that the plan be funded on a year-to-year basis, like they did in the 1992 rate case?

A. No, I would readily agree to any such requirement. We have funded the first part of the plan every year since the PSC entered its order in the 1992 case, and we can do so again using the same procedure with the same third-party administrator. In fact, I have no problem with any reasonable restrictions, requirements or modifications the PSC may want to make with regard to our plan. But I strongly feel that our top level managers who stay with the company over 25 years deserve a plan at least somewhat comparable to the plans provided to long time managers with the state of Florida and other public utility providers. I have promised this to all three of WMSI's managers who I hired in the early 80's, and they deserve to have that promise fulfilled.

Q. Do you agree with Ms. Ramas' recommendation on page 42 of her testimony that WMSI's employee training expenses for the 2009 test year should be reduced by $1,752?

A. No. Employee training and continuing education is an important function for WMSI. I have always insisted that our operators attend at least one training session per year. This year, in August, Hank Garrett attended a three-day training session in Jacksonville sponsored by the Florida Rural Water Association. At this meeting, he accepted an award on behalf of WMSI as a 20 year member of the association. The only reason Nita Molsbee did not attend the annual convention and training session in 2007, 2008 and 2009 is that she could not leave the system for three days. Now

that Mr. Garrett is back as a second operator, either he or Ms. Molsbee will attend this or some other training session every year. In fact, together they are required to have at least 45 hours of training per year to keep their DEP licenses. WMSI has already spent $2,606 on continuing education in the first eight months of 2010, as shown by the income statement attached as Exhibit (GB-3) ___. This is already very close to the $2,698 included in the test year for 2009. I asked Ms. Molsbee and Ms. Chase to attend the American Water Works Association (AWWA) training last year in San Francisco, but both were too busy with WMSI responsibilities. Instead, I attended and learned a great deal. Training and continuing education is necessary and beneficial to the customers. We have promised training to our newest employee, who just graduated from Apalachicola High School. WMSI is responsible for this training for all of its operators, and this is a reasonable and necessary expense that should be allowed.

Q. In the first part of your testimony, you discussed your pursuit of a wastewater certificate in 2009. Could you expand that discussion in light of Ms. Ramas' comments on page 43 of her testimony that WMSI's customers "should not be burdened with the costs associated with Mr. Brown's decision to attempt to expand his operations into a new area."

A. First of all, this was not a personal decision by me to expand into any "new area." This was a response by the utility to serve the needs of its

existing customers in its existing service area. A large group of our commercial customers were being threatened with either temporary or permanent closure of their businesses. Many commercial customers were severely restricted in their water use. For example, the number of seats allowed in several restaurants was cut back substantially by various orders from the Department of Health. Some were totally closed by court order. This was adversely and substantially reducing our water sales which meant that our fixed costs would have to be passed along disproportionately to our other customers whose rates would eventually have to be increased because of a decrease in commercial water sales. We had numerous requests for sewer service by our water customers. When Franklin County asked WMSI and several other utility companies to make formal presentations to the county commission about providing sewer service to the island, I reasonably thought that sewer had to be provided in the commercial area within a short period of time and that the water rates for WMSI customers could remain the same or actually be lowered by combining them with sewer rates. I was trying to avoid an increase in water rates for all of our existing customers by providing them with sewer service at a cost much less than would have to be charged by a competing company. My thought was that central sewer to allow development and increased water sales would also reduce the cost per gallon for each of our existing customers. This was not a fantasy or pipedream. Four of the five county commissioners personally told me they were in favor of central

sewer, at least in the central commercial area. Some of them later asked me to slow things down for political reasons, but they still led me to believe that we were working toward the same goal. I would not have proceeded otherwise. The sewer application did not work out, and I have now had to file this separate application for an increase in water rates. This would not have been necessary if WMSI's plan to provide sewer service had been successful. If WMSI had refused to respond to the requests for sewer service by its commercial water customers, or refused to respond to the formal request from the county government to make a sewer presentation, I believe the company would have been criticized, maybe even by members of the PSC, for failing to respond to the demands of its water customers who also needed wastewater service. This sewer endeavor was undertaken on behalf of WMSI water customers. It was a reasonable and prudent decision designed to prevent an increase in water rates, and it is fair and appropriate for those water customers to reimburse the costs.

Q. Would you please comment on the pro forma plant improvements discussed at pages 44 to 48 of Ms. Ramas' testimony.

A. WMSI and its lawyers and consultants have made it clear from the outset that there is no attempt to have the PSC set rates based upon pro-forma estimates. There is an attempt to reach a consensus as to what improvements should be made and the conditions under which those

improvements should be engineered, bid and financed. To date, WMSI has spent $61,000 on evaluation and planning. It appears that the improvements are reasonable and necessary, and that the only remaining issue is whether the new ground storage tank should be built on the existing site or a new site. After reviewing the testimony of OPC's engineer, Andrew Woodcock, I asked PBS&J to reevaluate its alternatives 2 and 3 from its report. This revision, which is being filed with the rebuttal testimony of Michael Scibelli, shows there is only a $64,000 difference between the cost of a new tank on a new site and the cost of a new tank on the old site. This $64,000 is not worth the risk of a major water outage on the island, not to mention the problematic issue of whether a sufficient temporary site can be found for the temporary storage and pumping facilities during demolition of the old tank and construction of a new tank on the same site. Also, the storage and shop/work area that WMSI will have when the old tank is converted is worth at least $64,000 to WMSI because it is badly needed. However, WMSI will follow whatever directive the PSC may give regarding these improvements. Basically, the utility and its lender, Citizens State Bank, need a comfort level that the cost of the improvements will be included in rates in a "true-up" proceeding after final construction plans have been prepared and after the bidding process has been completed according to the directions of the PSC.

Q. What is your reaction to the six page discussion of two backhoe trailers on pages 48 through 53 of Ms. Ramas' testimony?

A. Frankly, my reaction is mild indignation. Ms. Ramas starts in her first sentence on page 48 by stating that some transactions between WMSI and its affiliate, BMG "and even an outside party . . . are highly questionable," as if to imply that I have done something wrong. There is nothing wrong with selling a used trailer that WMSI bought for $7,007 to "an outside party" for $5,000 cash. I don't know who you sell something to if not "an outside party." And, there is nothing wrong with selling another used trailer to BMG for $10,000 resulting in a $6,000 gain to WMSI as shown on form 4797 attached to WMSI's 2009 tax return, a copy of which is attached as Exhibit (GB-2) ___. The only thing shown by the lengthy discussion in Ms. Ramas' testimony is that WMSI needs more CPA level accounting help to identify and track assets and to calculate depreciation on those assets. These trailers were on St. George Island with two different backhoes, and mistakes were made in properly identifying the trailers. The record keeping was not perfect, but I will again explain the substance of these trailer transactions. Around 2005, WMSI bought a backhoe trailer for around $7,000. I personally picked it up in west Florida and took it to the island. I was later told that this trailer would not handle our larger 410 backhoe, so I sold it for $5,000 cash to "an outside party," which was the only option available to get money for the trailer. WMSI then bought a larger trailer for approximately $16,000 which was

adequate to handle the 410 backhoe. I later determined that the trailer was not being used because the WMSI field technicians preferred driving the 410 rather than hauling it by trailer. I brought the trailer to Tallahassee and attempted to sell it. My attempts to sell the trailer were unsuccessful so I took it to a dealer who sells trailers. He agreed to place the trailer on his lot on consignment. After several months on his lot, he became doubtful about being able to sell it. The dealer also sells storage sheds and I thought we could possibly get more use out of a storage shed that could house our files and records. With this in mind, I traded the trailer for a storage shed that retailed for approximately $7,900. I placed the storage shed on real property owned by BMG, but it was never used for storage, primarily because WMSI personnel did not have the time to move the files. When BMG sold the real property on November 26, 2009, the buyer asked that the shed be left on the property. I then gave WMSI's controller a check for $10,000 to compensate WMSI for the trailer which I had traded for the shed. Until that time, I was unsure which company would end up with the shed. I considered $10,000 a fair price under the circumstances. I had no knowledge that the full $10,000 was booked without proper calculation for the depreciation. Accordingly, I agree that WMSI should not have booked any depreciation expense on the trailer after it was traded for the storage shed inasmuch as the shed was never used by WMSI. I requested that my CPA correct the journal entries and to make sure the $6,000 gain was included on WMSI's tax return for 2009.

There was never any intent to take advantage of WMSI or its rate payers. My opinion is that $5,000 was a fair, arms-length price for the first trailer, and that $10,000 was a fair price for the second trailer, even through the transaction as shown by the WMSI 2009 tax return. If not, WMSI will make any adjustments recommended by Ms. Ramas or the PSC.

Q. Would you please respond to the issue of company vehicles as reflected by pages 53 through 58 of Ms. Ramas' testimony.

A. In my 35 years of managing WMSI, the company has always provided me with a vehicle. The only exception was the early 90's when I was paid through a management company that provided me with a vehicle. For the past 15 years or so, the company has also provided Sandra Chase with a vehicle. That was always done with Ms. Chase using her personal credit to purchase the vehicle and then conveying title to WMSI through a bill of sale. The company then depreciated the vehicles as a business expense. Neither Ms. Chase nor I have ever been required to keep detailed travel logs. The PSC mandated that WMSI keep detailed travel records for field employees, which we have done, but this did not apply to vehicles driven by management. However, Ms. Chase and I have kept records on the total miles driven by each of us during the test year. Those miles are detailed on page 2, form 4562 of the WMSI 2009 tax return attached as Exhibit (GB-2) ___. On the vehicle driven by me, it shows a total of 22,068 miles during 2009, with 50%, or 11,034 miles, for business travel on behalf of

WMSI. Round trip from the Tallahassee office to St. George Island is 160 miles, and I drive another 40 miles or so while I am there. So, one trip per week accounts for 10,400 of those 11,034 miles, i.e., 52 x 200 = 10,400. That leaves 634 miles per year for other business use, which is an average of less than two miles per day. I drive much more than two miles per day taking care of WMSI business out of the office. I meet with WMSI's bankers in Perry, Crawfordville and across town in Tallahassee. I meet with contractors, vendors, accountants, lawyers, engineers, and various agency personnel having jurisdiction over WMSI at various locations in and out of Tallahassee. I can recall at least four trips to Jacksonville, five or six trips to Panama City, one trip to Tampa, two trips to St. Petersburg, one trip to Dothan, one trip to Pensacola, and trips to Valdosta and Albany, and two overnight trips to Orlando, all working on WMSI business. The 50% allocation to WMSI is a very favorable estimate to WMSI's customers. Sandra Chase does not make as many trips to the island as I do, but she drives daily on behalf for WMSI business including trips to banks both in Tallahassee and out of town, office of our pension plan administrator, office of our CPA, Ft. Knox storage unit, post office, DEP, PSC, NWFWMD, Federal Express, UPS, office of our engineers, office supply vendors, and various other vendors to pick up parts, supplies and equipment for island. Most companies with the complexity and size of WMSI provide vehicles for their President and Vice President, without a full 50% allocation for personal use. Both Ms. Chase and I are available

at any time of the day or night to respond to a water company emergency. There have been several instances when one of us has had to pick up a part and deliver it to St. George Island on an emergency basis to prevent a minor problem from developing into a major problem. It is reasonable for the company to provide vehicles to respond in these situations. Both vehicles have been made available for business use by other WMSI employees. My vehicle has been used several times by other employees for various needs. We will both be responsible for personal income taxes on our 50% portion of the vehicle expense. It would not be fair or reasonable for us to pay personally for 100% of the vehicle expense. Ms. Chase's mileage records are also included on form 4562 of the WMSI tax return. That shows that 50% is also a conservative estimate for her. Certainly, the overall average is much greater than 50%.

Q. What about the title to the vehicle driven by Ms. Chase?

A. When WMSI began providing a vehicle for Ms. Chase many years ago, it was on the condition that she purchase the vehicle on behalf of WMSI using her credit, with WMSI making the payments and using the depreciation on the vehicle. This has been the policy and procedure for years, and it has never been challenged by anyone, including the CPAs and others who have reviewed our books and records. In my opinion, a bill of sale does convey title to personal property in Florida, and that is what WMSI did with regard to the vehicle driven by Ms. Chase in the test

year. She will bear half of the costs and WMSI will bear half of the costs, as shown by the tax return attached as Exhibit (GB-2) ___. That is fair, reasonable and appropriate given the amount of travel that Sandra Chase does on behalf of WMSI as explained earlier.

Q. Do you agree with Ms. Ramas that WMSI's plant in service should be reduced by $100,000 as a result of the Scruggs transaction as described on pages 59 through 61 of her testimony?

A. Yes. That is the way it should have been handled originally on the WMSI books.

Q. Can you comment on the recommended adjustments to working capital set forth at pages 62 through 63 of Ms. Ramas' testimony?

A. A lot of that will depend on the PSC's decisions on related issues, such as the wastewater application costs and the pension issue. I will leave this for others to calculate.

Q. Do you agree with her used and useful adjustment?

A. No, but I will comment on that later when I am asked about the Andrew Woodcock testimony.

Q. Do you have comments about the cost of debt and rate of return issues discussed on pages 64 through 69 of Ms. Ramas' testimony?

A. First, with regard to Envision Credit loan on the 2007 Tahoe, we should look at the substance of the transaction as reflected on the tax returns and accounting records of both Ms. Chase and WMSI. The loan was signed by Ms. Chase, but it was immediately assumed and has been paid 100% by WMSI as agreed between the parties. This is similar to the dump truck loan which was signed by WMSI but assumed by the buyer, Dorman Brown, in Panama City, as discussed in my deposition. The title to that vehicle is still officially in the name of WMSI. But it was removed from WMSI's books for depreciation and other purposes, and the loan and related debt service is not charged to WMSI rate payers. If the Bill of Sale on the dump truck was adequate to transfer ownership away from WMSI, why is the Bill of Sale on the 2007 Tahoe not adequate to transfer ownership to WMSI? I do not believe the debt service on the loan on the vehicle I drove during the test year should be disallowed. That vehicle was not just "for the benefit of the President of WMSI" because I drove it primarily for WMSI business purposes as I described earlier. The Gulf State Bank loan is still in place. However, during the final "true up" phase of this case, new debt costs will need to be calculated that will include retirement of the Gulf State loan because Citizens State Bank will not make a $5,000,000 loan without a first mortgage and pledge of all of WMSI's water revenue.

Q. Does that conclude your testimony with regard to Ms. Ramas?

A. Yes.

Q. Did you review the corrected direct testimony filed by OPC witness Andrew Woodcock?

A. Yes, I did.

Q. Do you have any comments on the testimony of Andrew Woodcock?

A. Yes. I agree with most of his testimony, but I disagree with him about used and useful.

The PSC has previously found everything to be used and useful except the distribution lines in the plantation. Now, in light of the legalization of wells in the plantation so that we do not have mandatory hookups, and in light of the fact that the fire department and other agencies are constantly pressing WMSI to provide fire flow and pressure throughout the plantation, I do not believe it is fair or reasonable for any of the distribution lines in the plantation to be considered non-used and useful. All of these distribution lines are required to provide fire flow and pressure to approximately 500 existing water customers in the plantation. If WMSI is going to continue the installation of fire hydrants, pumps and other fire protection improvements in the plantation, it is not reasonable to disallow a return on any part of the distribution system, all of which must be available in the event of a fire.

Q. Does that conclude your testimony with regard to Andrew Woodcock?

A. Yes, it does.

Q. Did you review the testimony of Debra Dobiac?

A. Yes.

Q. Do you have a response to the testimony of Debra Dobiac, including the auditor's report attached to her testimony?

A. Yes, I agree with most of her testimony, and I have the following comments about the six audit findings:

Audit Finding No. 1: I disagree. I believe WMSI handled this correctly as a reduction to plant. Maintenance of the supply main would have been required in any event, so that is a proper expense item.

Audit Finding No. 2: I agree.

Audit Finding No. 3: I agree with the $9,257 adjustment, and I agree that the $65,000 adjustment should be reconsidered. That $65,000 payment was paid to me and my affiliates (not the utility company) by the homeowners as settlement of a lawsuit that did not involve the utility company. It was then advanced by me to the utility company as an equity

transaction. There was never any expectation that I would ever be repaid by the utility company. And there was never any thought or expectation that this $65,000 was a customer advance to be repaid someday to the homeowners. It certainly was not CIAC, as the PSC previously acknowledged. It does not meet the NARUC definition of a customer advance. The only "advance" was from me as the primary owner, which is an equity advance. That is the way it was handled on our books, on our tax returns, and by the parties themselves, including the homeowners who have never asked for reimbursement as they would if it had been an actual customer advance, which makes reference to repayment. Accordingly, this $65,000 adjustment should not be made.

Audit Finding No. 4: I agree with the adjustment for unamortized debt discount expense, but I disagree with the adjustment for the wastewater certificate expense. That wastewater expense should be allowed for the reasons I explained earlier.

Audit Finding No. 5: I have no opinion on this because I do not have any detail on the $12,000 in miscellaneous non-utility expenses. As soon as Frank Seidman and I can review a list of these, I can give my opinion or response.

Audit Finding No. 6: I would need to see the detail regarding the $9,104 in transportation expense before I could state a position. We have documentation for our transportation expense, and I do not know of anything that was outside the test year.

Q. Does this conclude your testimony with regard to Debra Dobiac?

A. Yes, it does.

Q. Have you reviewed the testimony of Angela Chelette, filed on behalf of the NWFWMD?

A. Yes, I have.

Q. Did the District have anything to do with setting WMSI's block rates, which provide a higher charge per gallon for water use over a certain level?

A. Yes, near the end of our limited proceeding before the PSC which was nearing completion in 2005, the NWFWMD insisted that the PSC impose block rates on WMSI and its customers. The PSC agreed over WMSI's objection, and the final order in the limited proceeding in early 2006 imposed rates that were 50% higher for over 15,000 gallons per month. Around this same time, our field personnel started reporting a large number of shallow wells in St. George's Plantation, which were illegal both under the state Development of Regional Impact order (DRI)

enforced by the Department of Community Affairs (DCA) under Chapter 380 of the Florida Statutes, as well as a Franklin County ordinance. Since these wells had neither a consumptive use permit nor a well construction permit, they were also illegal under state law as administered by the NWFWMD which required both types of permits for all the "landscape" wells in the Plantation. This was a serious issue for WMSI, both because of lost revenue under the new block rates and because of the threat raised for other customers who we have to protect under our cross-connection control program. I then asked our engineer, Les Thomas, to look into the matter and we had a couple of email exchanges with Ms. Chelette, copies of which are attached as Exhibit (GB-6) ___. In her email, Ms. Chelette asked if we could "provide an address where you know illegal wells have been installed." Ms. Chelette later sent an email to Mr. Thomas showing that only about 15 wells on all of St. George Island had permits, and none of those were in the Plantation. See Exhibit (GB-7) ___. Before I directed WMSI personnel to spend more time documenting the illegal wells, I sent an email to Ms. Chelette asking if such wells were going to be allowed so that fact could "be communicated to the FPSC so they can factor that into our rate structure." That was in August, 2005, before the order setting the block rates was entered in February, 2006. A copy of my email and the response is attached as Exhibit (GB-8) ___. That was very important to WMSI at the time because we were trying to convince the PSC staff not to recommend block rates, and I wanted the staff to know if the District was

going to allow unlimited "landscape" wells that would greatly reduce our revenue from the top block rates. During the period between the summer of 2005 and the summer of 2007, WMSI began finding more and more shallow wells. We stopped several well drillers by reporting them to the District.

In August, 2007, after the block rates were imposed, WMSI's manager sent a letter to the NWFWMD with a list of 95 illegal wells in the Plantation. That letter is attached as Exhibit (GB-9) ___, together with a letter showing that Franklin County had never issued any well permits in the Plantation as required by law.

After the attention and pressure imposed by WMSI, NWFWMD personnel came to the island and documented almost 200 wells, most of which were illegal because they did not have the proper permits. See Exhibit (GB-10) ___, which shows the exact location of the wells and the fact that they were being installed for as little as $75. WMSI has been told by a local well driller that the going rate now is $100. That price certainly does not include any permitting, which is hardly ever done.

In 2008, after WMSI could not get any relief or enforcement of the law by talking and corresponding with the District, we filed an administrative challenge to two well permit applications in the Plantation. See Exhibit (GB-11) ___. By that time, we had directed so much attention and pressure on the issue that water customers in the Plantation had to

seek permits, unlike the 100 or so water customers in the Plantation who had already drilled wells without permits.

Rather than go through the administrative hearing and fact finding process which would have exposed the environmental damage to the Bay and the economic damage to WMSI caused by shallow wells, the District filed a special direct action in the First District Court of Appeal which resulted in an order giving the NWFWMD sole jurisdiction over wells in the Plantation. The District then issued the two permits in question and began working on a rule change to legalize shallow wells all over St. George Island with no consumptive use permit, as previously required for all "landscape" wells anywhere on the island, all with no notice to WMSI. To get around section 120.54(3)(b)2.a of the Florida Statutes, which requires the District to consider the impact to its rules on "small businesses" such as WMSI, the District certified that because "no negative impact is anticipated, rule adoption will proceed as outlined in the notice." See Exhibit (GB-12) ___. WMSI had been "screaming" to the District for four years about the impact these shallow wells were having on the utility. How could they certify that the rule would have no impact on WMSI as a small business? The District had just paid a large sum of money for a special engineering report three months earlier which concluded that shallow wells on St. George Island would pump nearly 390,000 gallons of water per day, which would "save" that amount from the Floridian Aquifer from which WMSI would otherwise be pumping. See Exhibit (GB-13)

___. The District knows that every gallon not pumped from the Floridian Aquifer is a gallon that WMSI does not sell. (WMSI Daily Loss = 390,000 gallons x $4.91/per thousand = $1,914.90 PER DAY). Again, how could they certify no economic impact to WMSI as a "small business" 3 months after reading that report?

Q. Does this new rule that took effect in January of 2010 apply only to non-potable wells?

A. No, the rule amendment clearly applies to all "non-public" wells on St. George Island, not "non-potable" wells. See Rule 40A-2.051(6), F.A.C., in Exhibit (GB-14) ___. Accordingly, as of now, anyone can install a well for "domestic water use" or any other use that is not open to the general public so long as the well does not draw more than an average of 15,000 gallons per day and is not more than 4 inches in diameter. See Rule 40A-2.051(1), Exhibit (GB-14) ___. There is no way for WMSI to distinguish between "potable" and non-potable" wells on St. George Island without a detailed plumbing investigation inside and outside. Neither requires the homeowner to obtain any type of permit from the NWFWMD nor to notify WMSI. WMSI continues to find shallow wells as part of its cross-connection control, but they are hard to find because customers still try to hide them. As of now, WMSI knows of 324 wells at our service locations as shown by Exhibit (GB-15) ___. In addition, WMSI has identified approximately 35 shallow wells at occupied structures that do not use

WMSI water. To overcome the perception that wells are not allowed on St. George Island, and to "encourage" the installation of such wells, the District started issuing press releases resulting in articles such as the one attached as Exhibit (GB-16) ___. The District pointed out that the new rule "will eliminate the hassle of water use permitting" and will mean that "people don't have to come in and go through that big process." The press release and the article stated that the new rule "eliminates some of the problems that surfaced during recent inspections by the Florida Department of Health which found irrigation wells were dug to close to septic tanks" and that "homeowners who had failed to secure individual water use permits will now be in compliance with that legal requirement." In other words, the environmental hazards and the hundreds of violations of the law have now all been solved with one simple rule change. The wells and septic tanks are still too close to each other, and now new wells are being "encouraged" with no notice to anyone and with no control over how close they are placed to over 1800 septic tanks on the island, many of which are on 25 foot lots. Even if the well installer should get a construction permit, which most do not, that is a "notice" type of permit with no check as to how close they may be to a septic tank. As a matter of mathematics and geography, it is simply not possible for all these hundreds of wells and septic tanks in the 25 foot lot commercial area to be at least 75 feet from each other. In fact, WMSI knows of numerous violations of the 75 foot separation rule. This new rule may have solved

the big "hassle" of going through "that big process" for the NWFWMD. But it has created tremendous economic and environmental problems for WMSI. In addition to lost revenue, the rule means that WMSI customers no longer have to provide any notice or get any type of permit to drill any type of shallow well on St. George Island. They can get "a guy from Eastpoint" to put in a well for $75-$100, as documented by my answers to interrogatories filed earlier in this case. Nevertheless, WMSI is still required to guard the health and safety of its customers by somehow finding all the wells and requiring the installation of a cross-connection control device. Wells are the most serious source of cross-connection hazards and lack of a back-flow preventor can cause serious illness and death. This legalization of existing wells and deregulation of the permitting process will require the expansion of our cross-connection program, including the hiring of one more field technician to police over 1800 service locations on a constant basis. That cost has not even been factored into our MFRs in this case. However, the Commission should make an allowance in this case, so that WMSI can expand its cross-connection program.

Q. Do you have anything to add before concluding your testimony?

A. Yes, I would like to again emphasize that this case was filed primarily because WMSI is losing revenue every year. Our revenue is simply not adequate to cover our ordinary and reasonable expenses.

Q. Does that conclude your testimony?

A. Yes.

WATER MANAGEMENT SERVICES, INC.
CASH EXCHANGES

2008	CASH IN	CASH OUT	NET
131.08	(30,279.05)	221,825.00	191,545.95
131.09	(201,000.00)	50,500.00	(150,500.00)
131.10			0.00
131.11		6,500.00	6,500.00
131.12			0.00
132.10		65,000.00	65,000.00
135.30		10,000.00	10,000.00
	(231,279.05)	353,825.00	122,545.95

2009	CASH IN	CASH OUT	NET
131.08	(1,048.00)	305,240.00	304,192.00
131.09	(184,364.03)	54,841.00	(129,523.03)
131.10	(33,155.00)	20,500.00	(12,655.00)
131.11	0.00	27,335.00	27,335.00
131.12	(111.30)	0.00	(111.30)
132.10		2,700.00	2,700.00
135.30	(194,500.00)		(194,500.00)
	(413,178.33)	410,616.00	(2,562.33)

2010	CASH IN	CASH OUT	NET
131.08	0.00	147,105.00	147,105.00
131.09	(329,875.00)	14,640.00	(315,235.00)
131.10			0.00
131.11	0.00	13,850.00	13,850.00
131.12			0.00
132.10			0.00
135.30			0.00
	(329,875.00)	175,595.00	(154,280.00)

SUMMARY

YEAR	CASH IN	CASH OUT	NET
2008	(231,279.05)	353,825.00	122,545.95
2009	(413,178.33)	410,616.00	(2,562.33)
2010	(329,875.00)	175,595.00	(154,280.00)
3 YR TOTAL	**(974,332.38)**	**940,036.00**	**(34,296.38)**

GENE D. BROWN
CASH EXCHANGES CORRECTION

	2008	2009
TOTAL CASH EXCHANGES PER OPC	261,495.95	131,037.67
REMOVE GENE D. BROWN NET PAYCHECKS	(123,950.00)	(115,600.00)
REMOVE BROWN MGMT GROUP RENT CHECKS	(15,000.00)	(18,000.00)
	---	---
SUB-TOTAL	**122,545.95**	**(2,562.33)**
	==========	==========

Form **1120**
Department of the Treasury
Internal Revenue Service

U.S. Corporation Income Tax Return

For calendar year 2009 or tax year beginning _____, 2009, ended _____, 20___
▶ See separate instructions.

OMB No. 1545-0123
2009

A Check if:
1a Consolidated return (attach Form 851)
b Life/nonlife consolidated return
2 Personal holding co. (attach Sch. PH)
3 Personal service corp. (see instructions)
4 Schedule M-3 attached

Use IRS label. Otherwise, print or type.

Name — No., street, and room or suite no. — City/town, state, and ZIP code

WATER MANAGEMENT SERVICES INC.
250 JOHN KNOX ROAD #4
TALLAHASSEE, FL 32303

B Employer identification no.: 59-3449317
C Date incorporated: 04-29-1997
D Total assets (see instructions): $ 7,955,199

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

INCOME	1a	Gross receipts/sales: 1,316,401 — b Less returns and allowances: — c Bal ▶	1c	1,316,401	
	2	Cost of goods sold (Schedule A, line 8)	2	0	
	3	Gross profit. Subtract line 2 from line 1c	3	1,316,401	
	4	Dividends (Schedule C, line 19)	4		
	5	Interest	5	9,412	
	6	Gross rents	6		
	7	Gross royalties	7		
	8	Capital gain net income (attach Schedule D (Form 1120))	8	5,994	
	9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9		
	10	Other income (see instructions -- attach schedule)	10	34,596	#1
	11	**Total income.** Add lines 3 through 10 ▶	11	1,366,403	
DEDUCTIONS (SEE INSTRUCTIONS FOR LIMITATIONS ON DEDUCTIONS)	12	Compensation of officers (Schedule E, line 4) ▶	12	141,684	
	13	Salaries and wages (less employment credits)	13	314,455	
	14	Repairs and maintenance	14	88,341	
	15	Bad debts	15	1,500	
	16	Rents	16	35,991	
	17	Taxes and licenses	17	100,197	#2
	18	Interest	18	305,970	
	19	Charitable contributions	19	0	
	20	Depreciation from Form 4562 not claimed on Schedule A or elsewhere on return (attach Form 4562)	20	254,595	
	21	Depletion	21		
	22	Advertising	22	420	
	23	Pension, profit-sharing, etc., plans	23	130,569	
	24	Employee benefit programs	24		
	25	Domestic production activities deduction (attach Form 8903)	25		
	26	Other deductions (attach schedule)	26	346,837	#3
	27	**Total deductions.** Add lines 12 through 26 ▶	27	1,720,559	
	28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28	-354,156	
	29	Less: a Net operating loss deduction (see instructions) 29a: 0			
		b Special deductions (Schedule C, line 20) 29b:	29c	0	
TAX, CREDITS AND PAYMENTS	30	**Taxable income.** Subtract line 29c from line 28 (see instructions)	30	-354,156	
	31	**Total tax** (Schedule J, line 10)	31	0	
	32a	2008 overpayment credited to 2009 32a:			
	b	2009 estimated tax payments 32b:			
	c	2009 refund applied for on Form 4466 32c: ( ) d Bal ▶ 32d:			
	e	Tax deposited with Form 7004 32e:			
	f	Credits: (1) Form 2439 (2) Form 4136 32f:			
	g	Refundable credits from Form 3800, line 19c, and Form 8827, line 8c 32g:	32h	0	
	33	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ ☐	33		
	34	**Amount owed.** If line 32h is smaller than the total of lines 31 and 33, enter amount owed	34	0	
	35	**Overpayment.** If line 32h is larger than the total of lines 31 and 33, enter amount overpaid	35	0	
	36	Enter amt. from line 35 you want: Credited to 2010 estimated tax ▶ 0 Refunded ▶	36	0	

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules & statements, & to the best of my knowledge & belief, it is true, correct, & complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: [signature] — Date: 9/15/10 — Title: President

May the IRS discuss this return with preparer shown below (see inst.)? ☐ Yes ☒ No

Paid Preparer's Use Only

Preparer's signature: Barbara S. Withers	Date: 9-13-10	Check if self-employed ☒	Preparer's SSN or PTIN: P00138982
Firm's name (or yours if self-employed), address, and ZIP code: Barbara Sheehan Withers CPA 411 Live Oak Plantation Rd Tallahassee, FL 32312-2364		EIN 55-0801880 Phone no. (850) 893-4080	

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Schedule A Cost of Goods Sold (see instructions)

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	
6	**Total.** Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	**Cost of goods sold.** Subtract line 7 from line 6. Enter here and on page 1, line 2	8	

9a Check all methods used for valuing closing inventory:
- (i) ☐ Cost
- (ii) ☐ Lower of cost or market
- (iii) ☐ Other (Specify method used and attach explanation.) ▶

b Check if there was a writedown of subnormal goods ▶ ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶ ☐

d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO 9d

e If property is produced or acquired for resale, do the rules of section 263A apply to the corporation? ☐ Yes ☐ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☐ No

Schedule C Dividends and Special Deductions (see instructions)

		(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3	Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8	Dividends from wholly owned foreign subsidiaries		100	
9	**Total.** Add lines 1 through 8. See instructions for limitation			0
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11	Dividends from affiliated group members		100	
12	Dividends from certain FSCs		100	
13	Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14	Income from controlled foreign corps. under subpart F (attach Form(s) 5471)			
15	Foreign dividend gross-up			
16	IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17	Other dividends			
18	Deduction for dividends paid on certain preferred stock of public utilities			
19	**Total dividends.** Add lines 1 through 17. Enter here and on page 1, line 4 ▶	0		
20	**Total special deductions.** Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b ▶			0

Schedule E Compensation of Officers (see instructions for page 1, line 12)

Note: Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1) are $500,000 or more.

1 (a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of corporation stock owned (d) Common	(e) Preferred	(f) Amount of compensation
GENE D BROWN	[redacted]	95.00 %	%	%	141,684
		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	

2	Total compensation of officers	141,684
3	Compensation of officers claimed on Schedule A and elsewhere on return	
4	Subtract line 3 from line 2. Enter the result here and on page 1, line 12	141,684

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Schedule J Tax Computation (see instructions)

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)) ▶ ☐			
2	Income tax. Check if a qualified personal service corporation (see instructions) ▶ ☐		2	0
3	Alternative minimum tax (attach Form 4626)		3	
4	Add lines 2 and 3		4	
5a	Foreign tax credit (attach Form 1118)	5a		
b	Credit from Form 8834, line 29	5b		
c	General business credit (attach Form 3800)	5c		
d	Credit for prior year minimum tax (attach Form 8827)	5d		
e	Bond credits from Form 8912	5e		
6	**Total credits.** Add lines 5a through 5e		6	0
7	Subtract line 6 from line 4		7	0
8	Personal holding company tax (attach Schedule PH (Form 1120))		8	
9	Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Form 8902 ☐ Other (attach schedule)		9	
10	**Total tax.** Add lines 7 through 9. Enter here and on page 1, line 31		10	0

Schedule K Other Information (see instructions)

		Yes	No
1	Check accounting method: a ☐ Cash b ☒ Accrual c ☐ Other (specify) ▶		
2	See the instructions and enter the:		
a	Business activity code no. ▶ 221300		
b	Business activity ▶ WATER UTILITIES		
c	Product or service ▶ WATER		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		X
	If "Yes," enter name and EIN of the parent corporation ▶		
4	At the end of the tax year:		
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)	X	
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G)		X
5	At the end of the tax year, did the corporation:	Yes	No
a	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851, Affiliations Schedule? For rules of constructive ownership, see instructions		X
	If "Yes," complete (i) through (iv)		

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

Schedule K Continued

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions . . . . . If "Yes," complete (i) through (iv).		X

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6	During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.) . . . . . If "Yes," file **Form 5452,** Corporate Report of Nondividend Distributions. If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.	X
7	At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock? . . . . . For rules of attribution, see section 318. If "Yes," enter: (i) Percentage owned ▶ _____ and (ii) Owner's country ▶ _____ (c) The corporation may have to file **Form 5472,** Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ _____	X
8	Check this box if the corporation issued publicly offered debt instruments with original issue discount . . . . . ▶ ☐ If checked, the corp. may have to file **Form 8281,** Information Return for Publicly Offered Original Issue Discount Instruments.	
9	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ $ _____	
10	Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ 3	
11	If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here . . . . . ▶ ☒ If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.	
12	Enter available NOL carryover from prior tax years (do not reduce it by any deduction on ln. 29a.) ▶ $ 985,269	
13	Are the corporation's total receipts (line 1a plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than $250,000? . . . . . If "Yes," the corporation is not required to complete Sch. L, M-1, and M-2 on page 5. Instead, enter total amount of cash distributions and book value of property distributions (other than cash) made during the tax year. ▶ $	X

Schedule L Balance Sheets per Books

Assets	Beginning of tax year (a)	Beginning of tax year (b)	End of tax year (c)	End of tax year (d)	
1 Cash		-18,981		-16,343	
2a Trade notes and accounts receivable	122,219		115,908		
b Less allowance for bad debts	(24,500)	97,719	(26,000)	89,908	
3 Inventories					
4 U.S. government obligations					
5 Tax-exempt securities (see instructions)					
6 Other current assets (attach schedule)					
7 Loans to shareholders					
8 Mortgage and real estate loans					
9 Other investments (attach schedule)					
10a Buildings and other depreciable assets	8,926,461		8,902,857		
b Less accumulated depreciation	(4,032,741)	4,893,720	(4,246,251)	4,656,606	
11a Depletable assets					
b Less accumulated depletion	( )		( )		
12 Land (net of any amortization)		835,886		835,886	
13a Intangible assets (amortizable only)	189,303		221,582		
b Less accumulated amortization	( )	189,303	( )	221,582	
14 Other assets (attach schedule)		2,190,830		2,167,560	#5
15 Total assets		8,188,477		7,955,199	
Liabilities and Shareholders' Equity					
16 Accounts payable		91,933		201,615	
17 Mortgages, notes, bonds payable in less than 1 year		359,836		157,596	
18 Other current liabilities (attach schedule)		188,975		240,900	#6
19 Loans from shareholders					
20 Mortgages, notes, bonds payable in 1 year or more		7,467,817		7,653,280	
21 Other liabilities (attach schedule)		21,037		20,737	#7
22 Capital stock: a Preferred stock					
b Common stock	10,000	10,000	10,000	10,000	
23 Additional paid-in capital		1,441,089		1,441,089	#8
24 Retained earnings -- Appropriated (attach sch.)					
25 Retained earnings -- Unappropriated		-1,392,210		-1,770,018	
26 Adjustments to shareholders' equity (attach sch.)					
27 Less cost of treasury stock		( )		( )	
28 Total liabilities and shareholders' equity		8,188,477		7,955,199	

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: Schedule M-3 required instead of Schedule M-1 if total assets are $10 million or more--see instructions

1 Net income (loss) per books	-377,808	7 Income recorded on books this year not included on this return (itemize): Tax-exempt interest $	
2 Federal income tax per books			
3 Excess of capital losses over capital gains			
4 Inc. subject to tax not recorded on books this year (itemize):		8 Deductions on this return not charged against book income this year (itemize): a Depreciation $	
5 Expenses recorded on books this year not deducted on this return (itemize): a Depreciation $ b Charitable contributions $ c Travel and entertainment $ 23,652	23,652	b Charitable contributions $	
		9 Add lines 7 and 8	
6 Add lines 1 through 5	-354,156	10 Income (page 1, line 28) -- line 6 less line 9	-354,156

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	-1,392,210	5 Distributions: a Cash	
2 Net income (loss) per books	-377,808	b Stock	
3 Other increases (itemize):		c Property	
		6 Other decreases (itemize):	
		7 Add lines 5 and 6	
4 Add lines 1, 2, and 3	-1,770,018	8 Balance at end of year (line 4 less line 7)	-1,770,018

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2009 SCHEDULE M-1 EXPLANATION ATTACHMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

Computation of Net Income (Loss) Per Books
Form 1120, Schedule M-1, Line 1

Income (loss) (Schedule M-1, line 10) carries from Form 1120, page 1, line 28	-354,156
Increases:	
Deductions on return not charged against book income (Schedule M-1, line 8)	
Income recorded on books not included on return (Schedule M-1, line 7)	
Decreases:	
Expenses recorded on books not included on return (Schedule M-1, line 5)	23,652
Income subject to tax not recorded on books (Schedule M-1, line 4)	
Excess capital losses over capital gains (Schedule M-1, line 3)	
Federal income tax per books (Schedule M-1, line 2)	
Computed net income (loss) per books (Schedule M-1, line 1)	-377,808

SCHEDULE D (Form 1120)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ See separate instructions.

OMB No. 1545-0123

2009

Name
WATER MANAGEMENT SERVICES INC.

Employer identification number
59-3449317

Part I Short-Term Capital Gains and Losses -- Assets Held One Year or Less

(a) Description of property (Example: 100 shares of Z Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price (see instructions)	(e) Cost or other basis (see inst.)	(f) Gain or (loss) (Subtract (e) from (d))
1					

2	Short-term capital gain from installment sales from Form 6252, line 26 or 37	2	
3	Short-term gain or (loss) from like-kind exchanges from Form 8824	3	
4	Unused capital loss carryover (attach computation)	4	( )
5	Net short-term capital gain or (loss). Combine lines 1 through 4	5	

Part II Long-Term Capital Gains and Losses -- Assets Held More Than One Year

6					

7	Enter gain from Form 4797, line 7 or 9	7	5,994
8	Long-term capital gain from installment sales from Form 6252, line 26 or 37	8	
9	Long-term gain or (loss) from like-kind exchanges from Form 8824	9	
10	Capital gain distributions (see instructions)	10	
11	Net long-term capital gain or (loss). Combine lines 6 through 10	11	5,994

Part III Summary of Parts I and II

12	Enter excess of net short-term capital gain (line 5) over net long-term capital loss (line 11)	12	
13	Net capital gain. Enter excess of net long-term capital gain (line 11) over net short-term capital loss (line 5)	13	5,994
14	Add lines 12 and 13. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns. If the corporation has qualified timber gain, also complete Part IV	14	5,994

Note. If losses exceed gains, see **Capital losses** in the instructions.

Part IV Alternative Tax for Corporations with Qualified Timber Gain.

Complete Part IV only if the corporation has qualified timber gain under section 1201(b). Skip this part if you are filing Form 1120-RIC. See instructions.

15	Enter qualified timber gain (as defined in section 1201(b)(2))	15		
16	Enter taxable income from Form 1120, page 1, line 30, or the applicable line of your tax return	16		
17	Enter the smallest of: (a) the amount on line 15; (b) the amount on line 16; or (c) the amount on Part III, line 13	17		
18	Multiply line 17 by 15%		18	
19	Subtract line 13 from line 16. If zero or less, enter -0-	19		
20	Enter the tax on line 19, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the return with which Schedule D (Form 1120) is being filed		20	
21	Add lines 17 and 19	21		
22	Subtract line 21 from line 16. If zero or less, enter -0-	22		
23	Multiply line 22 by 35%		23	
24	Add lines 18, 20, and 23		24	
25	Enter the tax on line 16, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the return with which Schedule D (Form 1120) is being filed		25	
26	Enter the smaller of line 24 or line 25. Also enter this amount on Form 1120, Schedule J, line 2, or the applicable line of your tax return		26	

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SCHEDULE G (Form 1120)
Department of the Treasury
Internal Revenue Service

Information on Certain Persons Owning the Corporation's Voting Stock

▶ Attach to Form 1120.
▶ See instructions.

OMB No. 1545-0123

2009

Name: WATER MANAGEMENT SERVICES INC.

Employer identification number (EIN): 59-3449317

Part I Certain Entities Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock
SGI UTIL. CO LTD	59-1950858	LTD PARTSHIP	USA	85

Part II Certain Individuals and Estates Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2009

Attachment Sequence No. **67**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
WATER MANAGEMENT SERVICES INC.	FOR FORM 1120	59-3449317

Part I **Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	$250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	$800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000

6	(a) Description of property	(b) Cost (busn. use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	250,000
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II **Special Depreciation Allowance and Other Depreciation** (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	10,744
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	12,910

Part III **MACRS Depreciation** (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	222,101
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B -- Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property		10,743	25 yrs.	HY	S/L	215
h	Residential rental property			27.5 yrs.	MM	S/L	
				27.5 yrs.	MM	S/L	
i	Nonresidential real property			39 yrs.	MM	S/L	
					MM	S/L	

Section C -- Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year			12 yrs.	S/L	
c	40-year			40 yrs.	MM	S/L

Part IV **Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	8,625
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations – see instructions	22	254,595
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A -- Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support business/investment use claimed? [X] Yes [ ] No 24b If "Yes," is the evidence written? [X] Yes [ ] No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Busn./ investment use percentage	(d) Cost or other basis	(e) Basis for depr. (busn./investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use:								
2008 GMC S	09-12-2008	100.0%	30,312	30,312	05	200DBHY	4,800	
		%						
		%						
27 Property used 50% or less in a qualified business use:								
2008 GMC S	10-10-2007	50.00%	42,886	21,443	10	S/L-	1,425	
USED 2007	06-30-2008	50.00%	30,413	15,207	05	S/L- HY	2,400	
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28	8,625	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B -- Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)	18492		11034		13314							
31 Total commuting miles driven during the year			2500		2500							
32 Total other personal (noncommuting) miles driven			8534		10814							
33 Total miles driven during the year. Add lines 30 through 32	18492		22068		26628							
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?		X	X		X							
35 Was the vehicle used primarily by a more than 5% owner or related person?		X	X		X							
36 Is another vehicle available for personal use?		X	X		X							

Section C -- Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year (see instructions):					
43 Amortization of costs that began before your 2009 tax year				43	38,800
44 Total. Add amounts in column (f). See the instructions for where to report				44	38,800

Form **4797**

Department of the Treasury
Internal Revenue Service (99)

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return. ▶ See separate instructions.

OMB No. 1545-0184

2009

Attachment Sequence No. 27

Name(s) shown on return: WATER MANAGEMENT SERVICES INC.

Identifying number: 59-3449317

1 Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) 1

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft -- Most Property Held More Than 1 Year (see instructions)

2 (a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements & expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) & (e)

3 Gain, if any, from Form 4684, line 43	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	5994
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:	7	5994
Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.		
Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.		
8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8	
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)	9	

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7	11	( )
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 35 and 42a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:		
a If the loss on line 11 includes a loss from Form 4684, line 39, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See inst.	18a	
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14	18b	

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255
(see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A 1245 - BACKHOE TRAILER	06-30-2005	12-22-2009
B		
C		
D		

These columns relate to the properties on lines 19A - 19D. ▶		Property A	Property B	Property C	Property D
20 Gross sales price (Note: See line 1 before completing.)	20	10000			
21 Cost or other basis plus expense of sale	21	16022			
22 Depreciation (or depletion) allowed or allowable	22	12016			
23 Adjusted basis. Subtract line 22 from line 21	23	4006			
24 Total gain. Subtract line 23 from line 20	24	5994			
25 If section 1245 property:					
a Depreciation allowed or allowable from line 22	25a				
b Enter the smaller of line 24 or 25a	25b				
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a Additional depreciation after 1975 (see instructions)	26a				
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b				
c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c				
d Additional depreciation after 1969 and before 1976	26d				
e Enter the smaller of line 26c or 26d	26e				
f Section 291 amount (corporations only)	26f				
g Add lines 26b, 26e, and 26f	26g				
27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).					
a Soil, water, and land clearing expenses	27a				
b Line 27a multiplied by applicable percentage (see inst.)	27b				
c Enter the smaller of line 24 or 27b	27c				
28 If section 1254 property:					
a Intangible drilling & development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a				
b Enter the smaller of line 24 or 28a	28b				
29 If section 1255 property:					
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a				
b Enter the smaller of line 24 or 29a (see instructions)	29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	5,994
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 37. Enter the portion from other than casualty or theft on Form 4797, line 6	32	5,994

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33		
34 Recomputed depreciation (see instructions)	34		
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		

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2009 CAPITAL LOSS CARRYOVER SUMMARY STATEMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

Capital Loss Carryover Available in 2009	0
Current Year Net Capital Gain/Loss	5,994
Capital Loss Carryover to 2010	0

2009 DETAIL STATEMENTS

WATER MANAGEMENT SERVICES INC.
59-3449317

STATEMENT #1 - Other Income (FM 1120/1120C LN 10/9)

CIAC REVENUE	26,939	
MISC SERVICE REVENUE	2,911	
GUARANTEED REVENUE-AFPI	246	
SALE OF EASEMENT	4,500	
TOTAL CARRIED TO FM 1120/1120C LN 10/9		34,596

STATEMENT #2 - Taxes & Licenses (1120/H/1120C 17/12/15)

Taxes & Licenses:		
Payroll Tax	33,265	
Real Estate Tax	4,770	
Other Taxes	59,380	
Licenses	2,782	
TOTAL Taxes & Licenses	100,197	
TOTAL CARRIED TO 1120/H/1120C 17/12/15		100,197

STATEMENT #3 - Other Deductions (1120/H/1120C 26/15/23)

Other Deductions:		
Amortization	38,800	
Bank Charges	3,180	
Postage	7,873	
Supplies	18,791	
Telephone	10,864	
Travel	3,607	
Uniforms	3,191	
Utilities	2,432	
PURCHASED POWER	75,419	
CHEMICALS	13,565	
CONTRACTUAL SERVICES - MANAGEMENT	7,250	
CONTRACTUAL SERVICES - ACCOUNTING	4,225	
CONTRACTUAL SERVICES - LEGAL	4,809	
CONTRACTUAL SERVICES - OTHER	46,407	
CONTRACTUAL SERVICES - TESTING	3,265	
CONTRACTUAL SERVICES - ENG	27,500	
TRANSPORTATION EXPENSES	23,168	
MISC. EXPENSES	46	
DUES & SUBSCRIPTIONS	3,148	
CONTINUING EDUCATION	1,465	
TOTAL Other Deductions	299,005	
Insurance:		
INSURANCE GENERAL	34,958	
INSURANCE WORKMENS COMP	7,962	
INSURANCE FLOOD	4,912	
TOTAL Insurance	47,832	
TOTAL CARRIED TO 1120/H/1120C 26/15/23		346,837

2009 DETAIL STATEMENTS

WATER MANAGEMENT SERVICES INC.
59-3449317

STATEMENT #4 - Other Expen Not Deduc This Yr (1120/1120C M1 LINE 5c)

NON-UTILITY LIFE INS.....	12,015	
FINES & PENALTIES.....	11,637	
TOTAL CARRIED TO 1120/1120C M1 LINE 5c.....		23,652

STATEMENT #5 - Other Assets (1120/1120C Sc L LN 14d/12)

	Beginning	Ending
PREPAID INSURANCE AND OTHER.....	27,672	19,597
DEFERRED LIMITED PROCEEDING.....	24,184	0
NET DISALLOWED INVESTMENT IN PLANT...	811,018	811,018
INVESTMENT IN ASSOCIATED COS.....	1,160,703	1,219,899
DIFF. IN RETAINED EARNINGS-PRIOR YRS.	4,069	4,069
DEPOSITS.....	13,184	12,977
NOTE RECEIVABLE ASSOCIATED COS.....	150,000	100,000
TOTAL CARRIED TO 1120/1120C Sc L LN 14d/12.....	2,190,830	2,167,560

STATEMENT #6 - Other Current Liabilities (1120 PG 5 SCH L LINE 18)

	Beginning	Ending
CUSTOMER DEPOSITS.....	108,815	103,669
OTHER ACCRUALS - TAXES-INTEREST-ETC..	80,160	137,231
TOTAL CARRIED TO 1120 PG 5 SCH L LINE 18.....	188,975	240,900

STATEMENT #7 - Other Liabilities (1120/1120C Sc L LN 21d/19)

	Beginning	Ending
ADVANCES FOR CONSTRUCTION.....	21,037	20,737
TOTAL CARRIED TO 1120/1120C Sc L LN 21d/19.....	21,037	20,737

STATEMENT #8 - Paid-in/Capital Surplus (1120/1120C Sc L LN 23d./21)

	Beginning	Ending
PAID IN CAPITAL.....	1,236,650	1,236,650
CONTRIBUTED CAPITAL.....	200,000	200,000
ADDITIONAL CONTRIBUTION.....	4,439	4,439
TOTAL CARRIED TO 1120/1120C Sc L LN 23d./21.....	1,441,089	1,441,089

2009 NOL DEDUCTION SUMMARY STATEMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

Net Operating Losses Available in 2009.	$	985,269
Taxable Income (Before NOL Dedn, After Special Dedns) .	$	-354,156
Total Net Operating Loss Deduction (Limited Taxable Inc).	$	0
Net Operating Losses Carried Forward to 2010	$	1,339,425

2009 NOL DEDUCTION STATEMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

CARRYOVER GENERATED FOR TAX YEAR 1997 . . .	$	20,591	
Amount Absorbed In 2003 . . .	$	20,591	
Total Amount Absorbed	$	20,591	
Available For Carryover To 2009			$ 0
CARRYOVER GENERATED FOR TAX YEAR 1998 . . .	$	95,240	
Amount Absorbed In 2003 . . .	$	36,022	
Amount Absorbed In 2004 . . .	$	59,218	
Total Amount Absorbed	$	95,240	
Available For Carryover To 2009			$ 0
CARRYOVER GENERATED FOR TAX YEAR 1999 . . .	$	124,048	
Amount Absorbed In 2004 . . .	$	52,285	
Total Amount Absorbed	$	52,285	
Available For Carryover To 2009			$ 71,763

2009 NOL DEDUCTION STATEMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

CARRYOVER GENERATED FOR TAX YEAR 2000 . . .	$ 128,593	
Total Amount Absorbed	$	
Available For Carryover To 2009		$ 128,593
CARRYOVER GENERATED FOR TAX YEAR 2001 . . .	$ 87,462	
Total Amount Absorbed	$	
Available For Carryover To 2009		$ 87,462
CARRYOVER GENERATED FOR TAX YEAR 2002 . . .	$ 136,518	
Total Amount Absorbed	$	
Available For Carryover To 2009		$ 136,518

2009 NOL DEDUCTION STATEMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

CARRYOVER GENERATED FOR TAX YEAR 2005 . . . $	39,981	
Total Amount Absorbed . . . . $		
Available For Carryover To 2009 . . . . . $		39,981
CARRYOVER GENERATED FOR TAX YEAR 2006 . . . $	124,782	
Total Amount Absorbed . . . . $		
Available For Carryover To 2009 . . . . . $		124,782
CARRYOVER GENERATED FOR TAX YEAR 2007 . . . $	103,664	
Total Amount Absorbed . . . . $		
Available For Carryover To 2009 . . . . . $		103,664

2009 NOL DEDUCTION STATEMENT

WATER MANAGEMENT SERVICES INC.
59-3449317

CARRYOVER GENERATED FOR TAX YEAR 2008 . . .	$	292,506
Total Amount Absorbed	$	
Available For Carryover To 2009	$	292,506

2009 NET OPERATING LOSS WORKSHEET

WATER MANAGEMENT SERVICES INC.
59-3449317

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	1999
C.	NOL Amount	71,763
D(1).	Carryovers from Years Before Both A & B	0
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	0
3.	Subtract Line 2 from Line 1	-354,156
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year.	71,763

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2000
C.	NOL Amount	128,593
D(1).	Carryovers from Years Before Both A & B	71,763
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	71,763
3.	Subtract Line 2 from Line 1	-425,919
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year.	128,593

2009 NET OPERATING LOSS WORKSHEET

WATER MANAGEMENT SERVICES INC.
59-3449317

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2001
C.	NOL Amount	87,462
D(1).	Carryovers from Years Before Both A & B	200,356
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	200,356
3.	Subtract Line 2 from Line 1	-554,512
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year	87,462

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2002
C.	NOL Amount	136,518
D(1).	Carryovers from Years Before Both A & B	287,818
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	287,818
3.	Subtract Line 2 from Line 1	-641,974
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year	136,518

2009 NET OPERATING LOSS WORKSHEET

WATER MANAGEMENT SERVICES INC.
59-3449317

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2005
C.	NOL Amount	39,981
D(1).	Carryovers from Years Before Both A & B	424,336
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	424,336
3.	Subtract Line 2 from Line 1	-778,492
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year	39,981

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2006
C.	NOL Amount	124,782
D(1).	Carryovers from Years Before Both A & B	464,317
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	464,317
3.	Subtract Line 2 from Line 1	-818,473
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year	124,782

2009 NET OPERATING LOSS WORKSHEET

WATER MANAGEMENT SERVICES INC.
59-3449317

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2007
C.	NOL Amount	103,664
D(1).	Carryovers from Years Before Both A & B	589,099
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	589,099
3.	Subtract Line 2 from Line 1	-943,255
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year	103,664

NET OPERATING LOSS INFORMATION

A.	Carryover Year	2009
B.	NOL Year	2008
C.	NOL Amount	292,506
D(1).	Carryovers from Years Before Both A & B	692,763
D(2).	Carrybacks from Years Before B	0

COMPUTATION OF MODIFIED TAXABLE INCOME

1.	Taxable Income for Year A	-354,156
2.	Amount From D(1)	692,763
3.	Subtract Line 2 from Line 1	-1,046,919
4.	Allowed Contributions Using Amount on Line 3	0
5.	Amount From D(2)	0
6.	Dividend Received Deduction	0
7.	Add Lines 4, 5, and 6	0
8.	Modified Taxable Income (Line 3 - Line 7)	0
9.	NOL on Line C Absorbed this Year	0
10.	NOL on Line C Carried Over to Subsequent Year	292,506

WMSI-NARUC
Comparative Income Statement
For the Eight Months Ending August 31, 2010

		Year to Date	Prior YTD	Change
Water Revenues				
461.10	Metered Sales-Residential	708,180.93	742,929.90	(34,748.97)
461.20	Metered Sales-Commercial	96,027.15	107,413.44	(11,386.29)
461.40	Metered Sales-Public Auth	29,267.82	28,795.88	471.94
461.50	Metered Sales-Multi Family	35,907.76	36,155.06	(247.30)
469.00	Guaranteed Revenue-AFPI Chgs	245.54	122.77	122.77
471.00	Misc Service Revenue	3,949.78	1,892.00	2,057.78
	Total Revenues	**873,578.98**	**917,309.05**	**(43,730.07)**
Water Operations Expenses				
601.10	Salaries & Wages-Employees	124,738.13	90,773.69	33,964.44
603.10	Salaries & Wages-Officers	39,615.33	48,323.71	(8,708.38)
604.10	Employee Pensions & Benefits	10,967.64	9,771.96	1,195.68
615.10	Purchased Power	40,082.79	51,227.22	(11,144.43)
616.10	Purchased Fuel for Power Prod	0.00	2,284.12	(2,284.12)
618.10	Chemicals	8,108.20	9,221.92	(1,113.72)
620.10	Materials and Supplies	9,110.51	9,530.24	(419.73)
631.10	Contractual Services-Eng	37,500.00	7,500.00	30,000.00
634.10	Contractual Services-Mgmt	600.00	5,375.00	(4,775.00)
635.10	Contractual Services-Testing	2,895.00	2,155.00	740.00
636.10	Contractual Services-Other	60,716.33	7,663.52	53,052.81
642.10	Rental of Equipment	22,838.35	5,244.76	17,593.59
650.10	Transportation Expenses	20,766.55	9,093.08	11,673.47
656.10	Insurance-Vehicles	5,320.00	3,361.68	1,958.32
657.10	Insurance-General	10,000.00	10,750.00	(750.00)
658.10	Insurance-Workman's Comp	3,422.40	4,080.00	(657.60)
659.10	Insurance-Other (Flood)	3,218.08	3,303.27	(85.19)
675.10	Misc. Expense	51.00	6.25	44.75
675.11	Continuing Education	2,606.71	25.00	2,581.71
675.12	Dues & Subscriptions	564.40	424.40	140.00
675.13	Repairs & Maintenance	27,784.81	39,949.09	(12,164.28)
675.14	Telephone	6,788.87	4,951.97	1,836.90
675.15	Postage	5,663.14	4,650.34	1,012.80
675.16	Uniforms	2,967.73	1,807.94	1,159.79
675.19	Travel Expense	51.42	350.59	(299.17)
	Total Water Operations Expense	**446,377.39**	**331,824.75**	**114,552.64**
Administrative Expenses				
601.80	Salaries & Wages-Employees	105,168.91	100,424.95	4,743.96
603.80	Salaries & Wages-Officers	39,615.34	48,323.40	(8,708.06)
604.80	Employee Pensions & Benefits	77,860.50	76,202.35	1,658.15
615.80	Purchased Power	1,488.27	1,723.05	(234.78)
620.80	Materials and Supplies	4,807.30	4,059.87	747.43
631.80	Contractual Services-Eng	2,679.58	0.00	2,679.58
632.80	Contractual Services-Acctg	12,550.00	0.00	12,550.00
633.80	Contractual Services-Legal	0.00	2,483.50	(2,483.50)
636.80	Contractual Services-Other	3,307.76	3,844.38	(536.62)
641.80	Rental of Bldg/Real Property	14,674.64	14,664.64	10.00
642.80	Rental of Equipment	532.14	799.94	(267.80)
650.80	Transportation Expenses	4,535.04	4,572.44	(37.40)
656.80	Insurance-Vehicles	2,360.00	2,781.32	(421.32)
657.80	Insurance-General	6,408.47	6,794.40	(385.93)
658.80	Insurance-Workman's Comp	(1,334.77)	622.72	(1,957.49)
659.80	Insurance-Key Man Life Ins.	8,010.00	8,010.00	0.00
660.80	Advertising Expense	350.00	320.45	29.55

WMSI-NARUC
Comparative Income Statement
For the Eight Months Ending August 31, 2010

		Year to Date	Prior YTD	Change
675.81	Continuing Education	111.32	0.00	111.32
675.82	Dues & Subscriptions	1,706.34	1,608.00	98.34
675.83	Repairs & Maintenance	655.90	673.19	(17.29)
675.84	Telephone	1,925.33	2,093.98	(168.65)
675.85	Postage	1,251.13	844.84	406.29
675.86	Bank Charges	1,561.29	1,675.16	(113.87)
675.89	Travel Expenses	383.17	1,112.76	(729.59)
	Total Administrative Expense	**290,607.66**	**283,635.34**	**6,972.32**
	Total Operating Expenses	**736,985.05**	**615,460.09**	**121,524.96**
Depreciation & Amortization				
403.00	Depreciation Expense	175,930.56	178,080.56	(2,150.00)
403.10	Amort. - CIAC	(62,734.00)	(61,409.00)	(1,325.00)
407.30	Amort. - Bridge/Main Property	9,744.16	9,744.16	0.00
666.80	Amort. - Rate Case Expense	0.00	16,122.64	(16,122.64)
	Net Depreciation & Amortization	**122,940.72**	**142,538.36**	**(19,597.64)**
Taxes Other Than Income				
408.10	Utility Reg. Assessment Fees	39,311.00	41,279.00	(1,968.00)
408.11	Other Taxes- Property	6,764.20	1,770.22	4,993.98
408.12	Other Taxes- Payroll	23,636.82	22,462.88	1,173.94
408.13	Other Taxes and Licenses	724.48	673.40	51.08
	Total Non-Income Taxes	**70,436.50**	**66,185.50**	**4,251.00**
	Utility Operating Income	**(56,783.29)**	**93,125.10**	**(149,908.39)**
Other Income & Expenses				
414.00	Gain/Loss-Sale of Utility Prop	1,500.00	4,500.00	(3,000.00)
419.00	Int. & Dividend Income	3,376.73	7,078.51	(3,701.78)
426.10	Non-Utility Exp-Penalties/Fine	(8,304.92)	(5,051.54)	(3,253.38)
	Net Other Income	**(3,428.19)**	**6,526.97**	**(9,955.16)**
Interest Expense				
427.00	Interest-D.E.P.	96,654.07	96,581.64	72.43
427.30	Interest- Long-Term Debt	84,689.25	86,401.59	(1,712.34)
427.40	Interest- Customer Deposits	5,046.12	6,355.51	(1,309.39)
427.50	Interest- Vendors	7,067.18	5,459.53	1,607.65
428.20	Amort of Loan Fees	12,634.56	12,789.63	(155.07)
	Total Interest Expense	**206,091.18**	**207,587.90**	**(1,496.72)**
	Taxable Income	**(266,302.66)**	**(107,935.83)**	**(158,366.83)**
Income Tax Expense				
	Total Income Tax Expense	**0.00**	**0.00**	**0.00**
	Net Income	**$ (266,302.66)**	**$ (107,935.83)**	**(158,366.83)**

WMSI-NARUC
Balance Sheet
August 31, 2010

ASSETS

Utility Plant In Service

303.00	Land and Land Rights	$ 90,993.95
304.00	Structures & Improvements	356,328.82
307.00	Wells & Springs	405,021.00
309.00	Supply Mains	3,984,508.07
310.00	Power Generation Equipment	113,061.44
311.00	Pumping Equipment	224,688.83
320.00	Water Treatment Equipment	77,150.36
330.00	Dist. Reservoirs & Standpipes	362,073.24
331.00	Transmission & Dist. Mains	2,524,926.36
333.00	Services	239,451.16
334.00	Meters & Meter Installation	218,824.91
335.00	Hydrants	160,469.25
340.00	Office Furniture & Fixtures	80,315.01
341.00	Transportation Equipment	103,304.72
343.00	Tools, Shop & Garage Equip.	36,742.89
345.00	Power Operated Equipment	64,550.57
	Total Plant In Service	9,042,410.58

Construction Work In Process

	Total Construction Work in Process	0.00

Depreciation of Utility Plant

108.01	Accum Depr-Struct. & Impr.	(113,591.73)
108.02	Accum Depr-Wells & Springs	(198,259.06)
108.03	Accum Depr-Supply Mains	(948,827.48)
108.04	Accum Depr-Power Gen Equip	(86,737.33)
108.05	Accum Depr-Pumping Equip.	(163,777.44)
108.06	Accum Depr-Treatment Equip	(42,371.11)
108.07	Accum Depr-Dist Res & Stdp	(249,425.19)
108.08	Accum Depr-T & D Mains	(1,228,022.62)
108.09	Accum Depr-Services	(149,393.53)
108.10	Accum Depr-Meters & Inst.	(157,225.78)
108.11	Accum Depr-Hydrants	(73,084.09)
108.13	Accum Depr-Ofc Furn.& Equip	(29,795.81)
108.14	Accum Depr-Tools & Equip	(21,368.97)
108.145	Accum Depr-Power Operated Eq	(35,524.70)
108.16	Accum Depr-Transp. Equip.	(21,441.82)
	Total Plant Depreciation	(3,518,846.66)
	Net Plant	**5,523,563.92**

WMSI-NARUC
Balance Sheet
August 31, 2010

Other Property & Investments		
	Net Disallowed Invest. In Plant	811,018.34
	Investment in Assoc. Cos.	1,157,043.11
Current & Accrued Assets		
131.03	Petty Cash Fund-Island	59.63
131.08	Cash in Checking-GSB Operating	3,606.46
131.09	Cash in Checking-FMB	1,891.61
131.11	Cash in Checking-GSB Constr.	(4,350.02)
131.12	Cash in Checking-FCCU	8.07
	Total Cash	1,215.75
141.00	Accounts Receivable-Customers	144,673.41
142.00	Accounts Receivable-Other	3,612.37
143.00	Prov. for Uncollectible Accts.	(26,000.00)
	Total Receivables (Net)	122,285.78
162.10	Deposits	12,695.75
162.30	Prepaid Insurance	10,141.06
	Total Prepayments & Deposits	22,836.81
	Total Current Assets	**1,303,381.45**
Deferred Debits		
181.00	Deferred Loan Costs	89,962.77
186.07	Deferred Costs-Rate Case	128,222.78
186.20	Deferred Loss on Bridge/Main	43,702.08
186.30	Deferred Costs-Wastewater	52,850.59
	Total Deferred Debits	**314,738.22**
	Total Assets	**$ 7,952,701.93**

WMSI-NARUC
Balance Sheet
August 31, 2010

LIABILITIES AND CAPITAL

EquityCapital

215.00	Unapprop Retained Earnings	$ (1,576,897.39)
218.00	Common Stock	10,000.00
219.00	Additional Paid in Capital	(488,548.21)
	Current Period Income(Loss)	(266,302.66)
	Total Capital	**(2,321,748.26)**

Long-Term Liabilities

224.17	N/P-Envision Chev Loan	10,908.76
224.27	N/P-GMAC	31,461.11
224.32	N/P-D.E.P.	4,738,577.21
224.33	N/P- F.C.C.U. (GMC)	11,652.17
224.37	N/P-FMB Backhoe Loan	9,760.14
	Other Long Term Debt	**4,802,359.39**
263.00	Other Long-Term Liabilities	133,333.34
	Total Long-Term Liabilities	**4,935,692.73**

Current Liabilities

231.00	Accounts Payable	239,055.61
232.17	N/P-Curr-Envision Chev Loan	3,704.14
232.20	N/P-Curr-Gulf State Bank	2,785,254.45
232.27	N/P-Curr-GMAC	5,596.55
232.32	N/P-Curr-D.E.P.	150,425.99
232.33	N/P-Curr- F.C.C.U. (GMC)	3,957.16
232.37	N/P-Curr-FMB Backhoe Loan	14,103.86
235.00	Customer Deposits	111,012.95
236.10	Acc Taxes-Reg Assess Fee	11,883.00
236.20	Acc Taxes-Property	12,601.35
236.30	Acc Taxes-Fed W/H	7,773.72
236.40	Acc Taxes-FICA & Med	4,728.79
237.21	Acc Int-GMAC Chevrolet Loan	59.02
237.33	Acc Int-F.C.C.U. (GMC)	76.98
237.34	Acc Int-Envision Chev Loan	31.03
237.41	Acc Int-FMB Backhoe Loan	118.06
237.60	Acc Int-D.E.P.	42,639.65
237.65	Acc Int-Gulf State Bank	4,932.22
241.10	Accrued Wages Payable	8,900.21
	Total Current Liabilities	**3,406,854.74**

Deferred Credits

252.10	Advances for Construction	20,737.10
	Total Construction Advances	**20,737.10**

Contributions In Aid of Construction

WMSI-NARUC
Balance Sheet
August 31, 2010

271.20	CIAC- Plant Capacity Charge	1,302,329.63
271.30	CIAC- Meter Installation Fee	556,970.60
271.40	CIAC- Main Extension Charge	991,643.81
271.45	CIAC- Fire Hydrants	106,256.00
271.46	CIAC- Fire Sprinkler Systems	5,250.00
271.50	CIAC- Services	9,497.46
271.60	CIAC- Contrib. Property	375,659.12
	Gross C I A C	**3,347,606.62**
272.00	Accum. Amort. of CIAC	(1,436,441.00)
	Net C I A C	**1,911,165.62**
	Total Liabilities	**10,274,450.19**
	Total Liabilities & Capital	**$ 7,952,701.93**

WATER MANAGEMENT SERVICES, INC.
250 John Knox Rd. # 4
Tallahassee, FL 32303
(850) 668-0440 Fax (850) 577-0441

MEMO

TO: **Mike Schibelli**

FROM: **Gene Brown**

DATE: **August 24, 2010**

RE: **Engineering Services**

Now that the water system evaluation has been completed, I would like to proceed with the additional services referenced in part 2 of our agreement dated August 7, 2009 as amended by our agreement dated December 30, 2009. The following is a brief summary of the specific services we need, beginning immediately. After you have reviewed this, I would suggest that we sit down again to discuss a priority list regarding these various services.

1. First, we need to proceed with the water modeling referenced in part 2 of our August 7, 2009 agreement. We would opt in favor of the alternate model, with an estimated cost of $20,000 rather than the more elaborate model for $40,000. The St. George Volunteer Fire Department is pressing us to provide greater fire flow and pressure, especially on the west end of the island. Several years ago, they wanted us to set a standard in the residential area of 500 gallons per minute from one hydrant for up to 2 hours. Now, however, they are insisting on being able to have this fire flow from two hydrants operating simultaneously. They are able to achieve this in most areas of the Island, but they cannot do so on the westerly end near Bob Sikes Cut. We need a hydraulic model throughout the Island so that we can understand the pressures that can be sustained in the event of a fire at any location on the Island. Also, we have complaints from property owners who do not have adequate pressure on the fourth level of their houses at various locations throughout the Island. Part of the problem is that many of these customers insist on a 5/8" meter, which is the limiting factor as to flow and pressure on the 4th floor. Nevertheless, this is a problem we need to deal with to meet customer

demand. The hydraulic model can be used as a base for making decisions regarding several of the additional items discussed below, such as flushing, looping of lines, installation of chlorine booster pumps, leak detection and other matters regarding the reliability of the water system.

2. We would like PBS&J to take primary responsibility for compliance with our consumptive use permit from the Northwest Florida Water Management District (NWFWMD), a copy of which is attached. Les Thomas always handled this for us, before he went to work for PBS&J in Atlanta. We need to start working on the application for a new permit which will have to be secured by next year. In the meantime, there are at least six compliance items that have to be completed by the end of next January, as referenced in the August 6, 2010 letter from NWFWMD, which is attached. Our staff will maintain primary responsibility for providing this information, but I would like someone at PBS&J to assume the overall responsibility for making sure that everything is filed on time and that we have all of the information together in time to make application for our next permit. As part of this, we need your help and advice in complying with the NWFWMD's requirement that no more than 50% of our water is pumped from well no. 4. We have been unable to find someone to program our electronics to do this on an automatic, rotating basis, which needs to be done asap.

3. Currently, our raw water comes into the plant and then is rotated through the elevated tank after it enters the distribution system. This results in the water being "double counted" as it comes back into the distribution system, so that we now have to estimate the volume of such water. We need PBS&J to design a rerouting of our piping at the plant, including the location of a new meter to accurately measure the new water into the plant. This will assume accurate reporting to both the NWFWMD and the DEP.

4. We need PBS&J to analyze our chlorine distribution system and to recommend chlorine booster pumps at various locations throughout the Island. We have a problem with too much chlorine for customers near the plant and not enough for customers at the extremities of the Island. This is one of the reasons that we have to do so much flushing throughout the Island, i.e., to avoid the dissipation of chlorine, and to maintain adequate chlorine residuals at all locations on the Island. Maybe this can be incorporated into the modeling referenced above.

5. We have a problem with leaks within the 70 miles of supply and distribution system lines throughout the Island. Part of this is due to the age of the lines, and part is due to the general environment with soft shifting sands, lack of paved roads, and various other factors. We need PBS&J's help in devising a consistent and reliable leak detection program. The problem may be the high pressure as we try to maintain for fire flow coupled with the aging lines, many of which were

installed 35 years ago.

6. As noted in PBS&J's water system evaluation, WMSI has performed flushing to maintain proper chlorine residuals throughout the Island. We need to develop a flushing program that meets our requirement to maintain proper chlorine residuals, while using the minimum amount of unbilled water. This could include some automatic flush stands, bu we need advice as to where these should be placed, and whether they would be economically feasible. Also, maybe as part of the hydraulic modeling, we need to determine which areas need to be put on a priority list for a looping of the lines, especially cul-de-sac areas, as well as a priority list of small lines which may need to be replaced.

7. We need a complete, professional review and analysis of all FDEP, EPA and other rules and regulations from any and all governmental agencies having jurisdiction over us, including the NWFWMD, to make sure we are in full compliance, and, if not, what it will take to bring us in compliance. As part of this analysis, we need to know if there are any proposed EPA or other rules, such as increased testing requirements, that we need to be aware of so that we can plan for the future. As pointed out in the water system evaluation, a real problem on St. George is the new NWFWMD rule which allows an unlimited number of shallow wells for both potable and nonpotable uses without any regulation or permitting. This new rule caught WMSI by surprise. It is difficult to believe that the law of Florida allows the unlimited use of shallow wells and septic tanks on a barrier island such as St. George, next to a critical area such as Apalachicola Bay. Accordingly, I would like PBS&J to search the rules and regulations from all the various agencies to determine if there is some way we can contest the unlimited and unregulated installation of such wells throughout the Island, which is causing us a real problem with our cross connection control program and our revenue base. In addition to the FDEP and EPA rules and regulations, I would like you to look at the rules of the Florida Department of Health and the Florida Hotel and Restaurant Commission and other agencies that may have application on the Island, especially since a large number of the houses there are rented commercially and must have state licenses. This is critical to our overall planning. If there is nothing we can do about these wells, then we need to calculate this into our long range planning and water modeling. But if there is some way to object to these shallow wells, we need to pursue that avenue before we make any more long-range plans based on decreased water use because of these wells. The bottom line is that we do not believe that shallow wells and septic tanks are a realistic long-term solution for the water and wastewater issues which exist and will continue to exist on the Island.

8. As part of this short and long-term modeling, we need to determine when and if we will need a 5th well. If there will be a need for a 5th well, we need to be

planning now while land prices are so low, taking into consideration the length of time it will take to get the well permitted. We need to plan for backup and redundancy throughout the system to prevent any type of outage, even temporarily.

9. We have a ten-year maintenance agreement with Withers Coastal Marine Construction for the inspection and maintenance of the supply main across St. George Island bridge. This contract, a copy of which is attached, provides that the line will be inspected quarterly and that it will be totally repainted and refurbished over the ten-year period so that we have a secure, well maintained supply main throughout this ten-year period. This contract requires repainting in some areas and touch up painting in others. We need PBS&J's help in overseeing this contract to make sure the contractor is in full compliance. We would like PBS&J to provide a certified NACE inspector to inspect the work that has been done.

10. We also have a ten-year tank maintenance contract on the elevated tank. We need advice and assistance from PBS&J to make sure this contract is properly performed by Superior Tank Company. Attached is a copy of the elevated tank contract for your review.

11. The Franklin County Commission recently enacted new regulations requiring plans and permits for water utility work on the Island. We have been getting by with surveys prepared by Thurman Roddenberry; however, we need PBS&J to review these new regulations and advise WMSI if we are in compliance. My understanding is that we will need assistance from PBS&J in preparing plans and specs for work that we have been done in the past without a permit.

12. Also, Franklin County has a well protection ordinance that imposes requirements on WMSI regarding the operation of our four wells in the Eastpoint area. We need you to review this ordinance and advise us as to various compliance issues.

13. One major project that will require plans and specs for both Franklin County and DEP involves the need for a new 6" distribution line along Gorrie Drive to provide adequate fire flow as well as adequate system pressure on the 4th level of numerous multi-family and "shotgun" houses on Gorrie Drive. This will be part of the water modeling referenced above, but we need to pay particular attention to the Gorrie Drive area. Many of these houses have only a 5/8" meter, but they are demanding higher pressures on the top, or 4th level. Also, these shotgun houses constitute a fire hazard because they are made of wood and are built extremely close to one another, which makes fire flow even more important. There are well over 100 multi-family units in the "single family" areas of the Island, many of which are along Gorrie Drive.

14. We need the same type of analysis regarding undersized lines, the need for looping, and other related issues in Unit 5. This unit, on the westerly Bay side of the Island, has multi-family buildings, some large single family buildings, as well as some commercial. Nevertheless, there are 2" and 4" lines in some areas, which limits flow and pressure in those areas. We need to analyze this as part of the water modeling, and set forth a construction program to be completed over the next several years.

15. We need PBS&J to develop some engineering standards regarding meter sizing. Under our tariff, it is not clear whether we have the right to determine the size meter that must be installed by each customer. This causes us serious problems when a customer demands a small meter, such as a 5/8", when the anticipated water demand shows a need for a much larger meter. In addition to flow and pressure problems, these small meters do not register properly, so we lose revenue at the higher usage rates; and they wear out much quicker than a properly sized meter. Because we are required to replace these meters as they wear out, solely at the utility's expense, this creates an unfair burden on us as well as our customers who have properly sized meters. Accordingly, we need to work with PBS&J in developing some engineering standards that can serve as the factual basis for an application to amend our tariff to allow WMSI some control to provide for properly sized meters.

16. As part of the water modeling, we need to focus on those areas which should be looped to minimize flushing, and to cut down on the outages which occur when repairs have to be made in a particular area. This should be analyzed in conjunction with the need to replace inadequately sized lines, some of which are only 2".

17. In doing this analysis and water modeling, PBS&J should focus on those lines which are extremely old, some of which were installed 35 years ago. This may be part of our problem with leaks, because some of these old pvc pipes may have simply reached the end of their useful lives.

18. We need help in developing a GIS, Geographic Information System, which can be incorporated into our "CADD" mapping system to show all current lines, services, valves and other components of our water supply and distribution system.

19. We need general advice as to whether it is feasible or practical to implement a more modernized supervisory control and data acquisition system to provide more efficient and economical service to our customers. We need PBS&J to review our entire operation to determine if there are any upgrades that should be made to save money in the long run, and allow us to provide better service.

20. We need specific recommendations regarding any new or additional security policies or procedures that should be implemented. Several of our wells are in remote locations, and part of our supply line is totally remote. We also need to make sure that our plant, chlorine system, and other components of the system are secure.

21. We would like specific advice as to the possible use of "smart meters" that can be read electronically and tied into our new software billing system. We now manually read every meter, but the meters do not provide us any historical records as to peak periods of use and other data that could be captured by the "smart" meters. We do not know if these would make sense from a cost efficiency standpoint, but we need PBS&J's advice in this regard.

22. We would like PBS&J to schedule at least quarterly "walk throughs" during which you or someone with PBS&J will come to the Island, confer with our operators, and go through the system to see if there is anything that needs to be done to "stay ahead of the curve" so as to prevent problems before they develop. We also need your help in establishing an overall maintenance program for the various components so we can achieve maximum useful life from all of our capital investments.

23. We need PBS&J to review our tariff to see if there are any sections which should be modified to allow WMSI to provide more efficient, higher quality service to our customers.

24. As part of our retainer agreement, we need PBS&J to be available 24/7 to assist WMSI management, especially our two operators, with both emergencies and routine questions. This would include help in answering customer complaints and customer questions regarding proper meter size and water quality including service related matters. This will also involve the review of plans and specs presented by prospective customers as part of WMSI's water user application process.

25. This may include appearances before various public bodies, including the Franklin County Commission, NWFWMD, DEP and the Florida Public Service Commission.

As you know, WMSI is processing an application for a rate increase with the Florida Public Service Commission. This will require expert engineering testimony, including prefiled rebuttal testimony and live testimony at the final hearing scheduled for October 5, 6 and 7, 2010. Enclosed is a report from Andy Woodcock, who is an engineer hired by the Office of Public Counsel to testify on their behalf at the hearing. Please review his testimony and give me an estimate as to the cost for PBS&J to serve as WMSI's expert on engineering matters in this case.

You need to separate your time and expenses regarding the pending rate proceeding, because these will be included as part of our rate case expenses, as distinguished from ongoing engineering expenses under our retainer agreement.

According to our records, we have paid PBS&J $42,500 during the last year, leaving a balance due of $18,500 on the $61,000 water system evaluation agreement. We will continue paying $5,000 per month until this is paid, after which we will revert to $4,000 per month as per our amended retainer agreement. In addition, WMSI is working on a loan to close within the next several weeks which will include $25,000 to be paid to PBS&J over and above the above-referenced monthly payments. The purpose of this is to provide extra funds to cover PBS&J's involvement in the pending PSC proceeding and to cover part of the cost of the water modeling.

I need to know asap if PBS&J can continue to work with WMSI under these terms and conditions. The testimony in the pending proceedings is critical and will require a commitment by PBS&J to stay with us at least until the case is completed, whether or not we are able to close the loan as anticipated. The extent and timing of the remainder of the work as described in this memo can be dependent upon the $25,000 payment from the anticipated loan closing and our continued monthly payments. We can work together to set priorities so that the engineering work by PBS&J does not unreasonably exceed the monthly retainer amount actually paid by WMSI. The next 6 months will be tough. After that, we should be able to do a better job of keeping up with our commitments. Please understand how much I appreciate your working with us to this point.

Water Management Services, Inc
Docket No. 100104-WU

Comparison of Salary and Wages 2009 to 2008

		2009	2008
Acct 601	Salaries & Wages - Employees	$ 314,455	$ 294,020
Acct 603	Salaries & Wages - Officers	141,684	152,656
Acct 634	Contractual Services (M.H. Garrett)	7,250	11,822
		$ 463,389	$ 458,498
	Proforma Adjustments		
Acct 601	Add M.H. Garrett as Asst Op. Mgr	$ 57,800	
Acct 634	Remove M.H. Garrett Contract Services	(7,250)	
Acct 601	Add Field Employee	26,008	
Acct 601	Remove 3 Field Employees	(58,354)	
Acct 636	Remove nonrecurring field work, C. Painter	(6,366)	
Acct 601	Annualize R. Garrett salary	1,193	
Acct 601	Annualize B. Molsbee salary	(231)	
Acct 603	Annualize G. Brown salary	(30,300)	-
	Total Proforma Adjustments	$ (17,500)	-
	Adjusted TY Salaries & Wages	$ 445,889	$ 458,498
	Savings over 2008	$ 12,609	

Source: MFR Schedules B-3 and B-5; 2008 Annual Report

Angela Chelette

From: Angela Chelette
Sent: Friday, July 15, 2005 7:48 AM
To: 'LThomasPE@aol.com'
Cc: Tom Brown
Subject: RE: St George wells.xls

We will put this in our newsletter that goes to all drillers. If you have specific cases and can provide an address where you know illegal wells have been installed, we will look into those wells/locations.

Angela Chelette
(850) 539-5999 SunCom 793-5999 (ext. 53)

From: LThomasPE@aol.com [mailto:LThomasPE@aol.com]
Sent: Thursday, July 14, 2005 5:29 PM
To: Angela Chelette
Cc: Guy Gowens
Subject: Re: St George wells.xls

Thanks,
I hereby request that the NWFWMD write all the well drillers on your list who have previously drilled on the island, because it is apparent that they are now drilling wells without permits. I have the impression that they now believe that they can get a permit from the county and do not need one from you.
Les

We are addressing these sorts of issues through a monthly newsletter these days. We'll be sure to include this. Thanks, Les.

Angela Chelette
(850) 539-5999 SunCom 793-5999 (ext. 53)

From: LThomasPE@aol.com [mailto:LThomasPE@aol.com]
Sent: Thursday, July 14, 2005 2:20 PM
To: Angela Chelette
Cc: smc@lstal.com
Subject: Re: St George wells.xls

Angela, we estimate that there are more than 80 shallow wells on the island. Last year the DOT installed 3 irrigation wells in the R/W on the island to irrigate all their landscaping.
Is it possible for the NWFWMD to write a letter to the local well drillers advising them that they are required to permit both irrigation and potable wells?
Les

Angela Chelette

From: Angela Chelette
Sent: Tuesday, July 26, 2005 4:14 PM
To: Guy Gowens
Cc: Tom Brown; Sandra Barrett
Subject: FW: St George wells.xls

Attachments: St George wells.xls

Here is a list of well permits that we have for St. George that Les Thomas requested back in June. In speaking with Tom and Sandra again regarding restrictions on the island, there is some confusion and we have no documentation. As Tom is dealing with the County right now on the illegal landscape wells at their park on the island, he is going to follow up with the County and get formal documentation of whatever ordinance or other instrument is in place regarding wells on SGI.

Angela Chelette
(850) 539-5999 SunCom 793-5999 (ext. 53)

From: Angela Chelette
Sent: Monday, June 20, 2005 3:57 PM
To: Les Thomas (lthomaspe@aol.com)
Subject: St George wells.xls

Here is a list of the Domestic and Landscape Irrigation wells on the island from the database. Keep in mind that this is in no way anticipated to be a complete list as the record-keeping didn't begin until 1976. All Landscape uses require a consumptive use permit.

St George wells.xls (20 KB

CO.	USE	TYPE	CPS	ISSUE_DATE	FIRST_NAME	LAST_NAME	LAT	LONG	CASING	DEPTH	CASING_I	DIA	SEC	TWN	RNG	STATE_ID	WELL_STREET	WELL_CITY	CUP#	FIRST_I
37	DO	C	T198901715	06-JAN-89		Tommy Lister						4	27	08S	08W		Hwy 384	Apalachicola		C.L.
37	DO	C	M198906489	25-AUG-89		Hill Builders, Inc.			5	17		2	28	09S	06W		Gulf Beach Drive	St. George Is.		Mark
37	DO	C	M199002832	22-MAR-90		Hill Builders			10	15		2	28	09S	06W		Box F-1, Private Road	St. George Is.		Mark
37	DO	C	T199005350	19-JUL-90		Hill Builders Inc.			15	20		2	29	09S	06W		Gulf Drive	St. George		Mark
37	DO	C	T199005348	19-JUL-90		Louise Hobbs			60	120		4	30	07S	04W		off HWY 90	Carrabelle		C.L.
37	DO	C	M199002833	22-MAR-90		Hill Builders			10	15		2	28	09S	06W		Box F-1, Private Road	St. George Is.		Mark
37	DO	C	M199103973	06-MAY-91		Phil Hill Const.			25	35		2	21	09S	06W		Lot 14, Gorrie St.	St. George Is.		Mike
37	DO	C	M199204515	27-MAY-92		Tom Knight			15	20		2	28	09S	06W		Lot S, Treasure Cove Rd.	St. George		Mark
37	DO	C	T198500527	29-NOV-84		Edward L. Clark, Jr.			42	49		4	1	06S	03W		off 370 on Rio Vista Lot 13	Carrabelle		Carl
37	DO	C	T200203530	09-SEP-02	Bill	Miller			56	60	S	4	1	07S	04W		21 Lobber Ln	Dog Island		Robin
37	DO	C	T199503154	28-JUN-95		Mike Hannon			68	78		8	6	08S	04W		Unit 1, Blk 15 Lot 70	Dog Island		Dennis
37	DO	C	T199503389	01-AUG-95		Tim Aston			44	44		4	6	08S	04W		Unit 1, Blk 14, Lot 64	Dog Island		Dennis
37	DO	C	T199503388	01-AUG-95		Mike Hannon			48	48		4	6	08S	04W		Unit 1, Blk 15, Lot 70	Dog Island		Dennis
37	DO	C	T199503178	03-JUL-95		John Conely			58	59		4	6	08S	04W		Unit 1, Blk 16, Lot 98	Dog Island		Dennis
37	DO	C	M199300653	04-NOV-92		James Davis			15	20		2	28	09S	06W		917 W. Gulf Beach Dr.	St. George Is.		Mark
37	DO	C	M199201375	20-DEC-91		Karen Hill			10	20		2	28	09S	06W		Gulf Beach Dr	St. George Is.		Mark
37	LA	C	T198501434	11-FEB-85		Shuman Investments, Inc.			18	18		1	10	09S	05W		Lott 300, Ocean Sunset Beach	St. George Isle	19850147	Garland
37	LA	C	T200401488	30-MAR-04		Town Homes of St. George			10	20	P	2	10	09S	05W		1760 Gulf Beach Dr.-St. George Is.	Carrabelle		Bobby
37	LA	C	T200401487	30-MAR-04		Town Homes of St. George			10	20	P	2	10	09S	05W		1760 Gulf Beach Dr.-St. George Is.	Carrabelle		Bobby
37	LA	C	T200300290	01-NOV-02	(Town Homes of S.G.)	Home Owners Assc.	294052.4	844809.8	0	22	P	2	29	09S	06W	AAG8312	1760 Gulf Beach Dr.	St. George Isl.	20030043	Bobby
37	LA	C	T200300289	01-NOV-02	(Town Homes of S.G.)	Home Owners Assc.	294052.4	844809.8	0	22	P	2	29	09S	05W	AAG8311	1760 Gulf Beach Dr.	St. George Isl.	20030043	Bobby
37	LA	C	T199801066	13-APR-98		Buccaneer Inn, Inc.					P	2	29	09S	06W		160 W. Gorrie Dr.	St. George Island		Croska
37	LA	C	T198501435	11-FEB-85		Shuman Investments, Inc.			18	18		1	10	09S	05W		Lot 300, Ocean Sunset Beach	St. George Isle	19850147	Garland
37	LA	C	T198501436	11-FEB-85		Shumen Investments, Inc.			18	18		1	10	09S	05W		Lot 300, Ocean Sunset Beach	St. George Isle	19850147	Garland
37	LA	C	T199800708	09-FEB-98		Buccaneer Inn, Inc.			13	28	P	2	29	09S	06W	AAB1824	160 West Gorrie Dr.	St. George Island	19830073	Croska
37	LA	C	T199800709	09-FEB-98		Buccaneer Inn, Inc.			13	28	P	2	29	09S	06W	AAB1825	160 West Gorrie Dr.	St. George Island	19830073	Croska
37	LA	C	T198501437	11-FEB-85		Shuman Investments, Inc.			18	18		1	10	09S	05W		Lot 300, Ocean Sunset Beach	St. George Isle	19850147	Garland
37	LA	C	T198501438	11-FEB-85		Shuman Investments, Inc.			18	18		1	10	09S	05W		Lot 300, Ocean Sunset Beach	St. George Isle	19850147	Garland
Count:			28																	

Docket No. 100104-WU
Gene Brown, Exhibit GB-7, Page 000002 of 000002
Emails (June-July 2005)

Angela Chelette

From: Angela Chelette
Sent: Tuesday, August 16, 2005 1:45 PM
To: 'gdb5@comcast.net'
Cc: LThomasPE@aol.com; Guy Gowens; Norman Velazquez; Tom Brown
Subject: RE: Wells on St. George Island

Thank you for your offer to help the District locate any unpermitted wells existing on St. George Island. In answer to you questions:

1) The District has no provision for issuing "after the fact" well construction permits.

2) The District has a copy of the County Ordinance limiting the number of domestic wells in the Plantation to 30. The District is providing notification to the County of any well permit applications beyond that number that are received.

3) Please refer to the response to question #1

Angela Chelette
(850) 539-5999 SunCom 793-5999 (ext. 53)

From: gdb5@comcast.net [mailto:gdb5@comcast.net]
Sent: Monday, July 25, 2005 1:03 PM
To: Angela Chelette
Cc: LThomasPE@aol.com
Subject: Wells on St. George Island
---------- Forwarded Message: ----------
From: "smc" <smc@istal.com>
To: <gdb5@comcast.net>
Subject: Wells on St. George Island
Date: Mon, 25 Jul 2005 16:45:23 +0000

Les Thomas has provided me with a copy of your e-mail exchanges re: shallow wells on St. George Island. As per your suggesiton, Les asked me to compile a list of all the illegal wells on the island, including specific addresses. In addition to the various illegal wells in the middle of the island which were installed by the state DOT and the Franklin County Commission, there are approximately 80 illegal wells in St. George's Plantation. Those are all prohibited by the Plantation's DRI, which is supposed to be enforced by the state and the county under ch. 380. Before I go to the trouble and expense of documenting these shallow wells, I need to know:

1. Whether the NWFWMD is going to issue "after the fact" permits for all these wells, even if they are in violation of ch. 380;

2. Whether the NWFWMD is going to issue permits for new shallow wells in the Plantation, when those wells are in violation of ch. 380;

3. Whether the NWFWMD is going to issue "after the fact" permits for the illegal wells installed by the state and county governments.

If all these wells are ultimately going to be allowed to continue in any event, I see no reason to spend the utility's time and money just to hassle the installers of these wells. But we do need to understand the NWFWMD's position regarding shallow wells on SGI in light of your requirement that Water Management Services, Inc. immediately impose block rates on its customers. If shallow wells are going to be routinely allowed on the island, this needs to be communicated to the FPSC so they can factor that into our rate structure. A substantial portion of the water usage in the highest block is the result of heavy landscaping and other non-potable use of water. If a rate payer can simply spend a few hundred dollars for a shallow well to avoid using the utility's water at the 150% block rate, they will do so. Their entire investment will be recovered in a matter of months. In many cases, the result will not be an overall decrease in consumption. It will simply be a transfer of use from the utility's water to water from shallow wells.

Please feel free to call me at 926-6104 if you have any questions regarding this matter.

Gene Brown

Sent via the WebMail system at mail.istal.com

August 13, 2007

Mr. Tom Brown
Northwest Florida Water Management District
152 Water Management Drive
Havana, FL 32333-4712

Re: Wells on St. George Island

Dear Mr. Brown:

Attached please find a list of the wells we have located in St. George's Plantation. I am sure there are more and we will continue to look for them as all customers with wells are required to have a backflow device.

Also attached is a copy of the Revised Fourth Amendment to the St. George Island Development Order. This Amendment prohibits wells in the Plantation except when the utility company is unable to provide service due to water unavailability. We have never denied service and we have ample capacity at this time. All wells must be abandoned and plugged within thirty (30) days of connecting to our water service. Said abandonment must be inspected by the Utility, Franklin County and/or the Department of Community Affairs.

As you can see by the attached copy of a letter from Franklin County dated August 19, 2005, they have never received a request nor issued any permits for temporary wells in the Plantation. All existing wells in the Plantation are illegal, under both County and State law.

If I can be of any help to you or your agency, please do not hesitate to call.

Sincerely,

Nita Molsbee
Manager

WELLS ON ST. GEORGE ISLAND

	ACCT. NO.	ADDRESS	LEGAL DESCRIPT.
1	1	1200 Leisure Lane	Entrance to Plantatior (not working)
2	2	1200 Leisure Lane	Entrance to Plantation
3	1137	1231 Avocet Lane	8 Osprey
4	1519	1336 Azalea Dr.	10 Sea Pine
5	34	1340 Acacia	29 Sea Pine
6	1516	1415 Dove Lane	4 Bay Palm
7	1732	1419 Evodia Court	17 Bay Palm
8	56	1431 Evodia Court	20 Bay Palm
9	1765	1400 Elm Court	48 Sea Palm
10	1730	1404 Elm Court	49 Sea Palm
11	1091	1412 Elm Court	51 Sea Palm
12	1090	1416 Elm Court	52 Sea Palm
13	1028	1432 Blueberry Rd.	61 Sea Palm
14	47	1468 Blueberry Rd.	70 Sea Palm
15	58	1451 Pelican Court	entrance tennis court
16	1840	1431 Pelican Lane	7 Pelican Point
17	62	1552 Seaside Dr.	3-4 Nick's Hole
18	1059	1524 Seaside Dr.	10 Nick's Hole
19	1573	1601 Gannet	20 Sandpiper
20	1525	1652 Forsythia Way	2 Pebble Beach
21	67	1624 Forsythia Way	9 Pebble Beach
22	1596	1640 Forsythia Way	13 Pebble Beach
23	1662	1648 Forsythia Way	15 Pebble Beach
24	1115	1616 Forsythia Court	21 Pebble Beach
25	1118	1616 Guava Trail	34 Pebble Beach

26	1108	1620 Guava Trail	36 Pebble Beach
27	1758	1604 Hawthorne Lane	47 Pebble Beach
28	76	1620 Hawthorne Lane	51 Pebble Beach
29	84	1612 Ivy Way	65 Pebble Beach
30	1542	1632 Ivy Way	70 Pebble Beach
31	1533	1610 Ibis Way	5 Windjammer
32	80	1635 Ibis Way	9 Windjammer
33	88	1712 Jasmine Way	4 Turtle Beach
34	90	1728 Jasmine Way	8 Turtle Beach
35	92	1736 Jasmine Way	10 Turtle Beach
36	1439	1740 Jasmine Way	11 Turtle Beach
37	1677	1700 Kumquat Court	16 Turtle Beach
38	1484	1716 Kumquat Court	20 Turtle Beach
39	1495	1736 Kumquat Court	25 Turtle Beach
40	1151	1708 Lilac Lane	33 Turtle Beach
41	100	1728 Lilac Lane	38 Turtle Beach
42	1634	1752 Lilac Lane	44 Turtle Beach
43	1583	1704 Magnolia Road	46 Turtle Beach
44	108	1712 Magnolia Road	48 Turtle Beach (pump not there)
45	109	1712 Magnolia Road	48 Turtle Beach (pump not there)
46	110	1716 Magnolia Road	49 Turtle Beach
47	112	1724 Magnolia Road	51 Turtle Beach
48	113	1732 Magnolia Road	52 Turtle Beach
49	1506	1801 Harbor Light Lane	12 Bay View
50	147	1839 Harbor Light Lane	21 Bay View
51	1377	1843 Harbor Light Lane	22 Bay View
52	1814	1859 Harbor Light Lane	26 Bay View
53	123	1836 Sea Oat Drive	6 Plantation Beach
54	1202	1840 Sea Oat Drive	7 Plantation Beach
55	125	1844 Sea Oat Drive	8 Plantation Beach
56	131	1800 Plantation Pass	23 Plantation Beach

57	117	1828 Denise Drive	38 Plantation Beach
58	1750	1820 Suzie Court East	44 Plantation Beach
59	1517	1824 Suzie Court East	45 Plantation Beach
60	1559	1812 Suzie Court East	59 Plantation Beach
61	1528	1936 Nautilus Drive	15 Treasure Beach
62	165	1912 Nautilus Drive	26 Treasure Beach
63	152	1908 Coral Reef Road	33 Treasure Beach
64	181	2120 Tarpon Lane	2 Pelican Beach
65	1424	2124 Tarpon Lane	3 Pelican Beach
66	1530	2140 Tarpon Lane	7 Pelican Beach
67	1500	2148 Tarpon Lane	9 Pelican Beach
68	195	2132 Sea Fern Way	14 Pelican Beach
69	196	2136 Sea Fern Way	15 Pelican Beach
70	199	2164 Sea Fern Way	22 Pelican Beach
71	1124	2032 Pelican Way	38 Pelican Beach
72	1208	2123 Blue Heron Trail	6 Heron Bay
73	1808	2127 Blue Heron Trail	7 Heron Bay
74	1640	2120 Seahorse Lane	2 Dolphin Beach
75	1548	2136 Seahorse Lane	6 Dolphin Beach
76	211	2144 Seahorse Lane	8 Dolphin Beach
77	986	2112 Palmetto Way	9 Dolphin Beach
78	220	2132 Palmetto Way	14 Dolphin Beach
79	221	2104 Palmetto Way	23 Dolphin Beach
80	212	2148 Seahorse Lane	25 Dolphin Beach
81	207	2104 Seahorse Lane	29 Dolphin Beach
82	1212	2216 Sailfish Drive	4 Casa Del Mar
83	1213	2214 Sailfish Drive	5 Casa Del Mar
84	1223	2292 Sailfish Drive	16 Casa Del Mar
85	1403	2246 Sailfish Drive	39 Casa Del Mar
86	1356	2230 Sailfish Drive	47 Casa Del Mar
87	1207	2235 Coquina Drive	6 Oyster Bay

88	1579	2209 Conch Drive	9 Oyster Bay
89	1513	Bayside Pool	Bayside
90	1851	2332 Schooner Landing	2 Schooner Landing
91	1685	2311 Tally Ho	15 Schooner Landing
92	1365	2303 Tally Ho	17 Schooner Landing
93	1308	2325 Leisure Lane	18 Schooner Landing
94	1947	2301 Leisure Lane	23 Schooner Landing
95	1722	2308 Schooner Landing	30 Schooner Landing

FRANKLIN COUNTY

REPLY TO ☐

BOARD OF COUNTY COMMISSIONERS
33 MARKET STREET, SUITE 203
APALACHICOLA, FL 32320
(850) 653-8861, EXT. 100
FAX (850) 653-4795

REPLY TO ☐

PLANNING & BUILDING DEPT.
34 FORBES STREET
APALACHICOLA, FL 32320
(850) 653-9783
FAX (850) 653-9799

August 19, 2005

Ms. Nita Molsbee
Water Management Services
St. George Island, FL 32328

Dear Ms. Molsbee:

Please be advised that in 1993 the Franklin County Board of County Commissioners amended the St. George Island Development Order to allow for the installation of a maximum of 30 temporary wells in the Plantation. The wells were for people who were seeking to build residential homes but could not get a tap from the Utility Company because at the time the Utility Company had a limited number of water taps available to new customers.

I have enclosed a copy of the Amendment. As I recall, the county never received any requests nor issued any permits in connection with this amendment. The issue became moot within a year or two when the Utility Company was once again able to issue water taps on request.

If you have any questions, please feel free to contact me at 850-653-9783, ext. 161.

Sincerely,

Alan C. Pierce, Director
Administrative Services

RUSSELL CROFTON
District One

CHERYL SANDERS
District Two
Chairman

NOAH LOCKLEY, Jr.
District Three

JIMMY G. MOSCONIS
District Four

BEVIN PUTNAL
District Five
Vice-Chairman

FEB 2 1993
FL 9300066 B 402 P 271
CO:FRANKLIN ST:FL

REVISED FOURTH AMENDMENT TO
ST. GEORGE ISLAND DEVELOPMENT ORDER

WHEREAS, the Franklin County Board of County Commissioners adopted three prior amendments to the original St. George Island Development Order dated September 20, 1977, and said amendments were adopted July 16, 1985, November 3, 1987 and December 19, 1989, and

FILED AND RECORDED
DATE 02/03/93 TIME 14:10

WHEREAS, the Fourth Amendment to the St. George Island Development Order was adopted by the Franklin County Board of County Commissioners August 7, 1990, and corrected September 18, 1990, and

RECORD VERIFIED
BY: DC

WHEREAS, the State of Florida Department of Community Affairs appealed the said Fourth Amendment, and State of Florida Department of Community Affairs, Franklin County Board of County Commissioners, and all parties to the appeal entered into a Stipulated Settlement Agreement, in the State of Florida Division of Administrative Hearings Case No. 91-0370 DRI, and

WHEREAS, the Franklin County Board of County Commissioners now intends to effectuate the settlement agreement by adopting this Revised Fourth Amendment to the St. George Island Development Order,

KENDALL WADE CLERK
CO:FRANKLIN ST:FL

NOW, THEREFORE, THE FRANKLIN COUNTY BOARD OF COUNTY COMMISSIONERS issues the following findings of fact, conclusions of law, and conditions of development:

1. Paragraph 8, page 9 of the St. George Island Development Order dated September 20, 1977, is hereby deleted and rescinded,

FL 9300066 B 402 P 272
CO:FRANKLIN ST:FL

and a new amended paragraph 8 is adopted. It is intended hereby to incorporate verbatim the provisions of the aforesaid settlement agreement:

8. A maximum of thirty (30) temporary fresh water wells may be installed, and used by property owners who are seeking to build residential homes ("homeowner"). Additional temporary water wells shall not be permitted as replacement wells for any one of the allowable 30 temporary water wells that is abandoned in accordance with subparagraph vi. hereinbelow. The 30 temporary fresh water wells shall only be allowed under the conditions set forth hereinbelow:

i. A written request for water service must be made by the homeowner to the St. George Island Utility Company ("Utility Company"). The Utility Company's response must indicate that the homeowner's request is being denied on the basis of unavailability of water service. The Utility Company shall respond in writing to all of the homeowners request letters and shall send Franklin County a copy of its response letter. Failure by the Utility Company to respond in writing to the homeowner's request within 10 days of the Utility Company's receipt of the request will be tantamount to a determination that water service is not available to the homeowner.

ii. Franklin County may issue a building permit for the construction of the homeowner's residence, once the homeowner presents written documentation to Franklin County evidencing that it has complied with subparagraph i. hereinabove, has obtained the permit as required in subparagraph iii. hereinbelow, and providing the issuance of the building permit meets all other applicable land development regulations.

iii. The homeowner must provide written notice of temporary water well installation to the Utility Company and obtain a permit from the Northwest Florida Water Management District before installing the temporary water well. The installation must be done by a Florida Licensed Water Well Contractor.

iv. The homeowner, during construction of the residence, must install water lines, so that when water is available from the Utility Company, the Utility Company can connect the homeowner's residence to the water main.

FL 9300066 B 402 P 273
CO:FRANKLIN ST:FL

v. The Franklin County Planning Department will provide the Utility Company with a list of homeowners who have been granted building permits to construct residences with temporary water wells. Within one week of the Utility Company gaining capacity to provide water service to the homeowner's residence, and upon payment of the appropriate connection fee the Utility Company must install a water connection to the residence and notify in writing the Department of Community Affairs, the Northwest Florida Water Management District and the homeowner of the availability of the water service. Within two weeks of receipt of the Utility Company's notification of the availability of water service to the residence, the homeowner must connect to the water service. Immediately after connecting to the Utility Company the temporary water well must be physically disconnected from the residence to the satisfaction of the Utility Company.

vi. Within 30 days of the homeowner connecting to the water service, the homeowner must have the well properly abandoned and plugged in accordance with Rule 40A-3.531, F.A.C. This action will entail filling the well with cement grout, from the bottom of the well to land surface. Within 45 days of the homeowner connecting to the water service the Utility Company, Franklin County and/or the Department of Community Affairs will inspect the homeowner's property to ensure that the water well has been abandoned and plugged in the manner set forth above.

2. The County Clerk shall transmit a certified copy of this Revised Fourth Amendment to the St. George Island Development Order by certified mail to the Department of Community Affairs, the Regional Planning Council, and the applicant.

DONE AND ORDERED this 2nd day of February, 1993.

BOARD OF COUNTY COMMISSIONERS
OF FRANKLIN COUNTY

BY: Buford Braxton, Jr.
Buford Braxton, Its Chairman

ATTEST:

Kendall Wade
Clerk of Circuit Court

FL 9300066 B 402 P 274
CO:FRANKLIN ST:FL

I HEREBY CERTIFY that copies of the Revised Fourth Amendment to St. George Island Development Order have been mailed to the following parties by U.S. Mail on this 3rd day of February, 1993.

Department of Community Affairs
Apalachee Regional Planning Council

Kendall Wade

KENDALL WADE
Clerk of Circuit Court

Wells Identified by NWFWMD on SGI

3/21/2006 List compiled from field inspection sheets provided by NWFWMD Jessica

NAME	ADDRESS
	1801 Harbour Light
	2127 Blue Heron Trail
	2308 Schoower Landing
	2230 Sail Fish Dr
	2144
Max	2136 Sea Fern Wax
	2148 Tarpon Lane
	1432 E. Gulf Beach Dr
	1316 E. Gulf Beach Dr
	1220 E. Gulf Beach Dr
	248 E. Gulf Beach Dr
	SW Corner of E 7th St and Gulf Beach Dr
	E. Gulf Beach Dr
	E. Gulf Beach Dr E. of 748
Folser Partners	1332 East Gulf Beach Dr
	1364 E. Gulf Beach Dr
D.O.T State of FL	
D.O.T State of FL	
Apalachicola State Bank	NW Corner of Franklin Blvd & West Pine Ave
	315 Cooke Rd
	309 Marks Road
	800 Akel
	700 Randolf
	315 Howell St
	572 Bayshore
	NE Corner of Wing & Bayshore
	352 Patton St
	339 Land St
	705 Buck St
	308 Gibson St
	304 Gibson ST
	304 Marks St
	989 W. Bay Shore Dr
	1116 West Pine
	West Gulf Beach
	1180 W. Gulf Beach
	W. Pine
Herndons	965 W. Pine
	825 W Pine
	525 W. Pine
	516 W. Bayshore
	W. Bayshore Street
Mike Moberely	300 Wing Street
	617 W. Pine
	404 Mccloud

Wells Identified by NWFWMD on SGI

3/21/2006 List compiled from field inspection sheets provided by NWFWMD Jessica

	507 W. Sawyer St
	1000 W. Gorrie Dr
	849 W. Gorrie Dr
Anchor Vac Prop..	773 W Gorrie Dr
	Green Stucco House on N. Side W Gorrie Dr Next to 733 Address
	700 W. Gorrie Dr
Jack Schoelles	701 W. Gorrie Dr
Collins Vac	678 W. Gorrie Dr
Mr. Mims	616W. Gorrie Dr
Prudential Realty	581 W. Gorrie (Beige House on corner of W. 6 th and W Gorrie Dr)
	601 W. Gorrie Dr
	Collins Vac Ren. Sea Glaze Gray House on So. Side of W. Gorrie Just West of 5th St Int
	White Block House on So. Side of W. Gorrie St
	509 W. Gulf Beach
	Anchor Vacation 557 W. Gulf Beach
	724 W. Gulf Beach
	965 West Gulf Beach
	West Gulf Beach
Bill Hicks	301 E. Sawyer
	301 E. Sawyer
	873 E. Gorrie Dr
	1248 E. Gulf Beach
	1328 E. Gulf Beach
	1348 ? E. Gulf Beach Dr
	1125 W. Gorrie
	1116 W. Gorrie Dr
	1141 W. Gorrie
	Prudential No # W. Gorrie
	1152 E. Gulf Beach Dr
	1135 Gulf Beach Dr
	1108 E Gulf Beach Dr (1st drive E. of 11th St)
	1136 E. Gulf Beach
	872 E. Gorrie Dr
	Collins Rental 609 E Gorrie Dr
	Resort Vac 625 E. Gorrie Dr
	749 E Gorrie Dr
Charlotte James	757 E. Gorrie Dr
	616 E. Gulf Beach
	Yellow W House on E Side of E. 11 th St on corner or E. Gorrie and E. 11th St
	1041 E. Gorrie Dr
	1024 E. Gorrie Dr
	1016 E. Gorrie Dr

Wells Identified by NWFWMD on SGI

3/21/2006 List compiled from field inspection sheets provided by NWFWMD Jessica

	1009 E. Gorrie Dr.
Suncoast Realty	1000 E. Gorrie Dr
	949 E. Gorrie Dr
	Brown/Gray House 948 E. Gorrie Dr.
	946 E. Gorrie Dr
	924 E. Gorrie Dr
	909 E. Gorrie Dr
	516 E. Gorrie Street
	332 W. Pine Ave
Buccaneer Inn	160 W. Gorrie
Armistead Realty	900 W. Gorrie
	404 E Gulf Beach
The M House	416 Pine
	132 Franklin Blv
Century 21 Collins Realty Inc	60 East Gulf Beach Dr
	E Gulf Beach
	664 East Pine
Lamar and Margie Sims	816 E. Gulf Beach Dr
Roy Wester	Lot 9 Block H Unit 2 E Gulf Beach Dr
	West of 948 E Gulf Beach Dr
	964 E Gulf Beach
	1001 E. Gulf Beach Dr
	320 Brinkley
	1065 Brinkley
Victor & Joyce Cobb	901 East Pine
Lee Benoit	872 E Pine Ave
	740 East Pine
	473 East Gulf Beach
Grady & Marsha Underwood	565 East Gulf Beach
Gary & Sue Mohoney	557 East Gorrie Dr
	Next House East of 533 East Gorrie
	401 East Gorrie
	317 East Gorrie
Drew Mcleod Finnis	200 Gunn St
	251 W. Gulf Beach Blvd
	333 West Gulf Beach Dr
	332 W Gorrie
	316? West Gorrie
Blue Parrot	68 West Gorrie Dr
BJ's Pizza	Lt 15 Blk 5 NW Corner WI ST & Gulf Beach
Villas at St. George	Lot 16 Block 10 Gorrie Drive
Gulf State Community Bank	Gulf Beach Dr
Jim Wojcik	1419 Evodia Ct
	Pelican Point Entrance Box Tennis Ct
	649 E. Gulf Beach
	617 E Gorrie

Wells Identified by NWFWMD on SGI

3/21/2006 List compiled from field inspection sheets provided by NWFWMD Jessica

	816 E. Gorrie Drive
Dolphin Dance	848 E. Gorrie Drive
	1126 E. Gulf Beach Dr
	1128 E. Gulf Beach
Jon & Pat Hargas	E. Gulf Beach Dr
Leslie Fennell	772 E. Gulf Beach Dr
Leigh Atkins	673 E. Gulf Beach
Resort Vacation Prop	665 E Gulf Beach
Resort Vacation Prop	733 E Gulf Beach
James Guernsey	765 E. Gulf Beach Drive
	925 E. Gulf Beach
	941 E. Gulf Beach
	E. Gulf Beach
Bali House	Gulf Beach Dr
	E Gulf Beach
Robert Gardner	1009 E. Gulf Beach Dr
Suncoast Realty	Tide Water (E Pine Street)
	E. Bayshore Drive (Vacant Lot)
	849 East Pine St
	640 E Pine Street
	608 E Pine
	541 E. Gulf Beach
JJ Reeder	449 E. Gulf Beach
Collins Vacation	E Gulf Beach Street
	6th Street
Sea Haze	556 E. Gorrie
	408 E. Gorrie Street
Bassetts	424 E. Gorrie
George & Modell Kirvin	332 E. Gorrie ST
	300 E. Gorrie Street
	1205 E. Gulf Beach
	1105 E. Gulf Beach
Prudential Realty	45 E. 1ST St
William Short	160 E. Pine Ave
Brant Banks	119 Franklin
Sarah Rodriquez	151 East Gorrie
Resort Vacation Prop	Sand Piper Cottage # Not found, Corner E. 5th &E. Gorrie
	517 E. Gorrie
	549 E. Gorrie
	616 E. Gorrie
	573 E. Gulf Beach
	220 E. 6th St
	725 E. Pine St
	725 E. Pine St

Wells Identified by NWFWMD on SGI

3/21/2006 List compiled from field inspection sheets provided by NWFWMD Jessica

	No # on House 2nd House W. of E 9th St, Next Door to 889 E. Pine On N. Side Ave
	889 E. Pine Ave
	No # S/E Corner of E 10th St & E Pine Ave
	No # Corner of E. Pine & E 11th St
	1000 E. Gulf Beach Dr
Robert Boqusky	1153 E. Gulf Beach

(2)

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0744
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 1801 Harbour Light
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: 10-27-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29° 37 44.69

GPS LONGITUDE: W84° 56 01.86

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

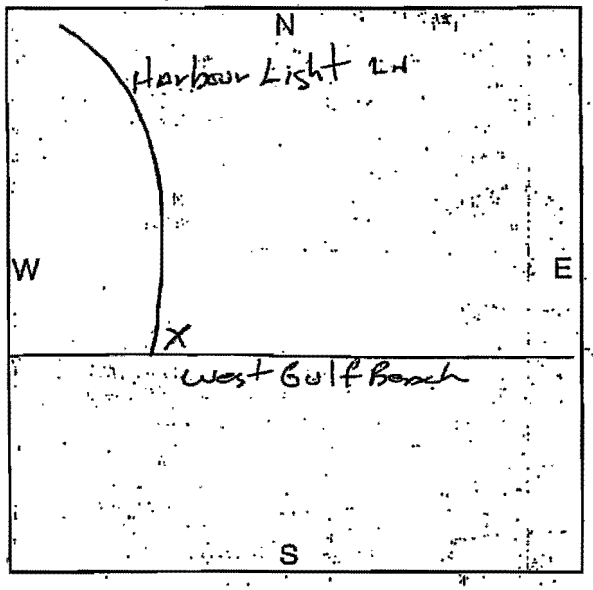
32. Screened Length: _____

33. Screened Intervals: _____

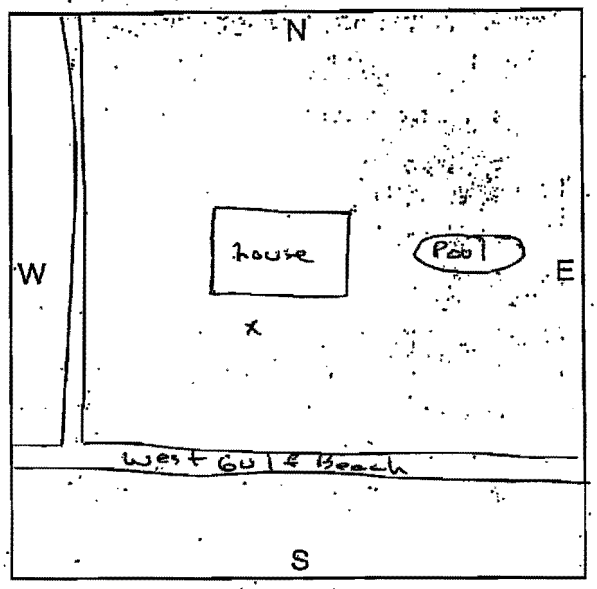
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition OK

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0744

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

(3)

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AWK0745
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): 2127 Blue Heron Trail
    City: St. George Island
    Zip: _____
    County: Franklin Phone: _____

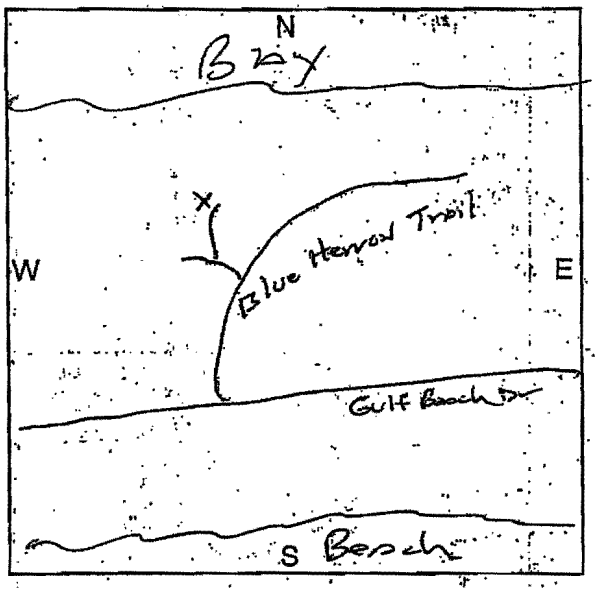
14. SCHEDULE FILLED OUT BY:
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-27-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29°37'1500
    GPS LONGITUDE: 84565743

WELL INFORMATION
(Information in this column should be filled out if possible)

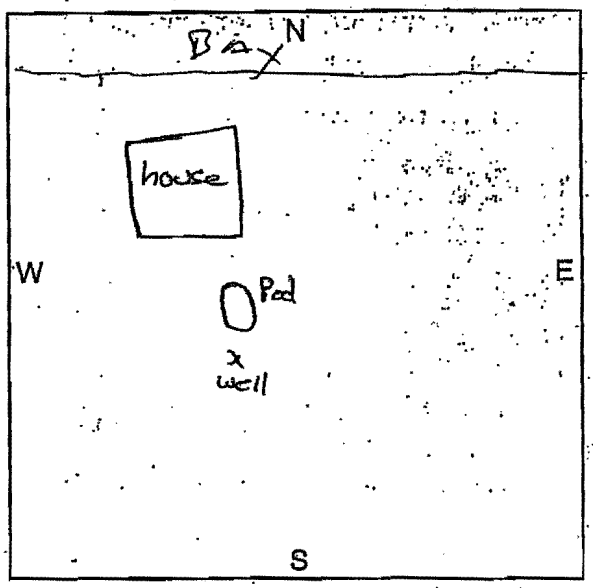
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1/2 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition OK

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0745

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

(4)

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. ANK0746
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 2308 Schooner Landing
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: 10-27-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10-27-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N 29° 36' 57.66

GPS LONGITUDE: W 84° 57' 21.83

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bell Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

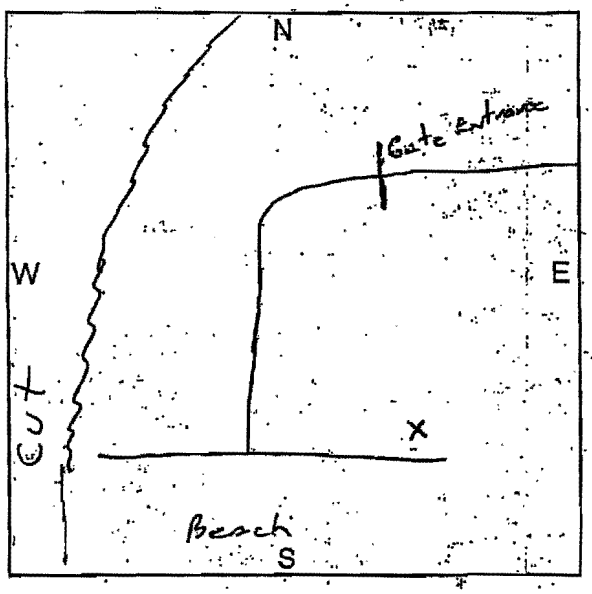
32. Screened Length: _____

33. Screened Intervals: _____

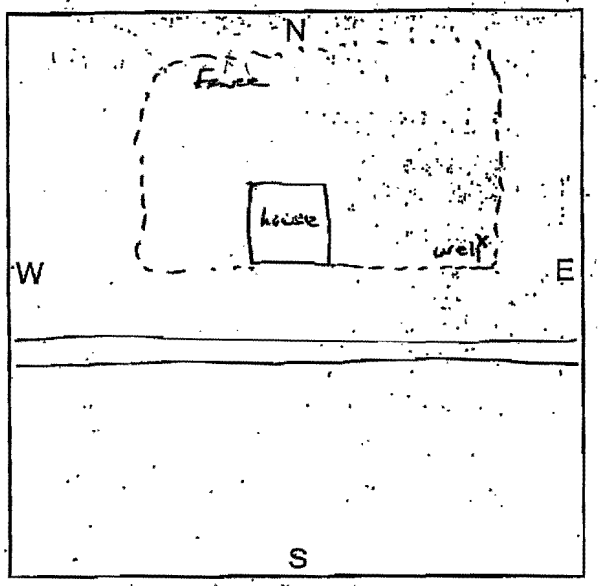
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. 1

39. Contractor Name_____

40. License Number_____

41. Casing Specifications: Standard ✓ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition ok

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0746

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

(5)

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AWK0747
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 2230 Sail Fish Dr.
    City: St. George Island
    Zip: _____
    County: Franklin **Phone:** _____
    "Hide out"

14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-27-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10-27-05 **PHONE:** _____

    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

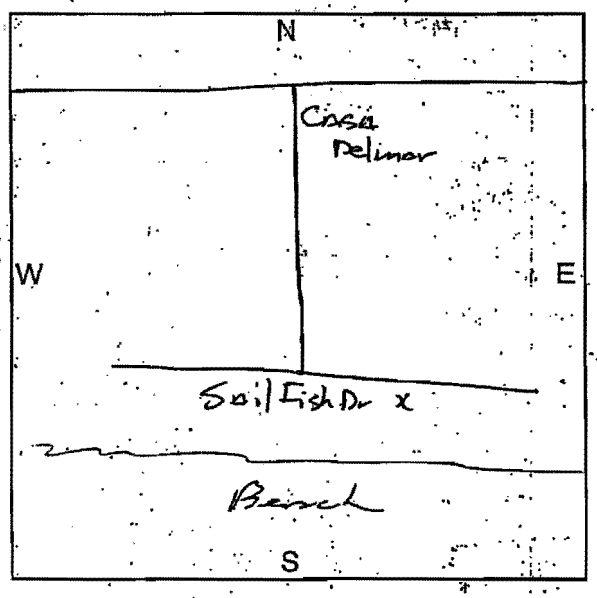
    GPS LATITUDE: 29° 37 06.65
    GPS LONGITUDE: 84° 56 56 44

WELL INFORMATION
(Information in this column should be filled out if possible)

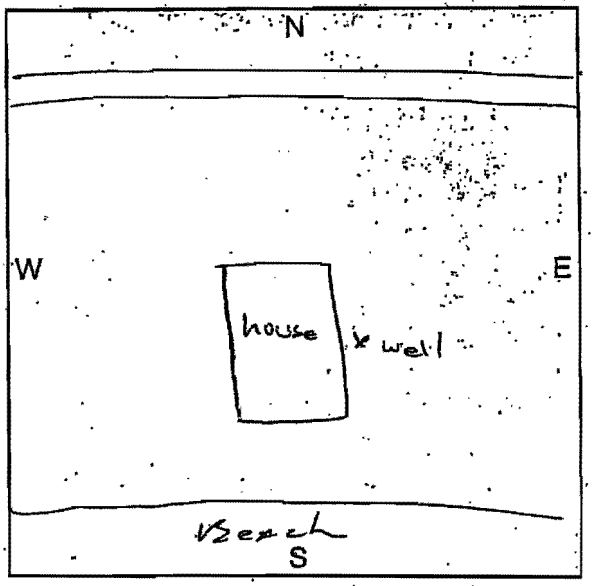
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard ✓ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition OK

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0747

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

(16)

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** Ank 0748
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. **WELL ADDRESS (Location):** 2144
City: St. George Island
Zip: _____
County: Franklin Phone: _____

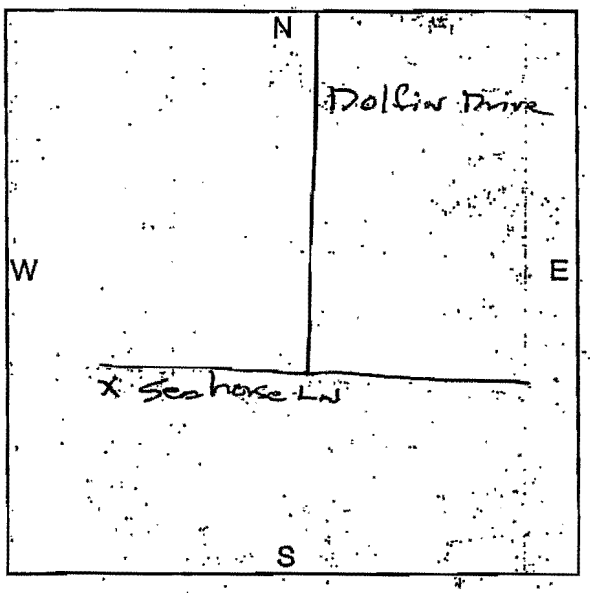
14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29°37'12.10
GPS LONGITUDE: 84°56'44.39

WELL INFORMATION
(Information in this column should be filled out if possible)

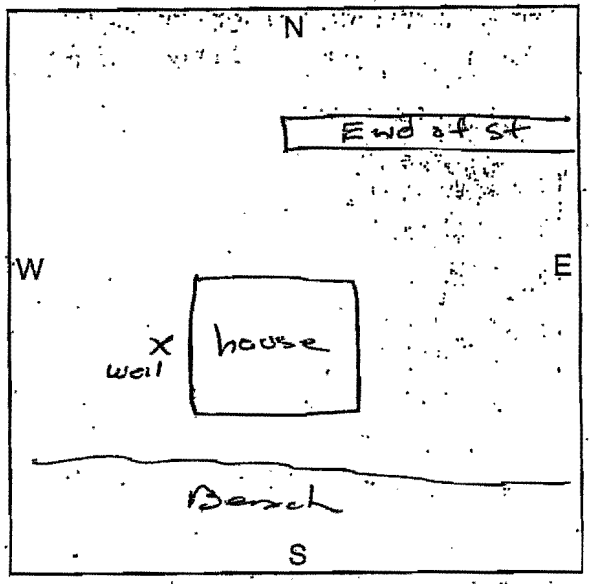
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1½" 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: _____ 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition OK

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAK0748

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

9

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0749
2. NWFWMD CPS I.D.: 2 wells - 1 pump
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Max
12. **Mailing Address:**

City:
State: Zip:
County: Phone:

13. **WELL ADDRESS (Location):** 2136 Sea Fern Way
City: St. George Island
Zip:
County: Franklin Phone:

14. **SCHEDULE FILLED OUT BY:**
NAME: Tom Shepard
AGENCY:
DATE: 10-26-05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: 10-26-05 PHONE:

DATUM: (Default WGS 84)
EST. ACCURACY: (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: N 29° 37 17.31
GPS LONGITUDE: W 84 56 32.85

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

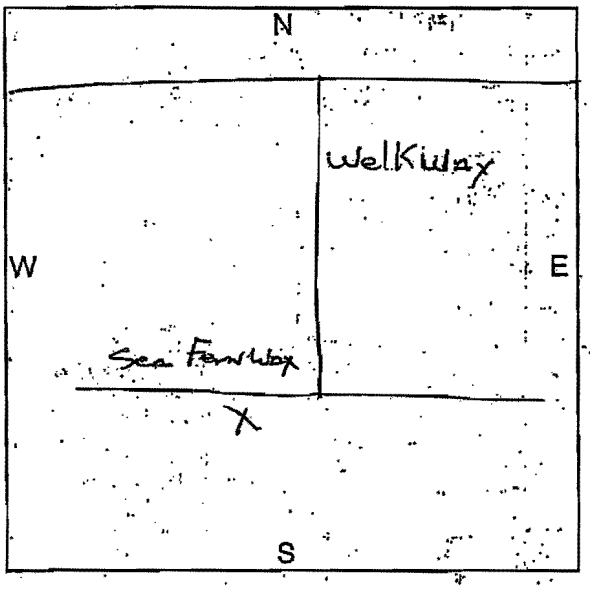
32. Screened Length: _____

33. Screened Intervals: _____

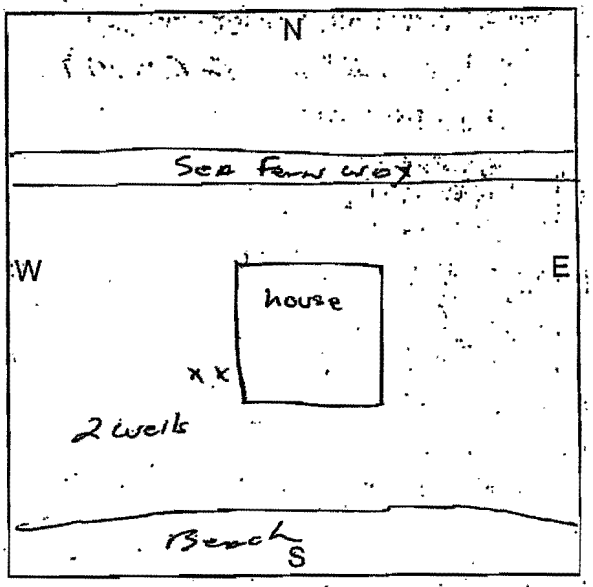
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. 1
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0749

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

8

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0750
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS** (Location): 2148 Tarpon Ln
    City: St George Island
    Zip: _____
    County: Franklin Phone: _____

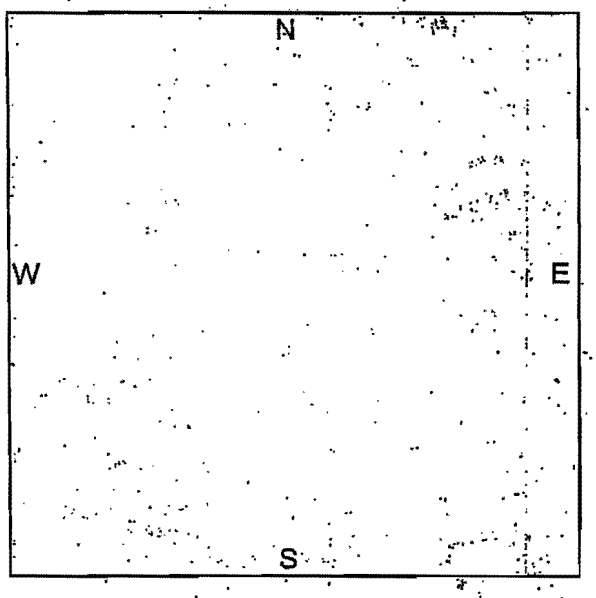
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-26-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29°37'20.39"
    GPS LONGITUDE: 84°56'26.96"

WELL INFORMATION
(Information in this column should be filled out if possible)

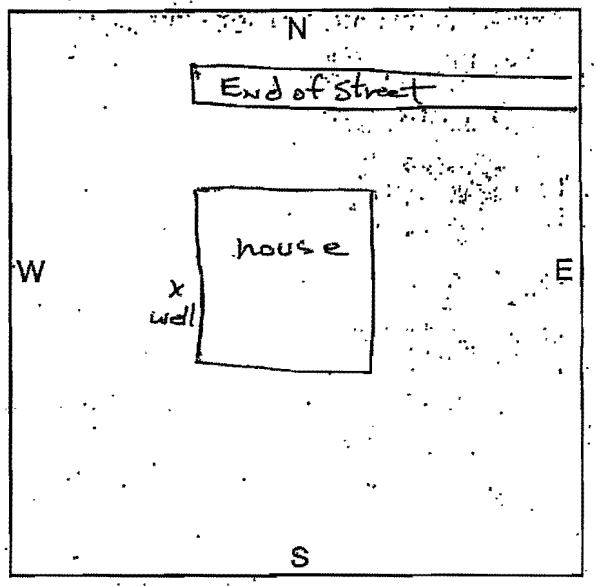
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
ACTN / Fl Tag # Timdee Const.
Pick up Tag # w/ new pump in truck and
bed w/ sprinkler's and pvc pipe for landscape
irrigation

FLORIDA
UNIQUE WELL ID
AAK0750

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

9

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** ANK0751
2. NWFWMD CPS I.D.: 2 wells AAJ4794
3. NWFWMD WI I.D.: steel well
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 1432 E. Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: C. Shepard
AGENCY: _____
DATE: _____ **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: 1"/4" Steel
AGENCY: N29 40 30 41
DATE: _____ **PHONE:** _____
W84 49 09 51
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
PVC
GPS LATITUDE: 29°40'31.52
GPS LONGITUDE: 84°49'09.75

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

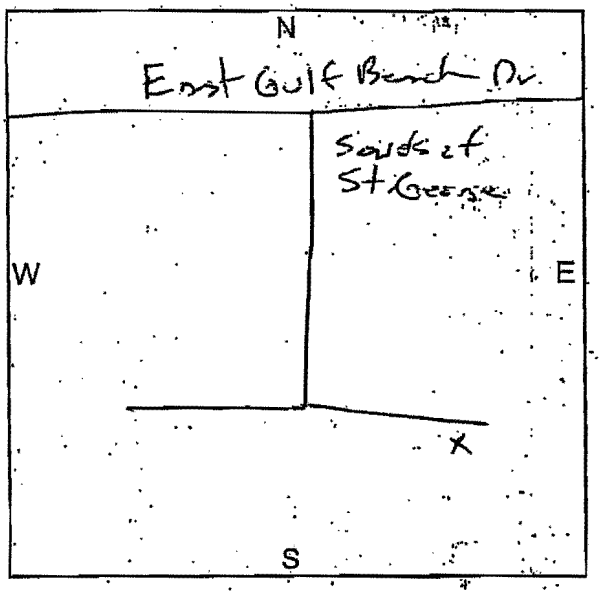
32. Screened Length: _____

33. Screened Intervals: _____

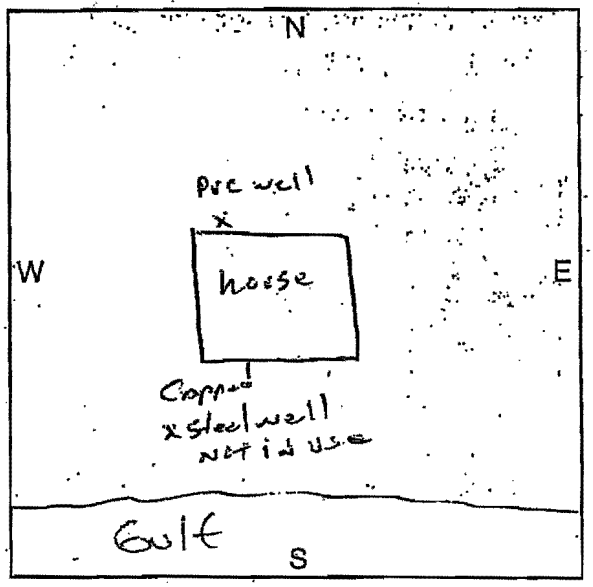
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
* Steel well not in use

FLORIDA UNIQUE WELL ID
AAJ4794

FLORIDA UNIQUE WELL ID
AAK0751

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

10

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0753
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 1316 E. Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin Phone: _____
"The Sea Nymph" Collins Vacation Rentals 927-2900

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-24-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-24-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N 29° 40' 27.87

GPS LONGITUDE: W 84° 49' 28.21

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: ? _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

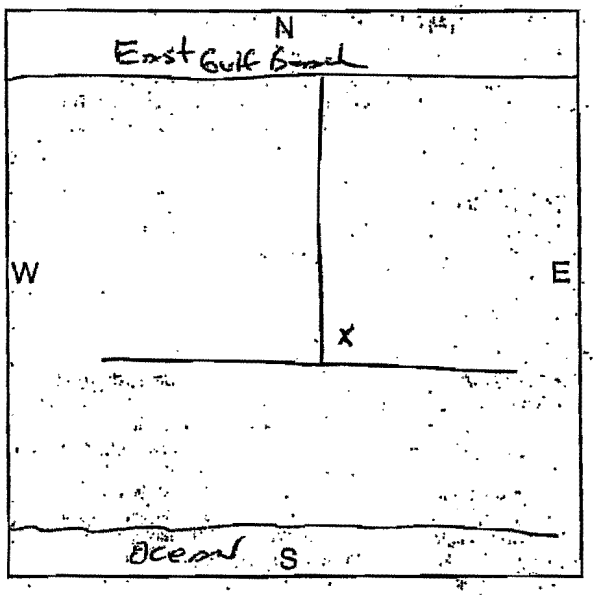
32. Screened Length: _____

33. Screened Intervals: _____

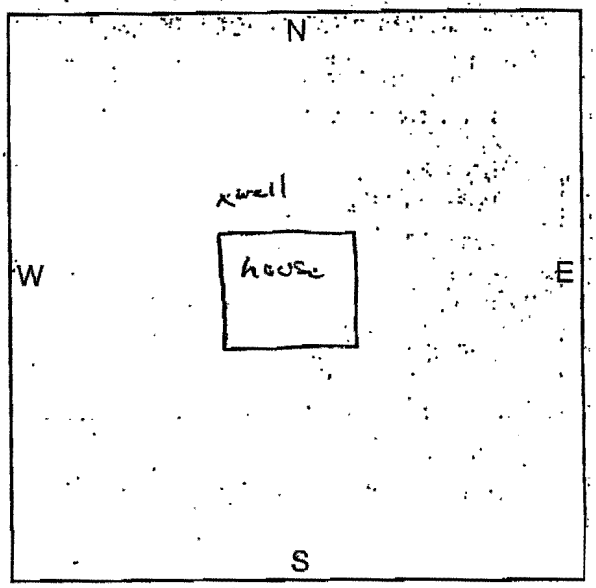
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number
41. Casing Specifications: Standard Substandard
If Substandard, Explain
42. Properly Grouted?
43. Well Seal Condition OK
44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other
45. Adequate Setbacks from House and/or Septic System? YES NO Explain
46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0753

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

11

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

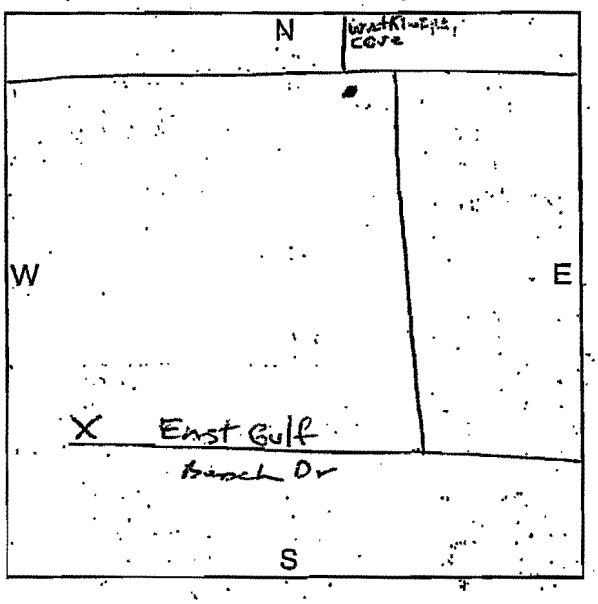
1. **FLORIDA UNIQUE I.D.** AAK0754
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS** (Location): 1220 E Gulf Beach Dr
    City: St. George Island
    Zip: _____
    County: _____ Phone: _____
    Arabella's Dream St. George Island Realty
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-24-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: N29°40'25.54
    GPS LONGITUDE: W84°49'39.90

WELL INFORMATION
(Information in this column should be filled out if possible)

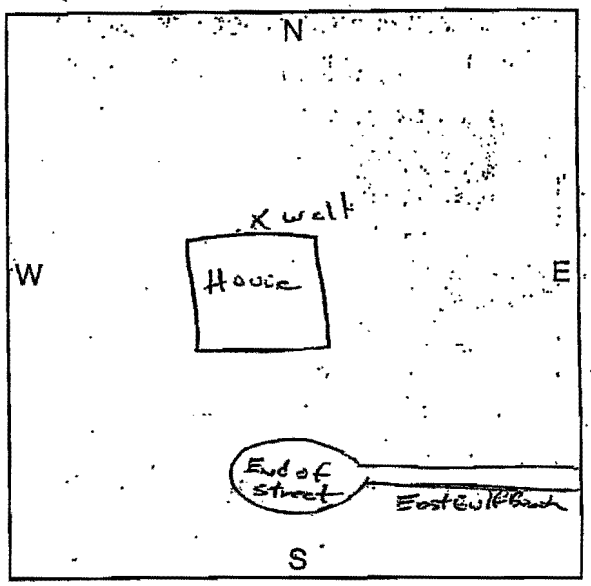
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard Substandard
If Substandard, Explain

42. Properly Grouted? 43. Well Seal Condition 0 ←

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other

45. Adequate Setbacks from House and/or Septic System? YES NO Explain

46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0754

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

12

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0759
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

    _____

    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____

13. **WELL ADDRESS** (Location): 248 E. Gulf Beach Dr.
    City: St. George Island
    Zip: _____
    County: Franklin **Phone:** _____
    "Boomerang"
    Anchor Vacation Properties 800-824-0416

14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-19-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10-19-05 **PHONE:** _____

    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

    GPS LATITUDE: N 29°40'04.84

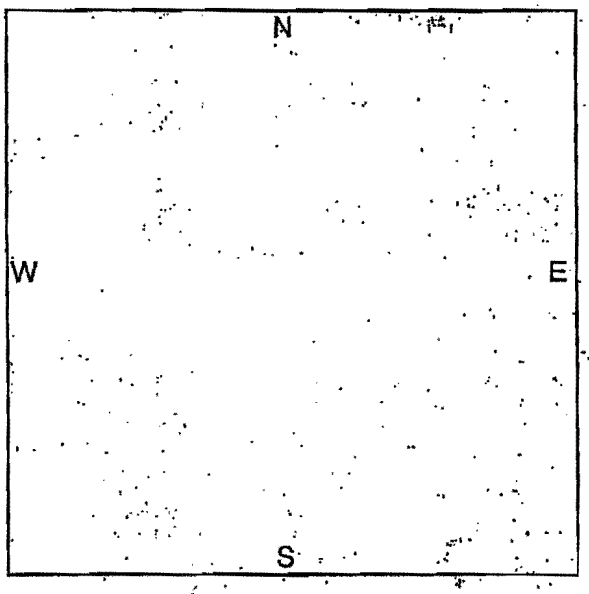
    GPS LONGITUDE: W 84°50'56.63

WELL INFORMATION
(Information in this column should be filled out if possible)

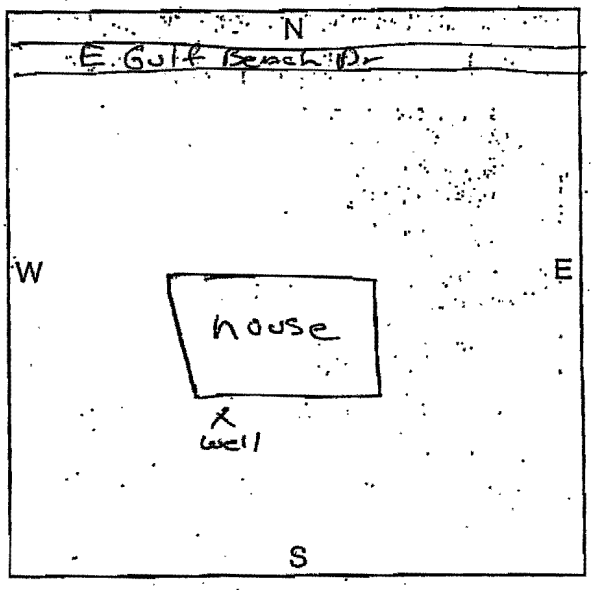
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: ?
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number
41. Casing Specifications: Standard ✓ Substandard
If Substandard, Explain
42. Properly Grouted?
43. Well Seal Condition OK
44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other
45. Adequate Setbacks from House and/or Septic System? YES NO Explain
46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0759

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

13

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0760
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
SW Corner of E 7th St & Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-19-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-19-05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29°40 06.56

GPS LONGITUDE: W84°50 50 15

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: well not in working order
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

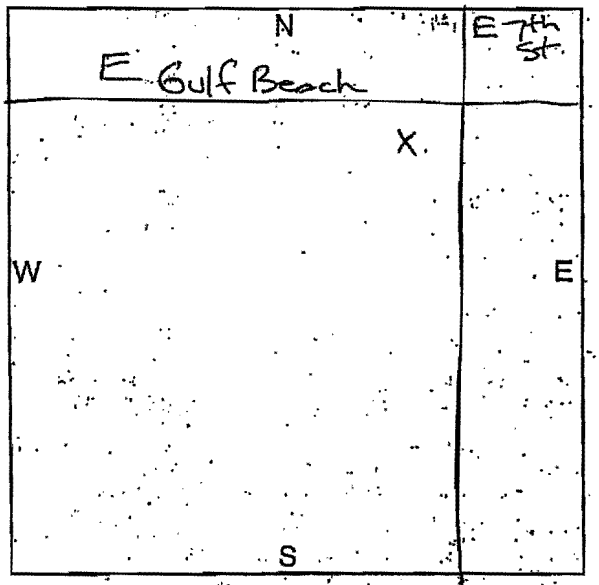
32. Screened Length: _____

33. Screened Intervals: _____

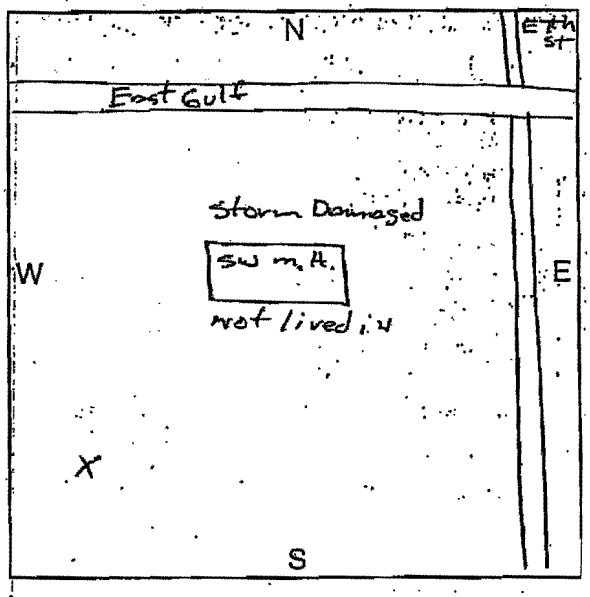
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition ____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
X well & pump not working

FLORIDA
UNIQUE WELL ID
AAK0760

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

14

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0761
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS** (Location): _____
E. Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin Phone: _____
"Moon Ray"
Sun Coast Realty 927-2282

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-19-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29° 40 08.84

GPS LONGITUDE: W84° 50 44 36

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: ?
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

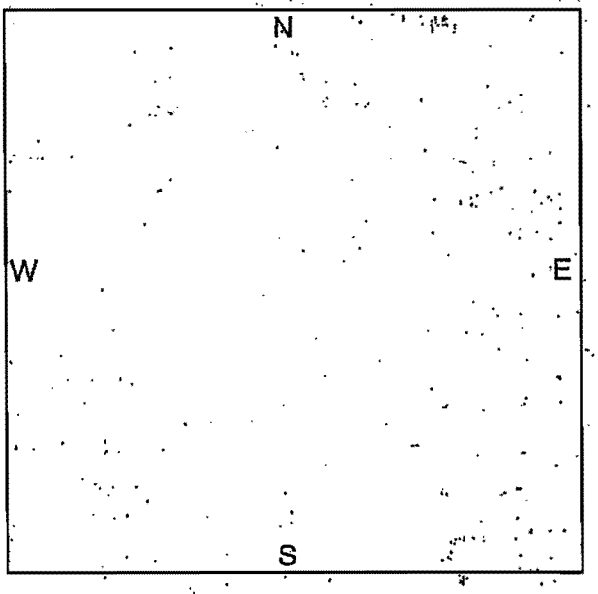
32. Screened Length: _____

33. Screened Intervals: _____

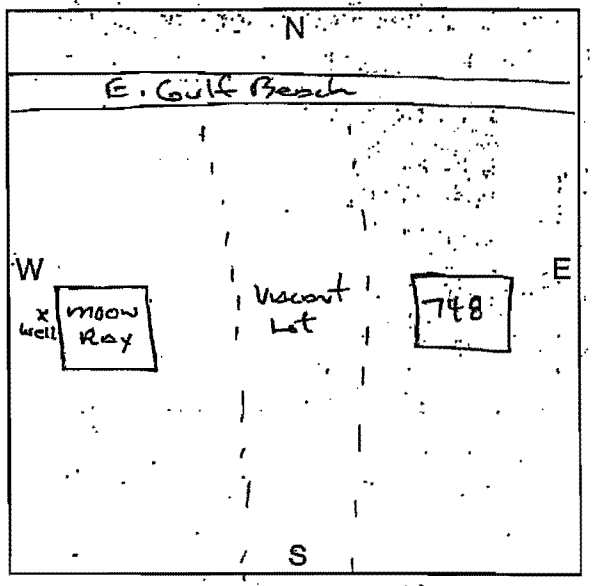
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition Open

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
X Well not in use, it is being repaired, with draw pipe and discharge pipe look to have just been cut.

FLORIDA
UNIQUE WELL ID
AAK0761

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

15

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** NNK0769
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____
    T _____ (N or S) **R** _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS** (Location): _____
    E Gulf Beach Dr E. of 748
    City: St. George Island
    Zip: _____
    County: Franklin **Phone:** _____
    "Fun Kissed"
    Anchor Realty 800-824-0416

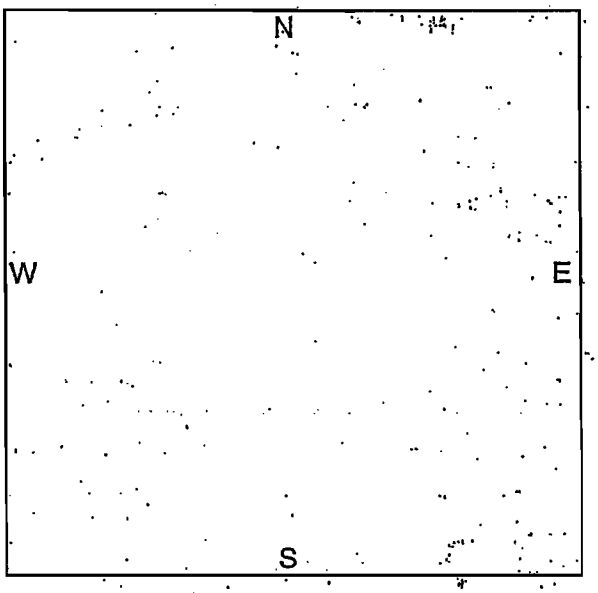
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-19-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10-19-05 **PHONE:** _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: N29° 40 10 39
    GPS LONGITUDE: W84° 50 41 24

WELL INFORMATION
(Information in this column should be filled out if possible)

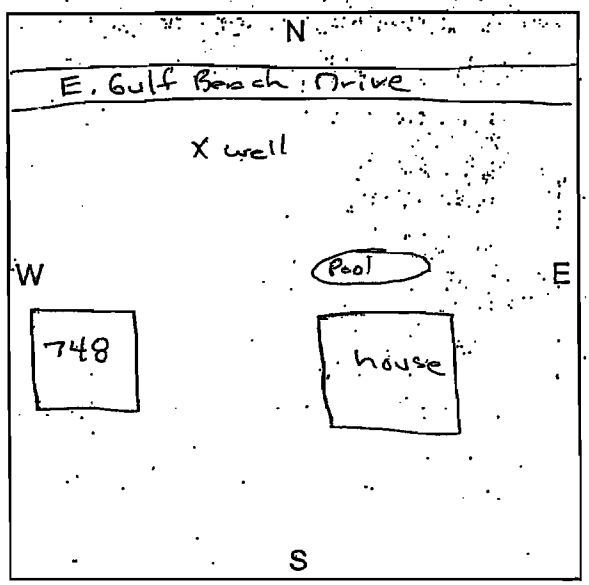
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: Line from pump broken
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: well not in use
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ? 38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition OK

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
X well not in use

FLORIDA
UNIQUE WELL ID
AAK0769

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

16

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Folger Partners
12. **Mailing Address:** 612 Chelmsford Place
City: Nashville
State: Tenn Zip: 37215
County: _____ Phone: 615-269-4078
13. **WELL ADDRESS (Location):** 1332 East Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin Phone: _____

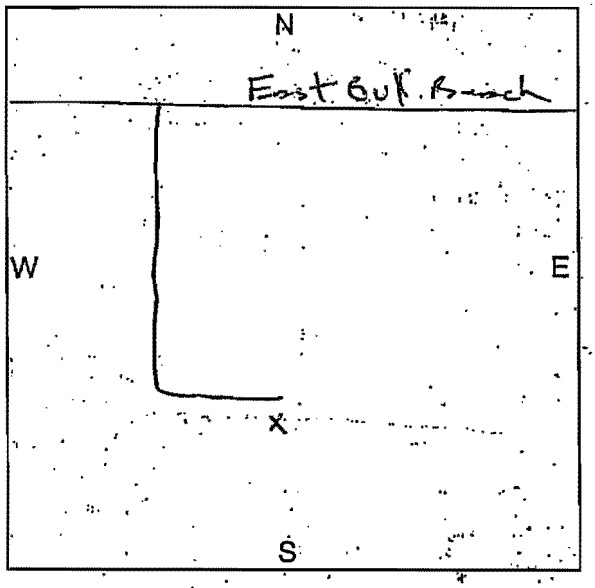
14. **SCHEDULE FILLED OUT BY:**
NAME: Tom Shepard
AGENCY: _____
DATE: 10-24-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-24-05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: W29°46'26"13
GPS LONGITUDE: W84°49'24"32

WELL INFORMATION
(Information in this column should be filled out if possible)

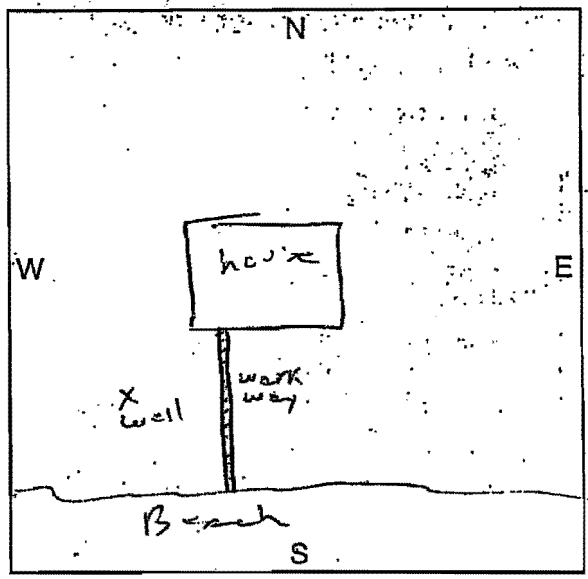
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
* Well covered w/sand Dune

FLORIDA
UNIQUE WELL ID
AAK0752

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

17

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)

    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____

13. **WELL ADDRESS** (Location): 1364 E. Gulf Beach Dr
    City: St. George Island
    Zip: _____
    County: Franklin **Phone:** _____
    The Pelican House.

14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: _____ **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ **PHONE:** _____

    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

    GPS LATITUDE: W 29° 40 28 97

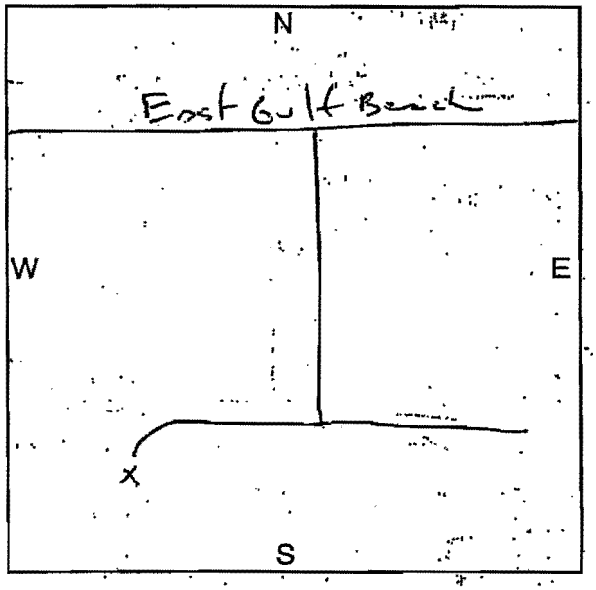
    GPS LONGITUDE: W 84° 49 18 81

WELL INFORMATION
(Information in this column should be filled out if possible)

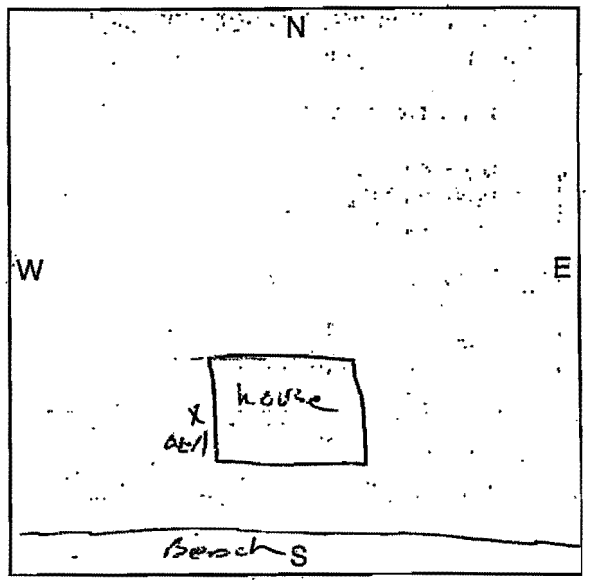
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. 1
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Dogs Barking; people home and they didn't come out

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

18

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D.: _____
2. NWFWMD CPS I.D.: No Permit
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): North well
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 A 1/4 of Sec 29
T 9 (N or S) R 6 (E or W)
Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** D.O.T. State of Fl.
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
St. George Island
City: _____
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 7-20-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 7-20-05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29°39'56.49
GPS LONGITUDE: 84°51'52.74

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: JT ?
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

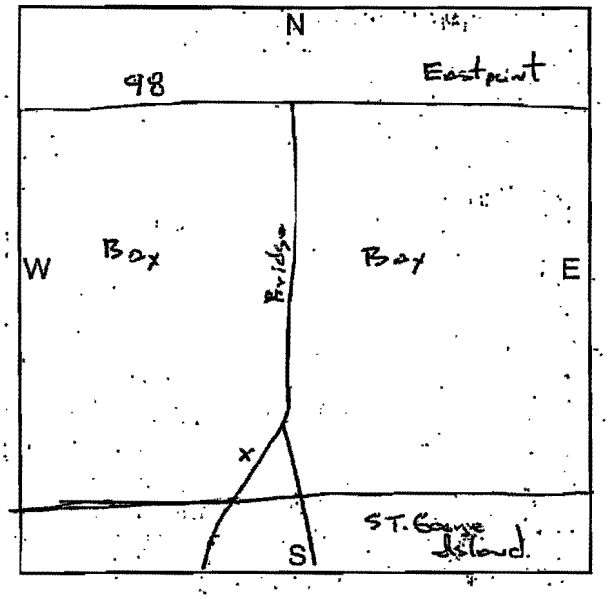
32. Screened Length: _____

33. Screened Intervals: _____

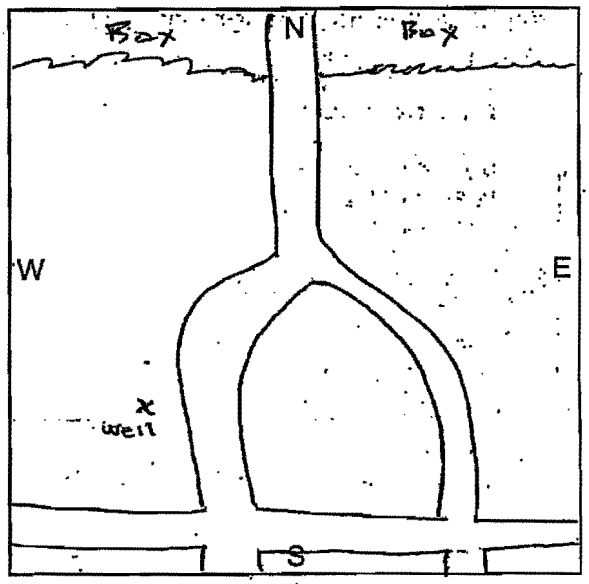
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number _____

41. Casing Specifications: Standard ✓ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition ok

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain ?

47. REMARKS/NOTES

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

19

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. _____
2. NWFWMD CPS I.D.: No Permit
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): middle well
9. SYSTEM NAME (If any): _____
10. **Land Net** ___ 1/4 ___ 1/4 A 1/4 of **Sec** 29
T 9 (N or (S)) **R** 6 (E or (W))
Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** DOT State of Fl
12. **Mailing Address:** _____
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
City: St. George Island
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 7-20-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 7-20-05 **PHONE:** _____
DATUM: _____ **(Default WGS 84)**
EST. ACCURACY: _____ **(<1, 1-3, 3-5, > 5 Meters)**
GPS LATITUDE: _____
GPS LONGITUDE: _____

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ST ?
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; (W) - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; (C) - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; (E) - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Beller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
(P) - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

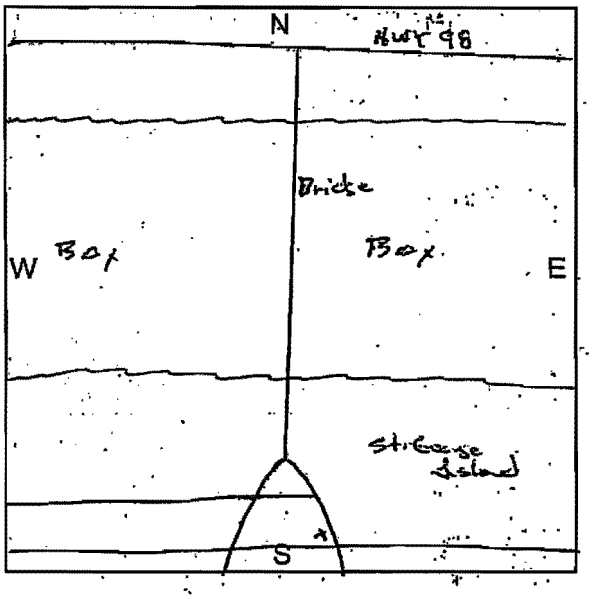
32. Screened Length: _____

33. Screened Intervals: _____

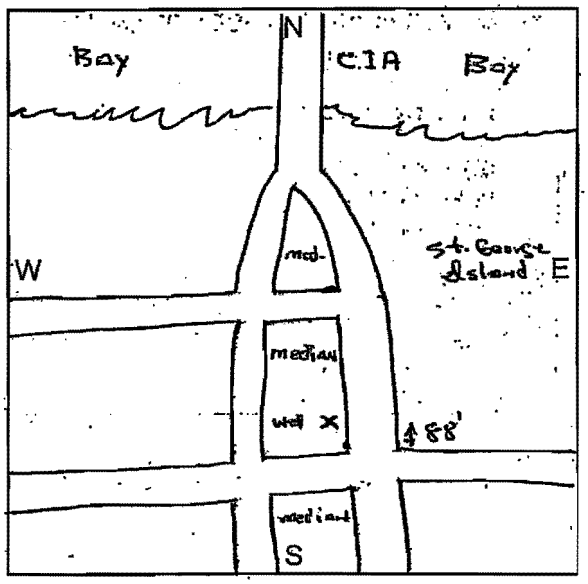
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1

39. Contractor Name ?

40. License Number _____

41. Casing Specifications: Standard ✓ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition ok

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain ?

47. REMARKS/NOTES

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

20

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0230
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Apalachicola State Bank
12. **Mailing Address:** _____
City: St. George Island
State: Fl Zip: _____
County: Frank Phone: _____

13. **WELL ADDRESS (Location):** _____
NW Corner of Franklin Blvd & West Pine Ave, St. George Island
City: _____
Zip: _____
County: Frank Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29°39'50.90"

GPS LONGITUDE: 84°51'50.88"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: JT ?
AU - Air Rotary; AB - Augered/Bored; BB - Bell Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: N/A
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: N/A
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: N/A
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼" 28. Well Depth: ?

29. Depth of Casing: ?

30. Source of Well Information: Site visit
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

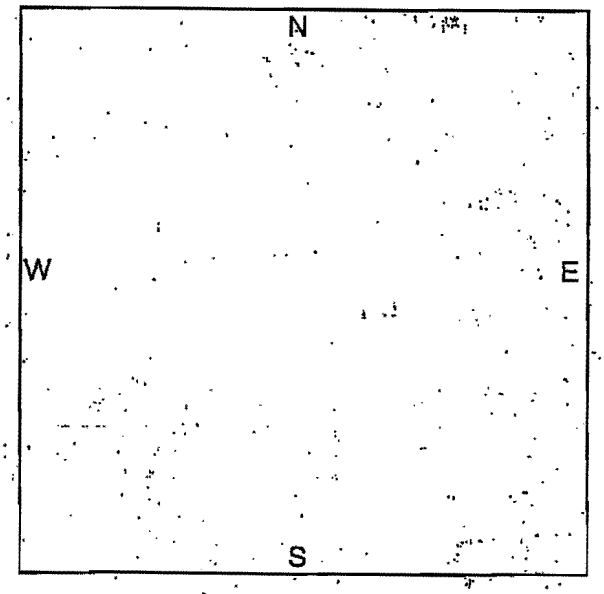
32. Screened Length: ?

33. Screened Intervals: ?

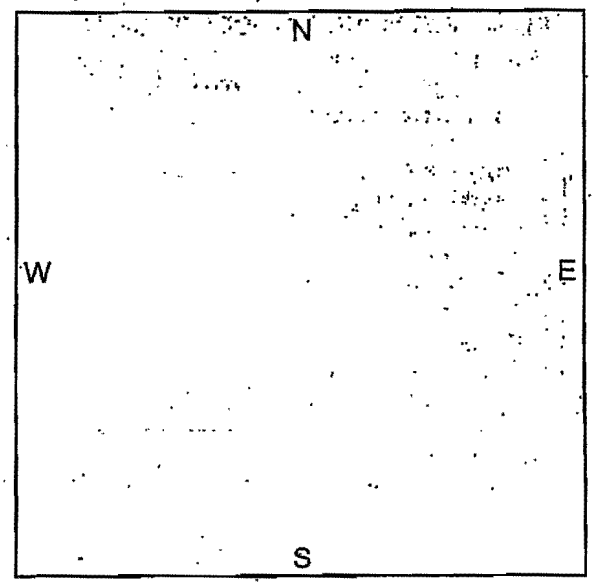
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

21

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

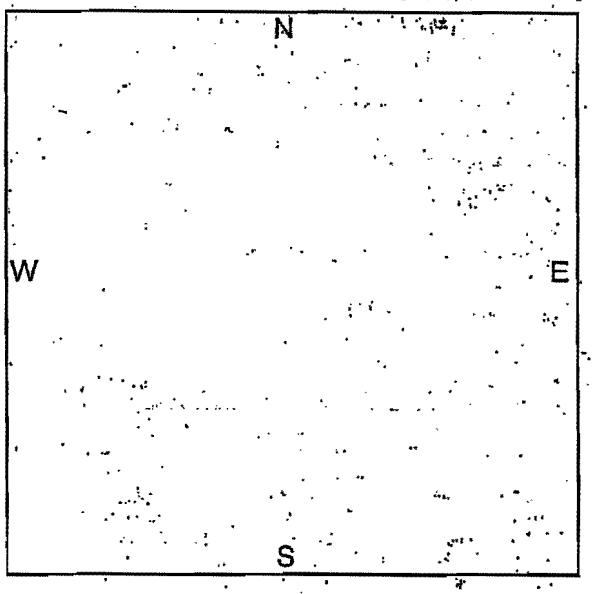
1. FLORIDA UNIQUE I.D. AAA-3670
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (If any):
9. SYSTEM NAME (If any):
10. Land Net ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T ___ (N or S) R ___ (E or W)
    Altitude ___ 7.5 Minute Quad ___
11. OWNER'S NAME:
12. Mailing Address:
    City:
    State: Zip:
    County: Phone:
13. WELL ADDRESS (Location): Pelican Bay
    309315 Cooke Rd
    City: St George Island
    Zip:
    County: Franklin Phone: ~~850/927-5416~~
14. SCHEDULE FILLED OUT BY:
    NAME: J. Brown
    AGENCY: N.W.F.W.M.D
    DATE: 11-8-05 PHONE:
15. GPS INFORMATION PROVIDED BY:
    NAME:
    AGENCY:
    DATE: PHONE:
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29392l.45
    GPS LONGITUDE: 8453 16.26

WELL INFORMATION
(Information in this column should be filled out if possible)

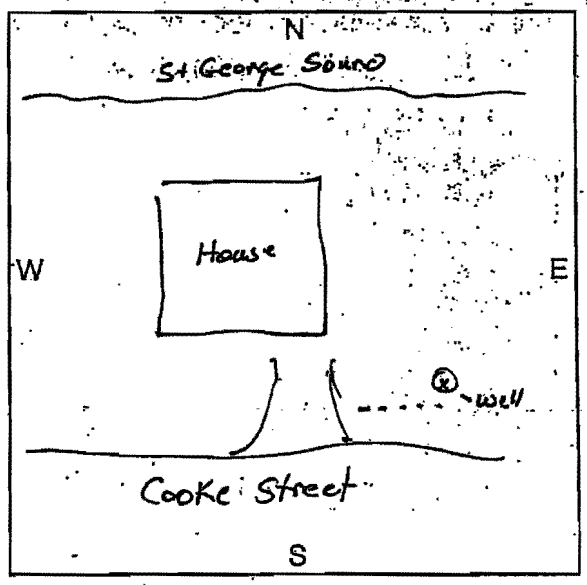
16. Method of Construction: ___
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: U
    A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: WA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ___ 22. Pump Intake Depth: ___
23. Normal Yield: ___
24. Method of Measurement: ___
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: ___
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: ___
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1¼ 28. Well Depth: ___
29. Depth of Casing: ___
30. Source of Well Information: ___
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: ___
33. Screened Intervals: ___
34. Finish: ___
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard _____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3670

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

22

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3671
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
309 Marks Rd
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: N.W.F.W.M.D
DATE: 11-8-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 25.96

GPS LONGITUDE: 84 53 04.39

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

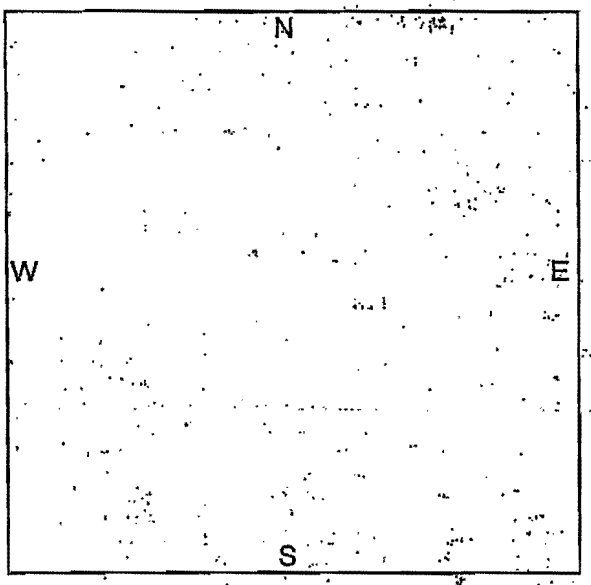
32. Screened Length: _____

33. Screened Intervals: _____

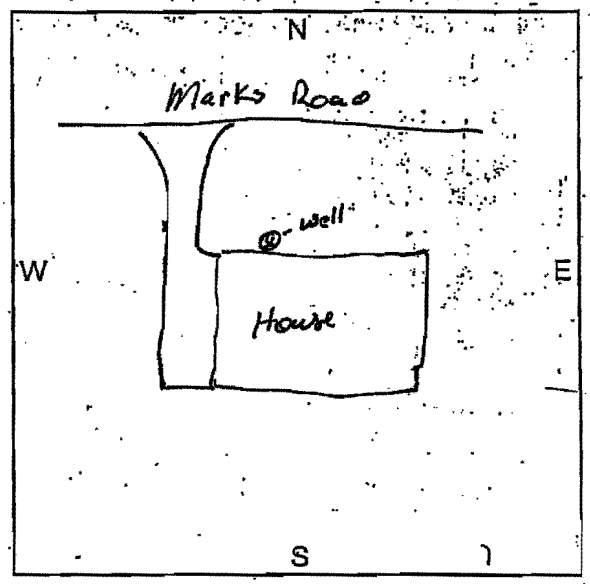
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3671

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

23

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
800 Akel
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 11-8-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293929.56

GPS LONGITUDE: 845258.26

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

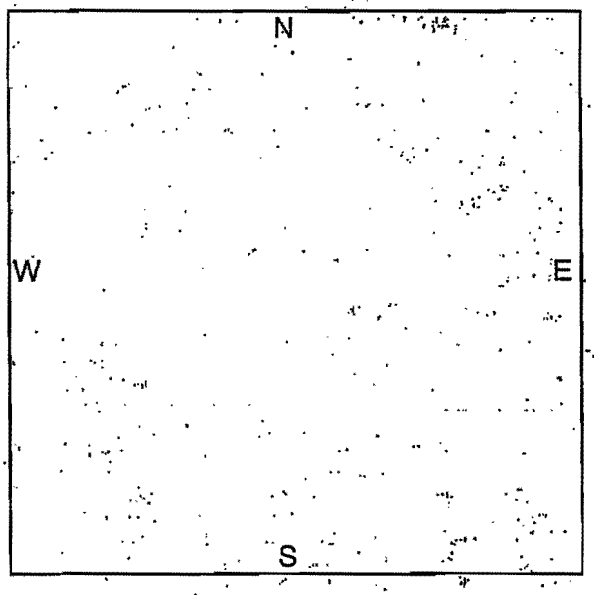
32. Screened Length: _____

33. Screened Intervals: _____

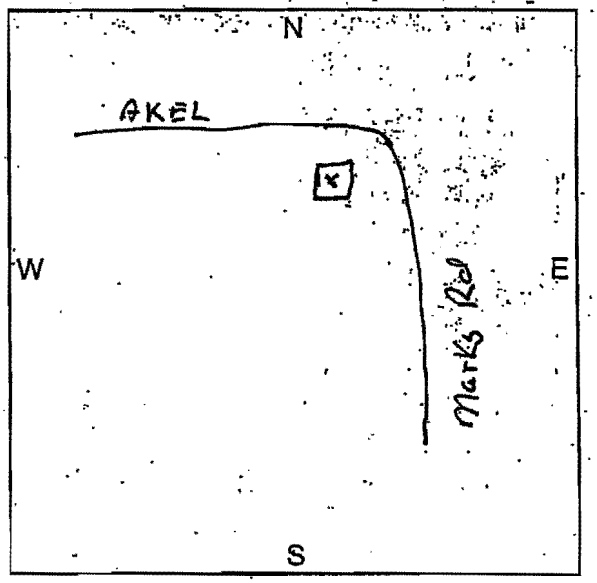
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3669

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

24

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA3663
2. NWFWMD, CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
700 Randolf
City: St George Island
State: _____ Zip: _____
County: Franklin Phone: _____

13. WELL ADDRESS (Location): _____
700 Randolf
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 11-8-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 36.57

GPS LONGITUDE: 84 52 46.89

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

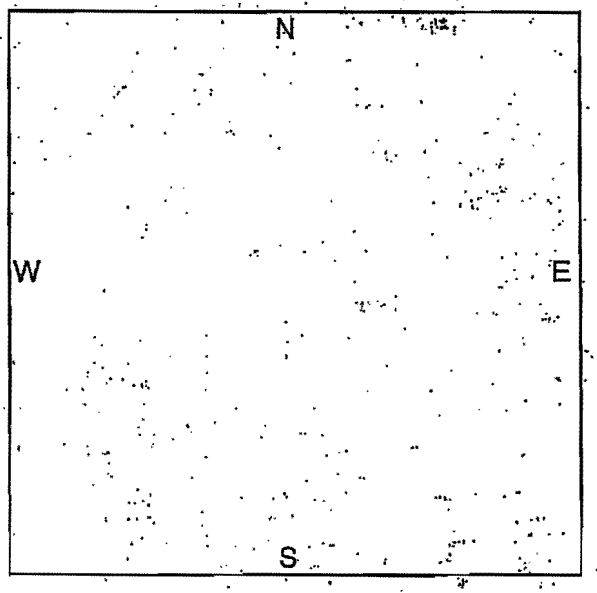
32. Screened Length: _____

33. Screened Intervals: _____

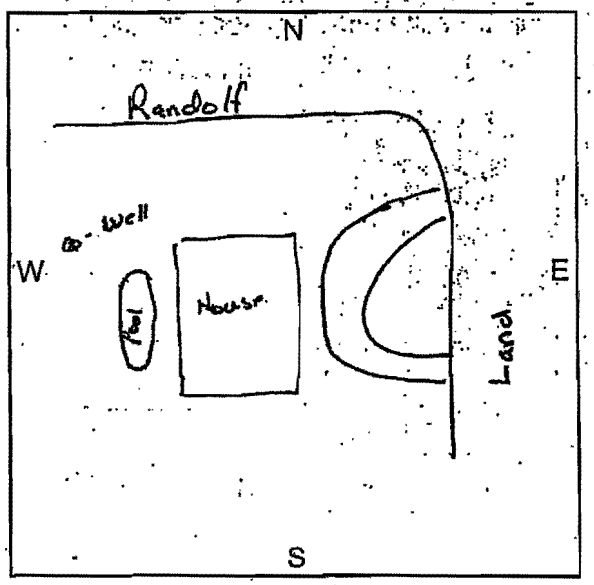
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3668

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

25

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAA3666
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** ____ (N or S) **R** ____ (E or W)

Altitude ____ 7.5 Minute Quad ____

11. **OWNER'S NAME:**
12. **Mailing Address:**

City:
State: Zip:
County: Phone:

13. **WELL ADDRESS (Location):**
315 Howell Street
City: St George Island
Zip:
County: Franklin Phone:

14. **SCHEDULE FILLED OUT BY:**
NAME: T Brown
AGENCY: NWFWMD
DATE: 11-8-05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293940.86

GPS LONGITUDE: 845235.20

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction:
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: U
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water:
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth:

23. Normal Yield:

24. Method of Measurement:
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point/Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth:

29. Depth of Casing:

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

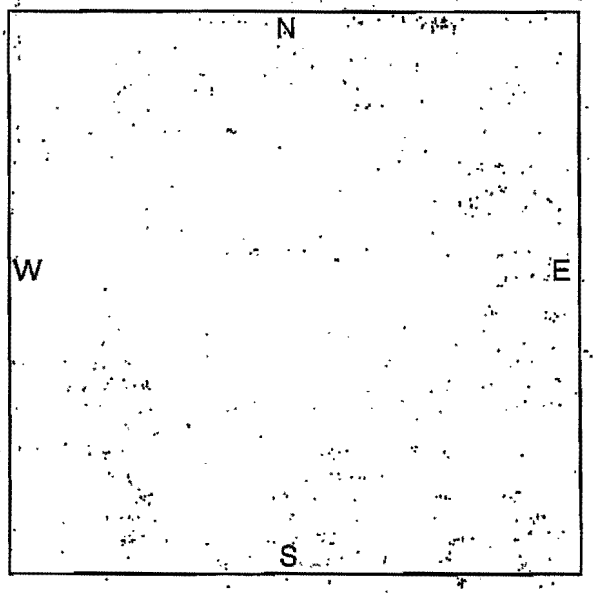
32. Screened Length:

33. Screened Intervals:

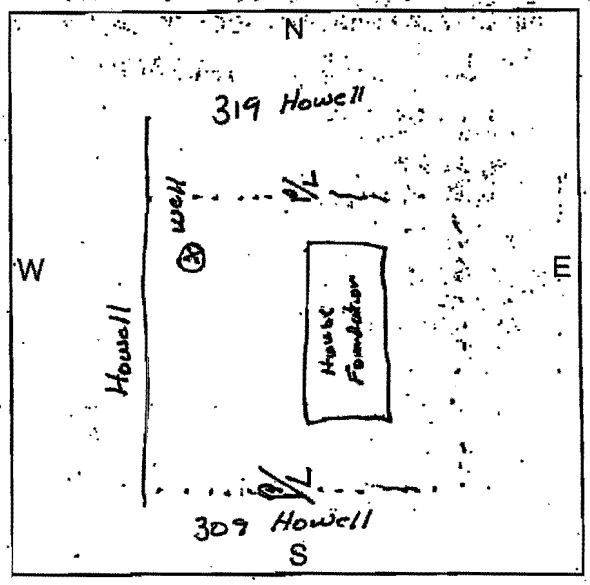
34. Finish:
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAA3666

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

26

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAA3667
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:**
12. **Mailing Address:**

City:
State: Zip:
County: Phone:

13. **WELL ADDRESS (Location):** 572 Bayshore
City: St George Island
Zip:
County: Franklin Phone:

14. **SCHEDULE FILLED OUT BY:**
NAME: T Brown
AGENCY: NWFWMD
DATE: 11-8-05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293936.73

GPS LONGITUDE: 845233.14

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction:
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: W ?
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield:

24. Method of Measurement:
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth:

29. Depth of Casing: ____

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

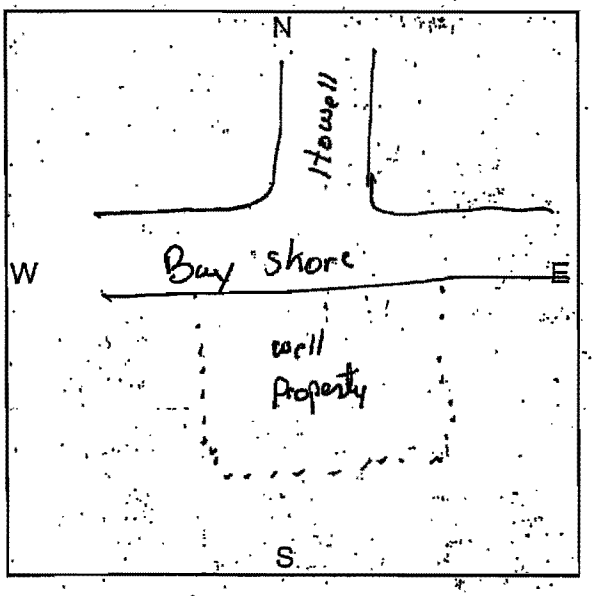
32. Screened Length:

33. Screened Intervals:

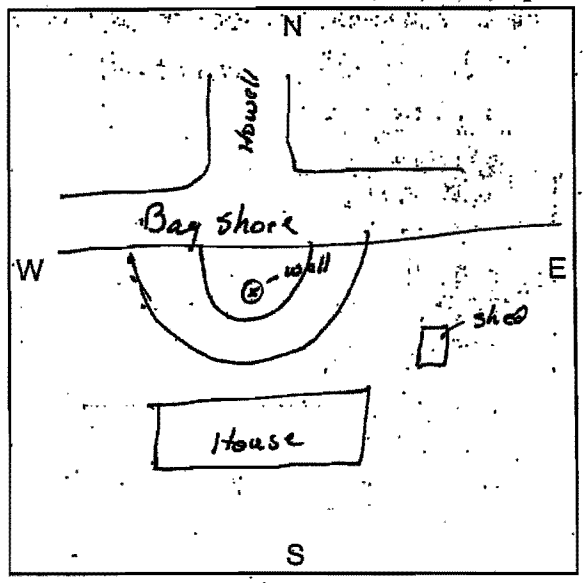
34. Finish:
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3667

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

27

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAA 3665
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T ___ (N or S) R ___ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
NE Corner of Wing + Bayshore
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: J Brown
AGENCY: NWFWMD
DATE: 11-8-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: W6584 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 41.46
GPS LONGITUDE: 84 52 25.99

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: U
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

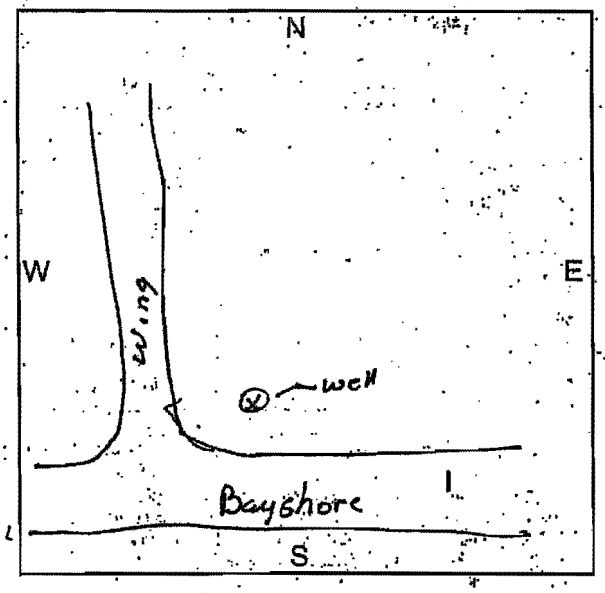
32. Screened Length: _____

33. Screened Intervals: _____

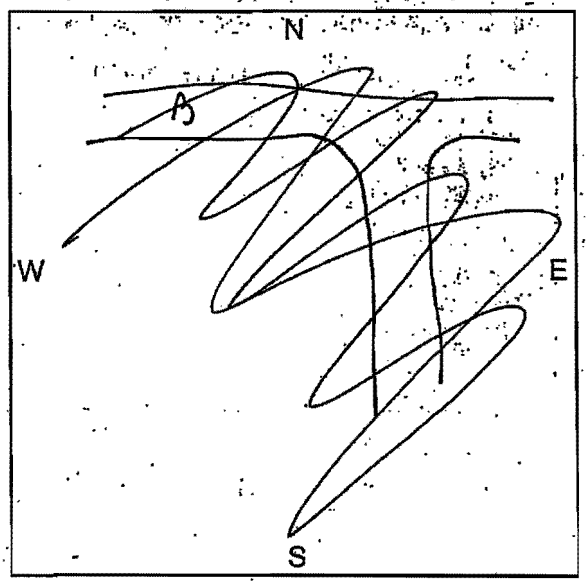
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

No cap on well. Well is abandoned well
Per Section 40A-3

FLORIDA
UNIQUE WELL ID
AAA3665

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

28

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0925
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 352 PATTON ST.

City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 46.59

GPS LONGITUDE: 84 52 44.89

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

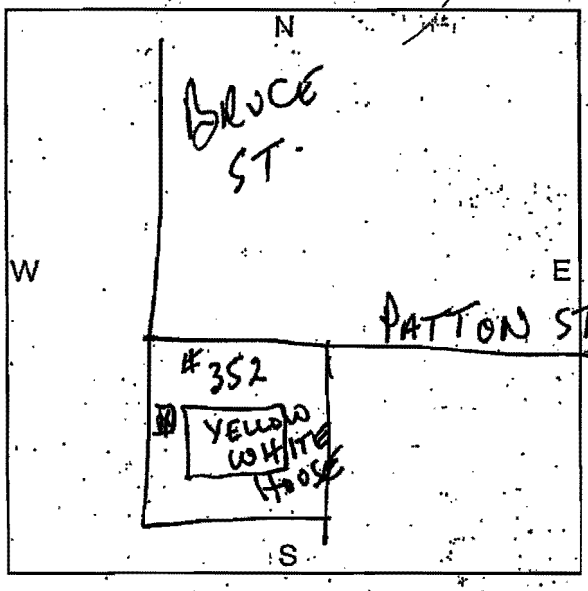
32. Screened Length: _____

33. Screened Intervals: _____

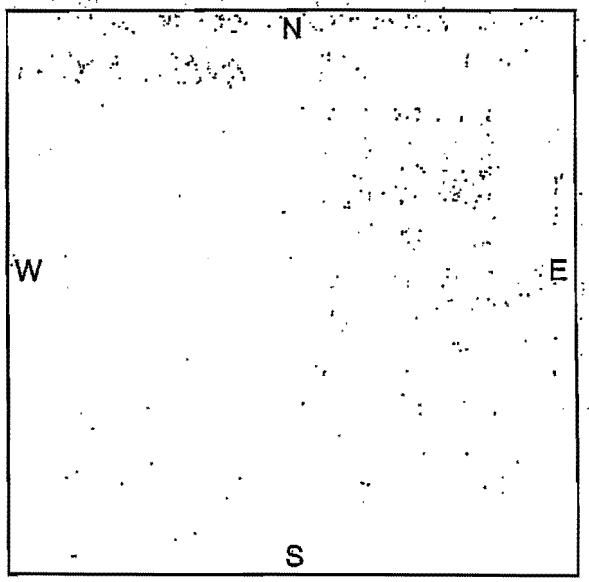
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0925

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

29

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0923
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
339 LAND ST.
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 11/8/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 11/8/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 41.06

GPS LONGITUDE: 84 52 47.52

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

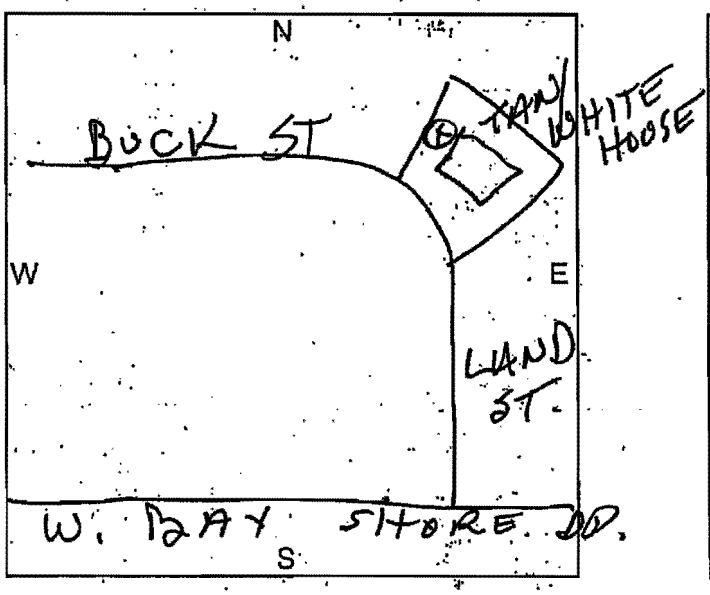
32. Screened Length: _____

33. Screened Intervals: _____

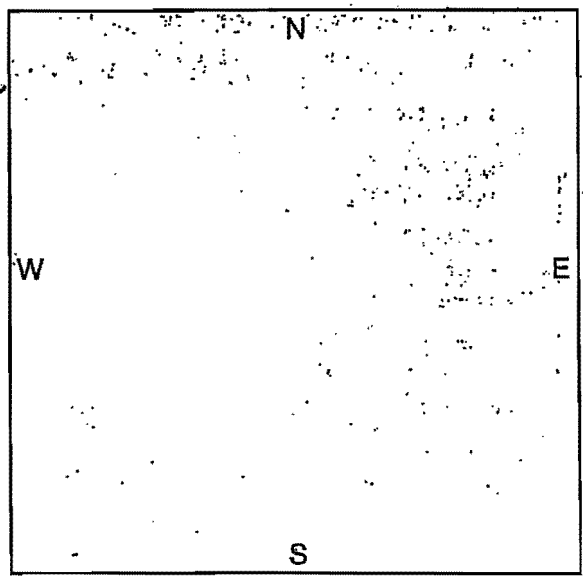
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0923

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

30

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0924
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS (Location):** _____
    705 BOCA ST.
    City: _____
    Zip: _____
    County: _____ Phone: _____

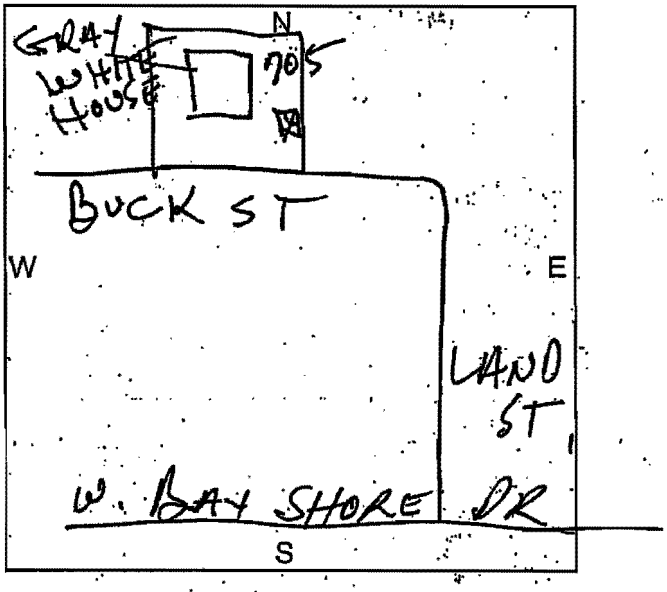
14. **SCHEDULE FILLED OUT BY:**
    NAME: _____
    AGENCY: _____
    DATE: 11/8/05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 11/8/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 39 40.52
    GPS LONGITUDE: 84 52 51.25

WELL INFORMATION
(Information in this column should be filled out if possible)

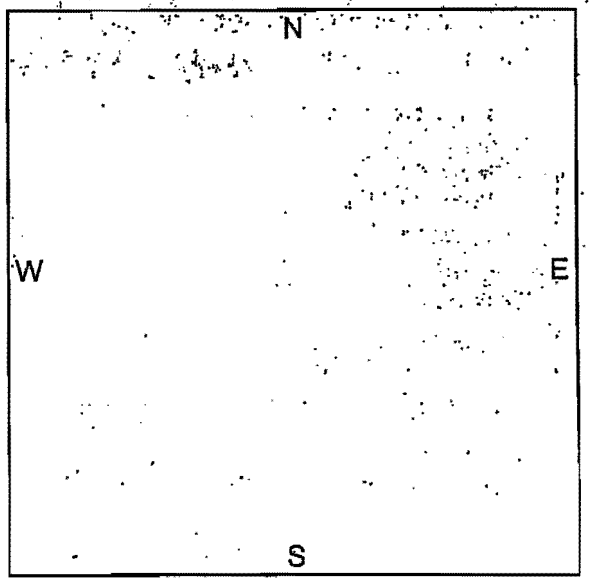
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½ 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0924

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

31

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0922
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
308 GIBSON ST
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: [signature]
AGENCY: _____
DATE: 11/8/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: [signature]
AGENCY: _____
DATE: 11/8/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 31.18
GPS LONGITUDE: 84 52 52.72

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 3 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: GS.
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

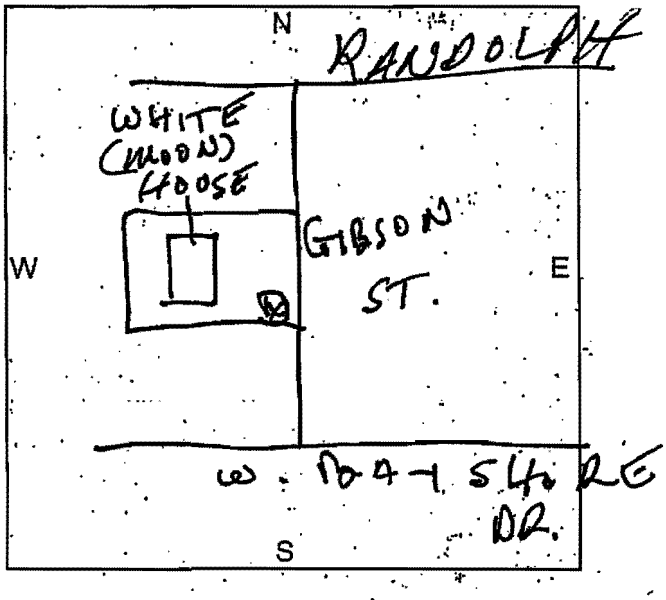
32. Screened Length: _____

33. Screened Intervals: _____

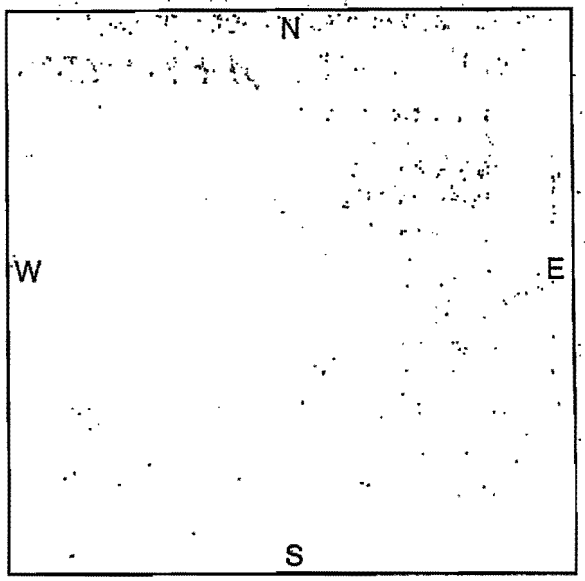
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
ENCLOSED FIBERGLASS PUMP ENCLOSURE NO ENTRY TO PUMP

FLORIDA
UNIQUE WELL ID
AAK0922

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

32.

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0921
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 304 GIBSON ST.

City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 30.62

GPS LONGITUDE: 84 52 53.52

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bell Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

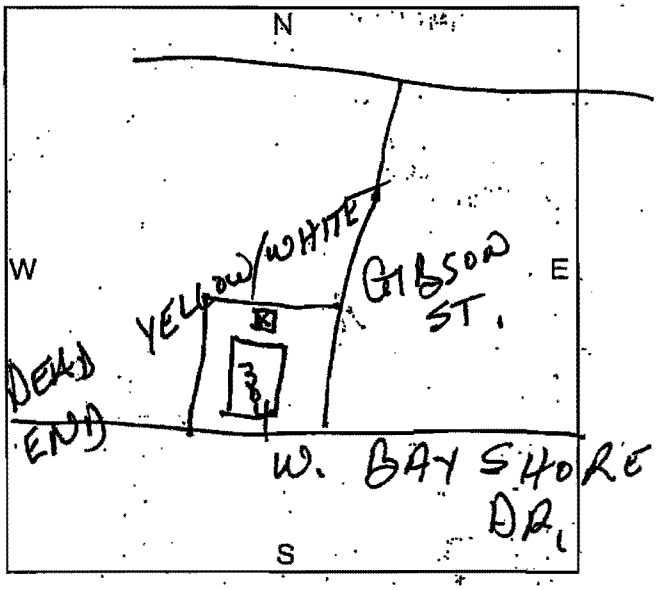
32. Screened Length: _____

33. Screened Intervals: _____

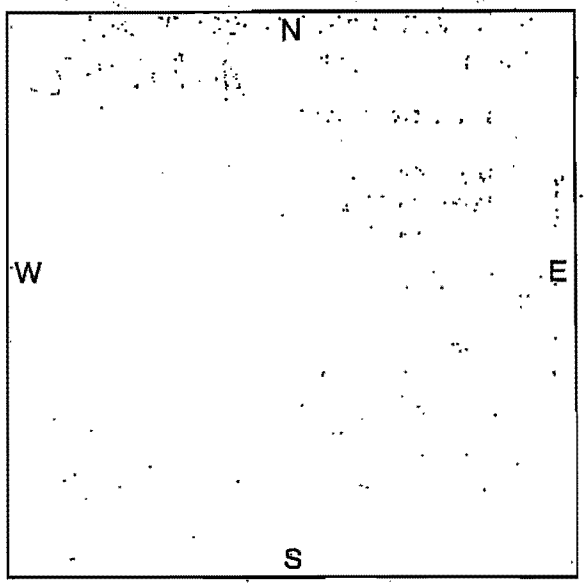
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
PUMP BROKEN OFF WELL ABOVE CHECK VALVE.

FLORIDA
UNIQUE WELL ID
AAK0921

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

32

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. HAK 0920
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 304 MARKS ST
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 24.47

GPS LONGITUDE: 84 53 06.18

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

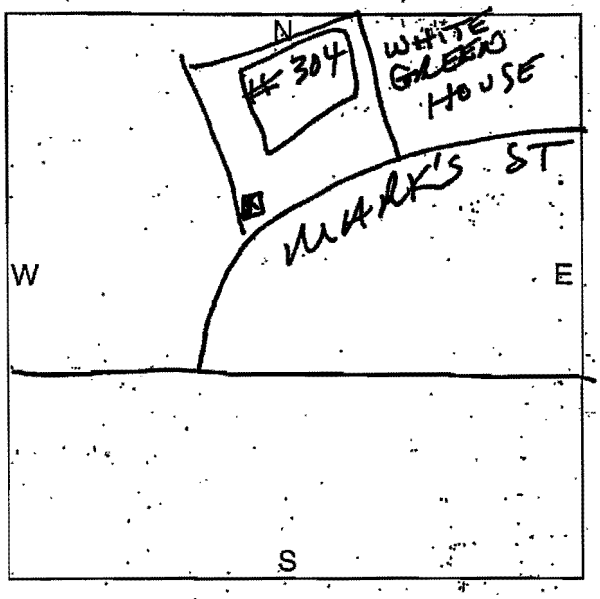
32. Screened Length: _____

33. Screened Intervals: _____

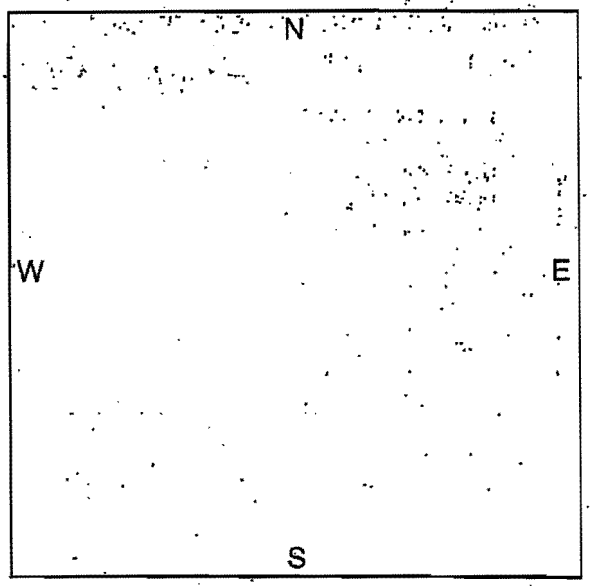
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
WELL INSIDE OF PUMP HOUSE IN S.E. CORNER OF FRONT YARD

FLORIDA
UNIQUE WELL ID
AAK0920

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

34

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

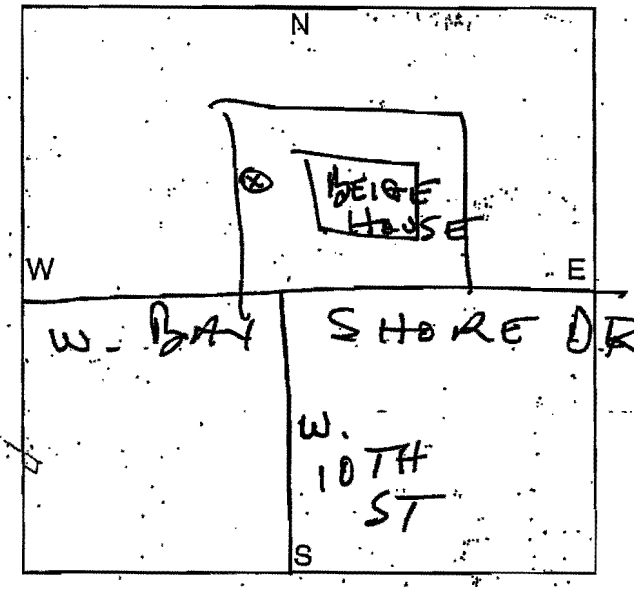
1. FLORIDA UNIQUE I.D. AAK0917
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** 989 W. BAY SHORE DR.
    City: _____
    Zip: _____
    County: _____ **Phone:** _____
14. **SCHEDULE FILLED OUT BY:**
    NAME: [signature]
    AGENCY: _____
    DATE: 11/8/05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: [signature]
    AGENCY: _____
    DATE: 11/8/05 **PHONE:** _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 39 16.05
    GPS LONGITUDE: 84 53 21.88

WELL INFORMATION
(Information in this column should be filled out if possible)

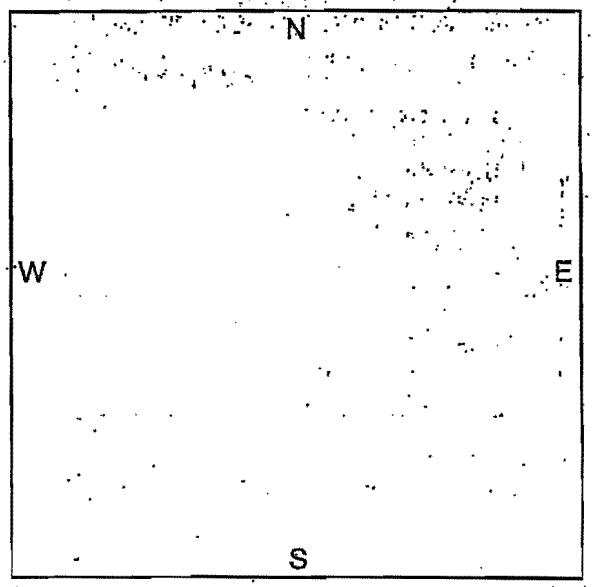
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: N
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
NO PUMP ON WELL CAPPED

FLORIDA
UNIQUE WELL ID
AAK0917

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0918
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 989 W. BAY SHORE DR
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 16.00

GPS LONGITUDE: 84 53 21.81

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

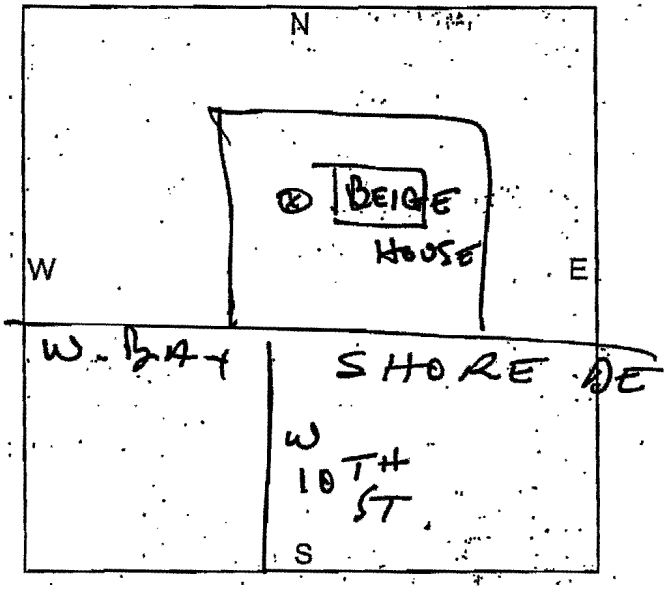
32. Screened Length: _____

33. Screened Intervals: _____

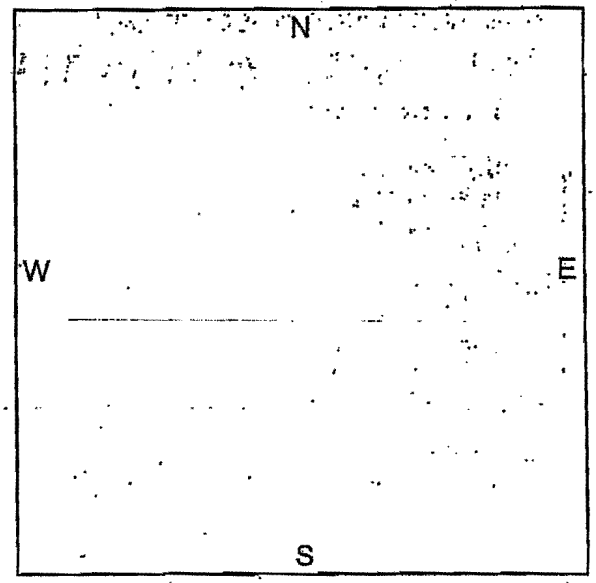
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
NO PUMP ON WELL CAPPED

FLORIDA
UNIQUE WELL ID
AAK0918

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0919
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 989 W. Bay Shore Dr
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: [illegible]
AGENCY: _____
DATE: 11/8/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 15.66
GPS LONGITUDE: 84 53 20.75

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

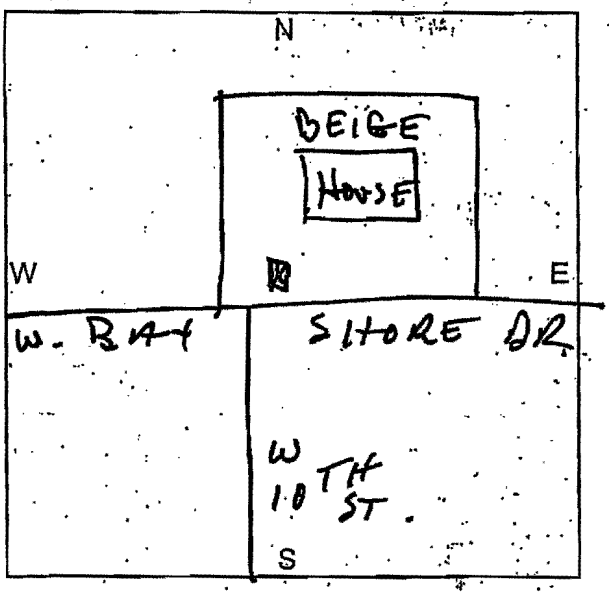
32. Screened Length: _____

33. Screened Intervals: _____

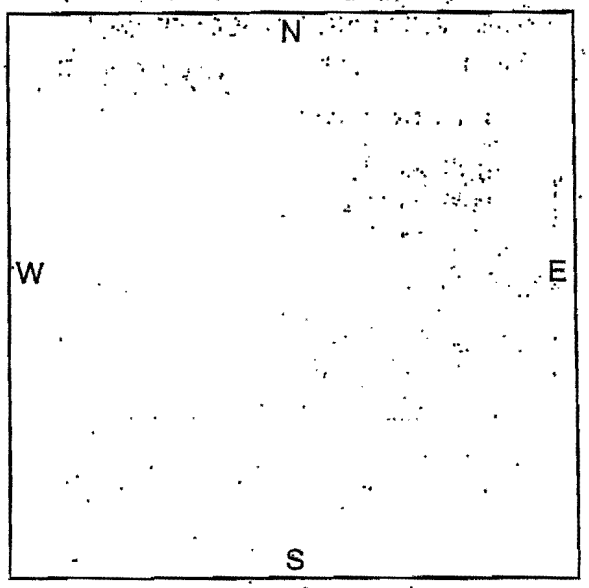
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0919

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

35

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.:** AAA 3680
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** ____ (N or S) **R** ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
1116 West Pine
City: St George Island
Zip: _____
County: Franklin **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-27-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ **PHONE:** _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 03.86

GPS LONGITUDE: 84 53 32.63

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

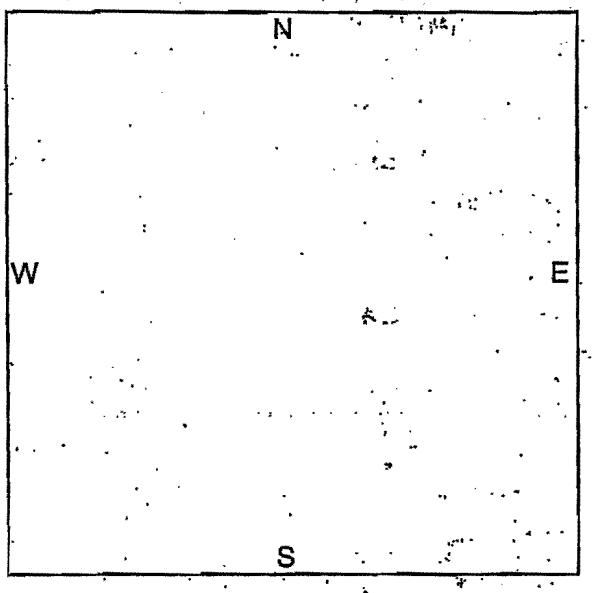
32. Screened Length: _____

33. Screened Intervals: _____

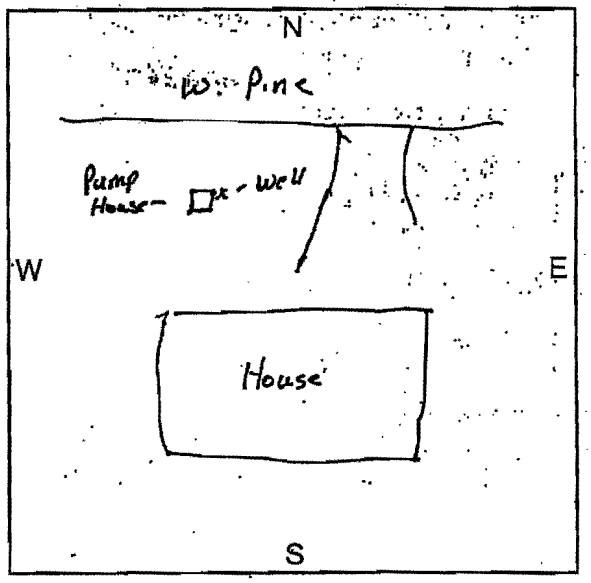
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3680

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

36

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAA 3682
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (If any):
9. SYSTEM NAME (If any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

    Altitude ____ 7.5 Minute Quad ____

11. **OWNER'S NAME:**
12. **Mailing Address:**

    City:
    State: Zip:
    County: Phone:

13. **WELL ADDRESS (Location):** "Brief Recess" West Gulf Beach
    City: St. George Island
    Zip:
    County: Franklin Phone:

SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NW FW MD
DATE: 10-27-05 PHONE:

GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 38 58.07

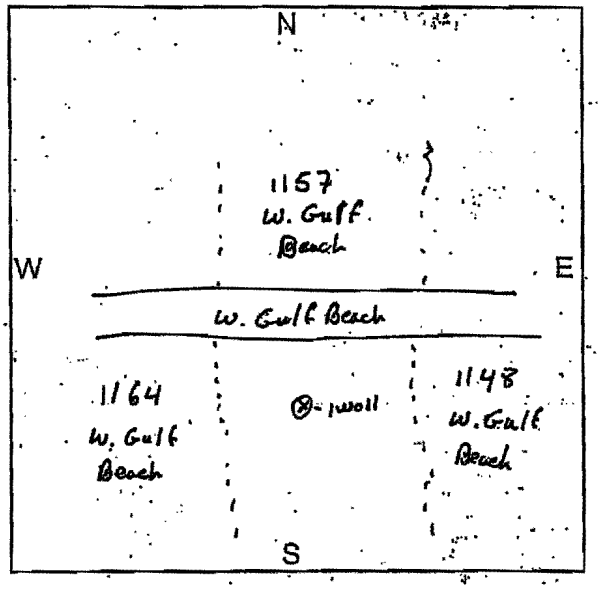
GPS LONGITUDE: 84 53 34.90

WELL INFORMATION
(Information in this column should be filled out if possible)

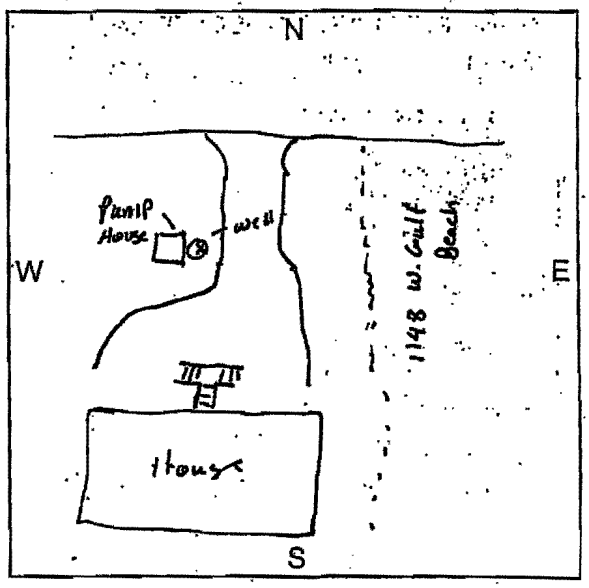
16. Method of Construction:
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water:
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth:
23. Normal Yield:
24. Method of Measurement:
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels:
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement:
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1¼ 28. Well Depth:
29. Depth of Casing:
30. Source of Well Information:
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length:
33. Screened Intervals:
34. Finish:
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAA3682

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

37

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3681
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
1180 W. Gulf Beach
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-27-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293856.51

GPS LONGITUDE: 845337.83

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

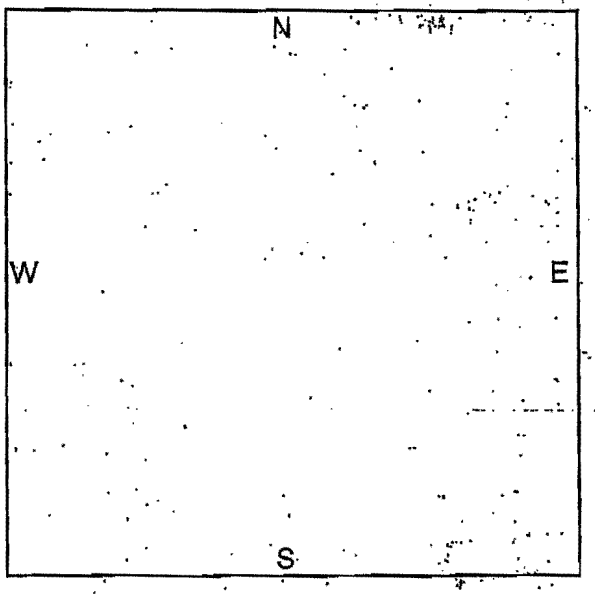
32. Screened Length: _____

33. Screened Intervals: _____

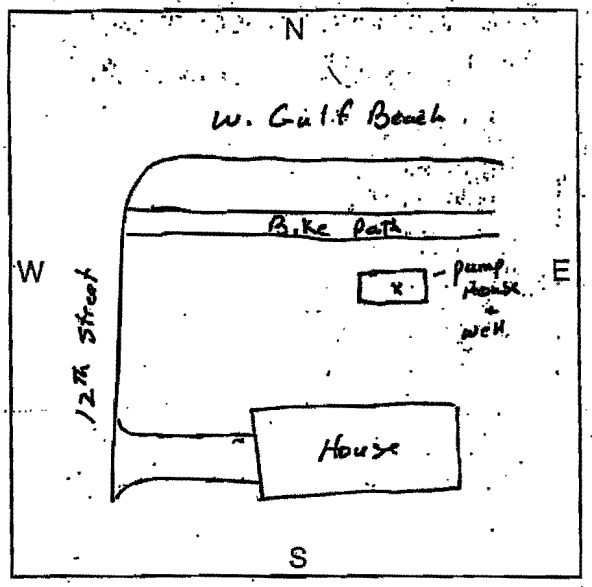
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAA3681

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

38

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAA3679
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:**
12. **Mailing Address:**

c/o

City:
State: Zip:
County: Phone:

13. **WELL ADDRESS (Location):**

W. Pine

City: St George Island
Zip:
County: Franklin Phone:

SCHEDULE FILLED OUT BY:

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Brown
AGENCY: NW FWMD
DATE: 10.27.05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293909.46

GPS LONGITUDE: 845324.05

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 ¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

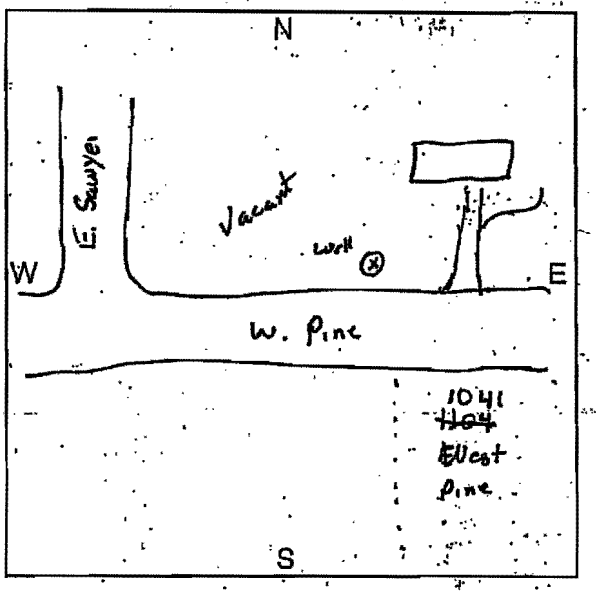
32. Screened Length: _____

33. Screened Intervals: _____

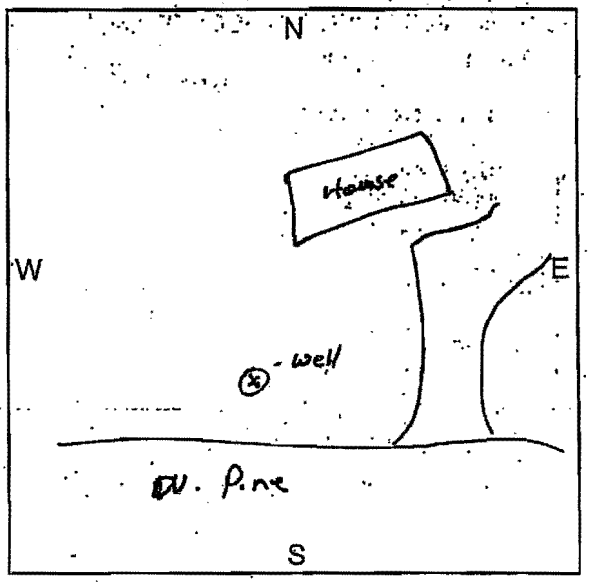
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAA3679

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

39

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3678
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Herndons
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): 968 W. Pine
    City: St George Island
    Zip: _____
    County: Franklin Phone: _____

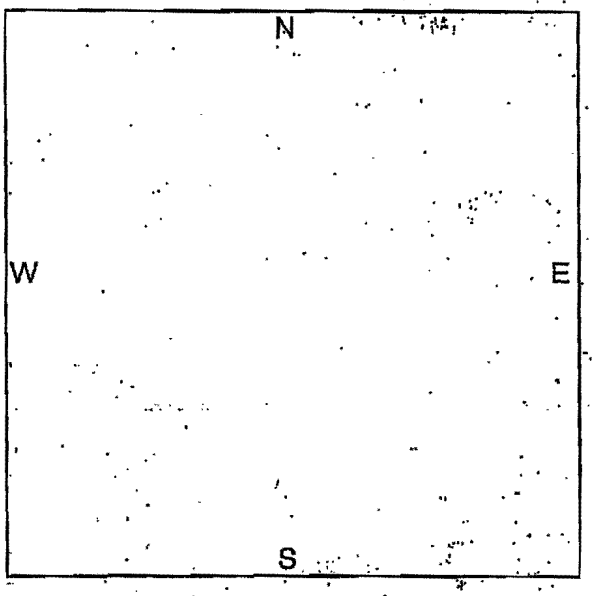
14. SCHEDULE FILLED OUT BY:
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-27-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 293915.16
    GPS LONGITUDE: 845314.51

WELL INFORMATION
(Information in this column should be filled out if possible)

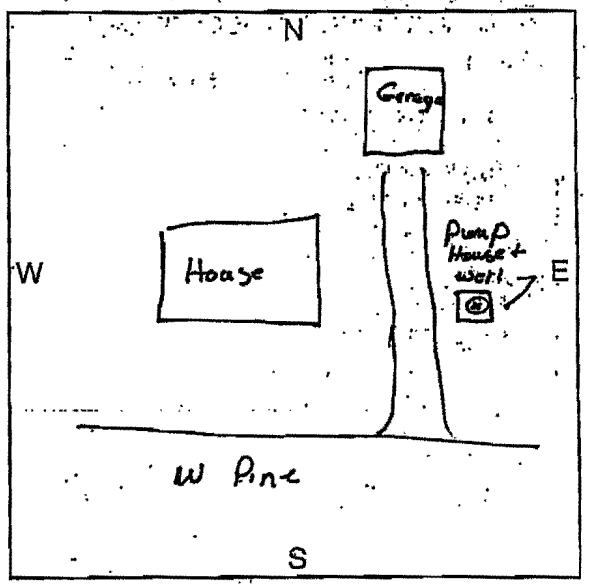
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1¼ 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAA3678

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

40

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA3677
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
825 W Pine
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brow
AGENCY: NWFWMD
DATE: 10-27-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293922.98 98

GPS LONGITUDE: 84 52 58.07

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 3/4 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

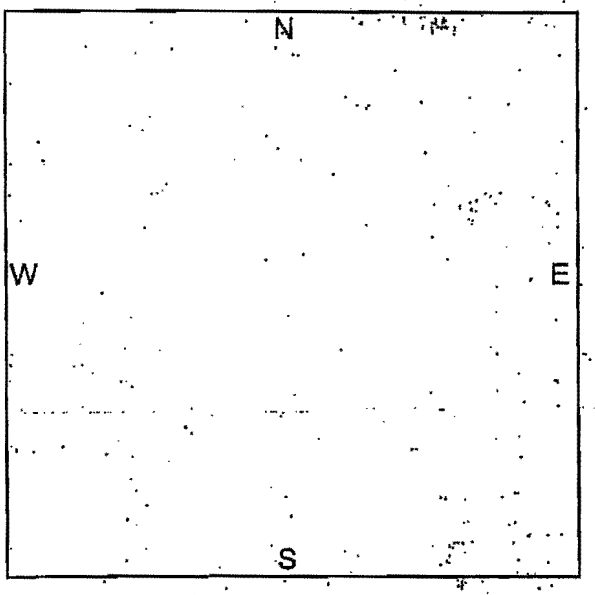
32. Screened Length: _____

33. Screened Intervals: _____

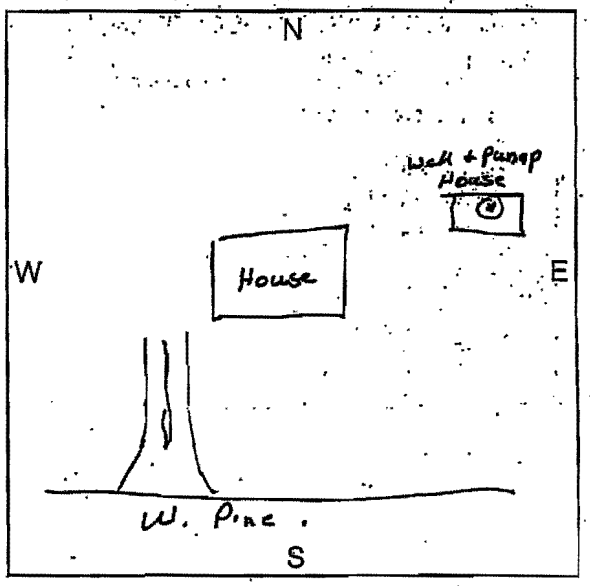
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3677

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

41

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA3675
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
525 W Pine
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293936.79

GPS LONGITUDE: 845225.42

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

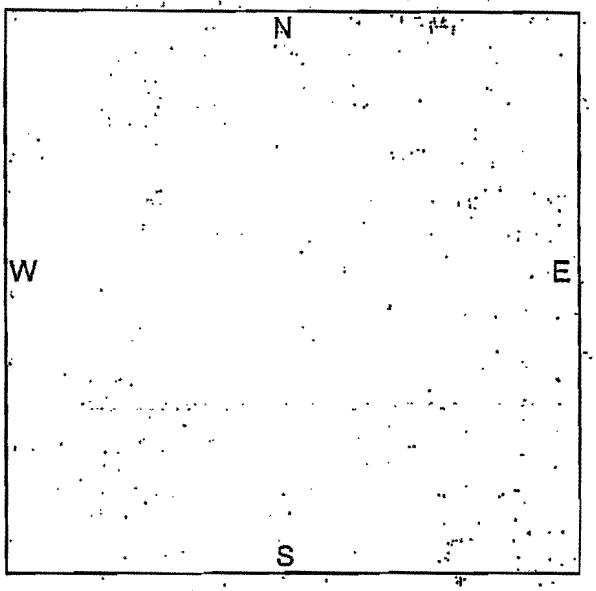
32. Screened Length: _____

33. Screened Intervals: _____

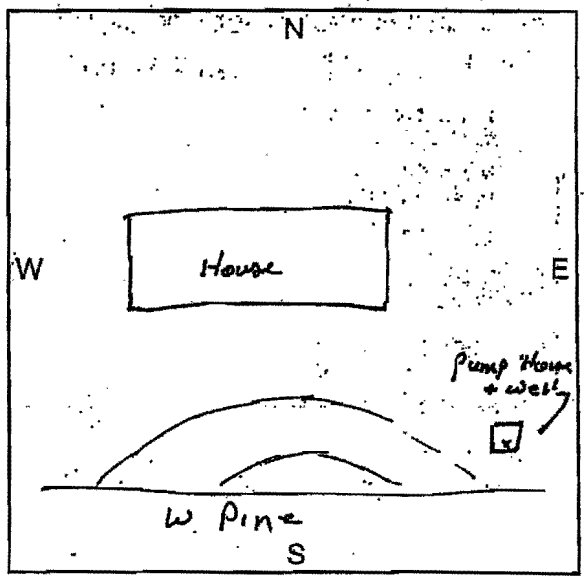
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3675

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

42

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3673
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (If any):
9. SYSTEM NAME (If any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:**
12. **Mailing Address:**

City:
State: **Zip:**
County: **Phone:**

13. **WELL ADDRESS (Location):**
516 W Pine Bayshore
City: St George Island
Zip:
County: Franklin **Phone:**

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-27-05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 39.77

GPS LONGITUDE: 84 52 26.68

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: Dm
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

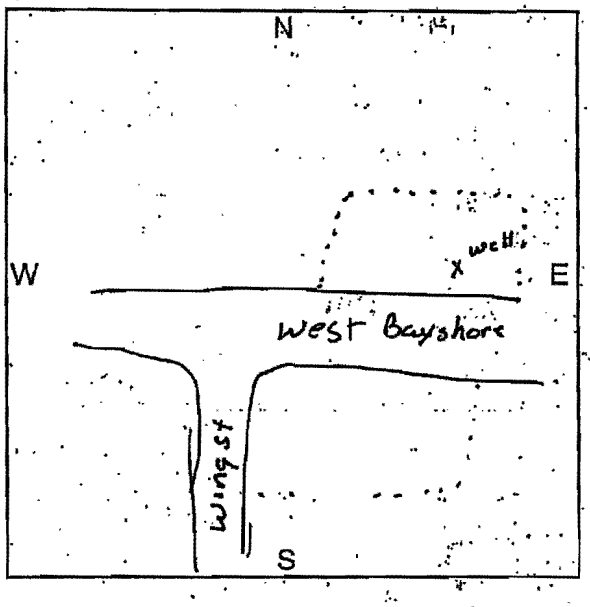
32. Screened Length: _____

33. Screened Intervals: _____

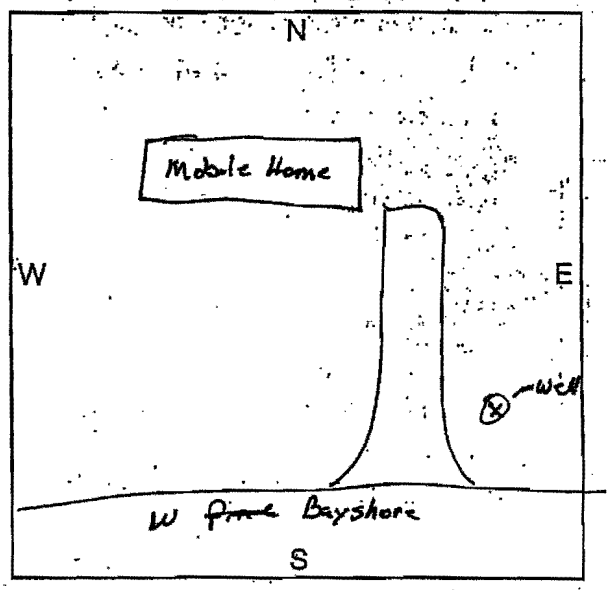
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3673

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

43

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA3674
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
W. Pine (Bay Shore) Street
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NW FWMD
DATE: 10-27-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293943.77

GPS LONGITUDE: 84 52 17.05

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: U
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

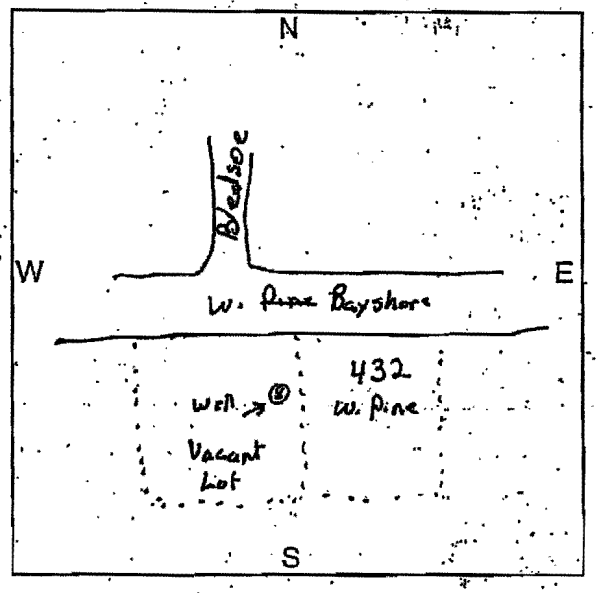
32. Screened Length: _____

33. Screened Intervals: _____

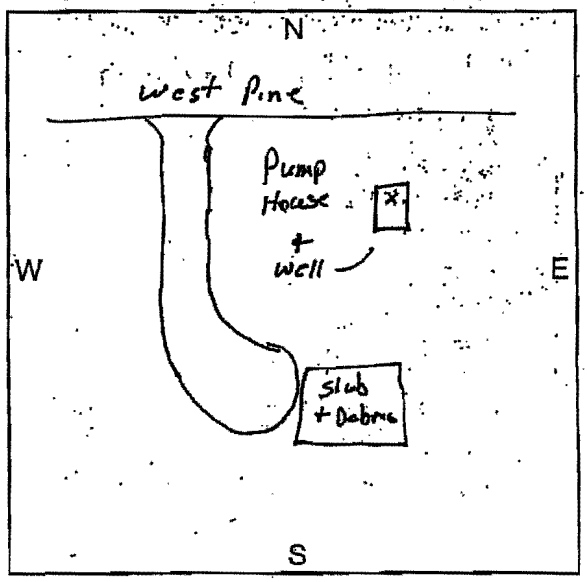
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Tag on well house. Adjacent lot - West of 432 W. Pine

FLORIDA
UNIQUE WELL ID
AAA3674

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

44

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAA 3672
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Mike Moberely
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
300 Wing Street
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10.22.05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293941.03

GPS LONGITUDE: 845226.16

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

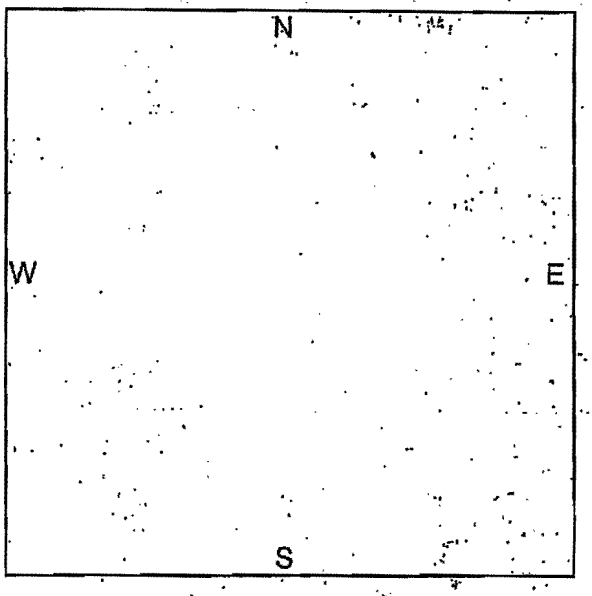
32. Screened Length: _____

33. Screened Intervals: _____

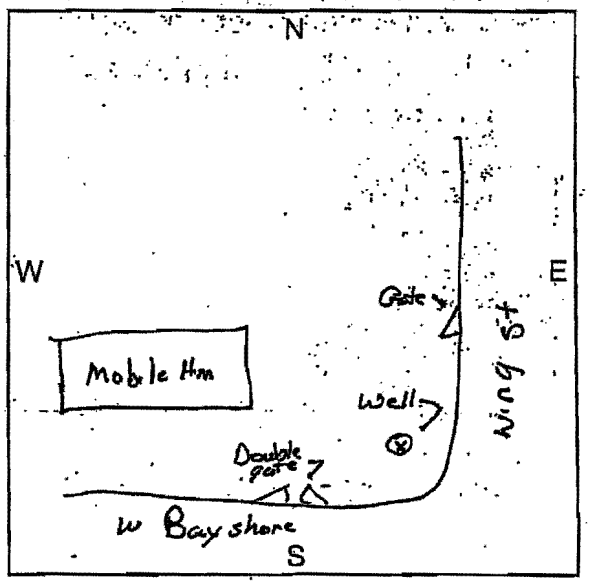
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

_____

_____

_____

_____

FLORIDA
UNIQUE WELL ID
AAA3672

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

45

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
617 W Pine
City: St George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brew
AGENCY: NWFWMD
DATE: 10-27-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293931.48

GPS LONGITUDE: 845237.13

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bell Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: C
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

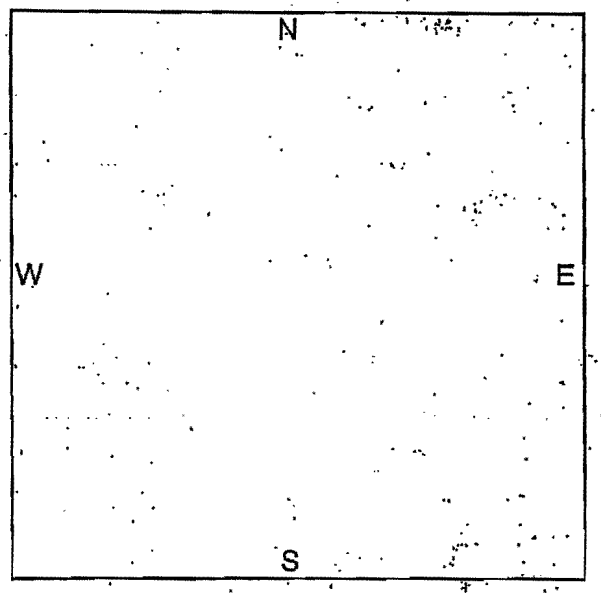
32. Screened Length: _____

33. Screened Intervals: _____

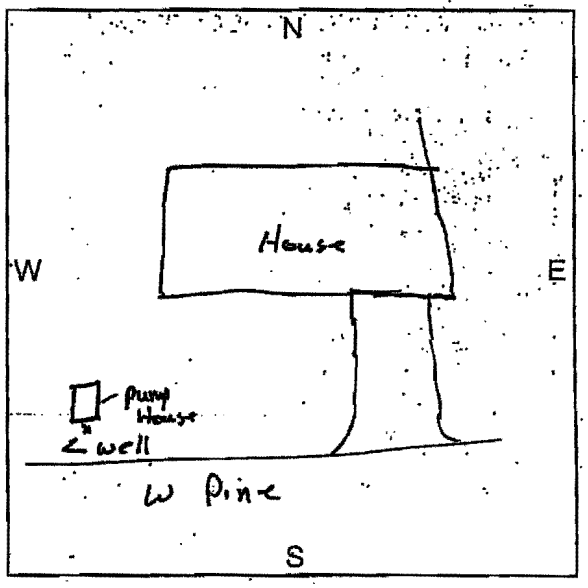
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3676

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

46

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0915
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: 404 McCloud
City: St George Island
State: _____ Zip: _____
County: Franklin Phone: _____
13. WELL ADDRESS (Location): 404 Mc cloud
City: St George Island
Zip: _____
County: Franklin Phone: _____

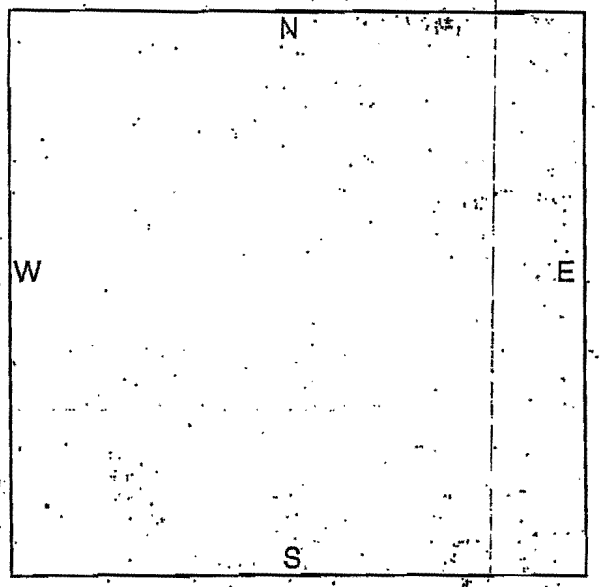
14. SCHEDULE FILLED OUT BY:
NAME: W.T. Brown
AGENCY: NWFWMD
DATE: 10-27-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____
DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 39 47.98
GPS LONGITUDE: 84 52 19 69

WELL INFORMATION
(Information in this column should be filled out if possible)

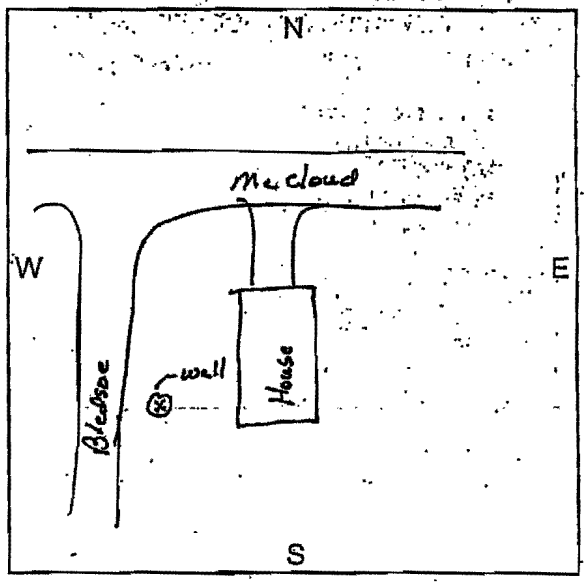
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
well has no pump; equipped w/ check valve

FLORIDA
UNIQUE WELL ID
AAK0915

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 47

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0914
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 507 W. SAWYER ST.

City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 10/27/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/27/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 12.37

GPS LONGITUDE: 84 53 45.16

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
(P) PVC; S - Steel; C - Concrete; B - Brick; Z - Other

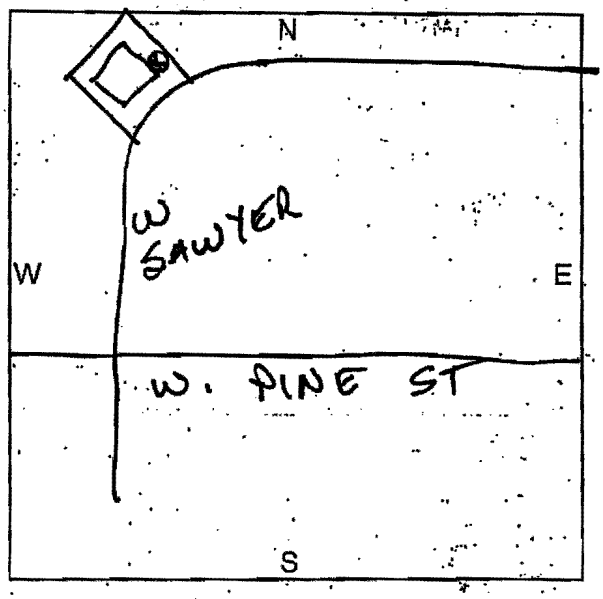
32. Screened Length: _____

33. Screened Intervals: _____

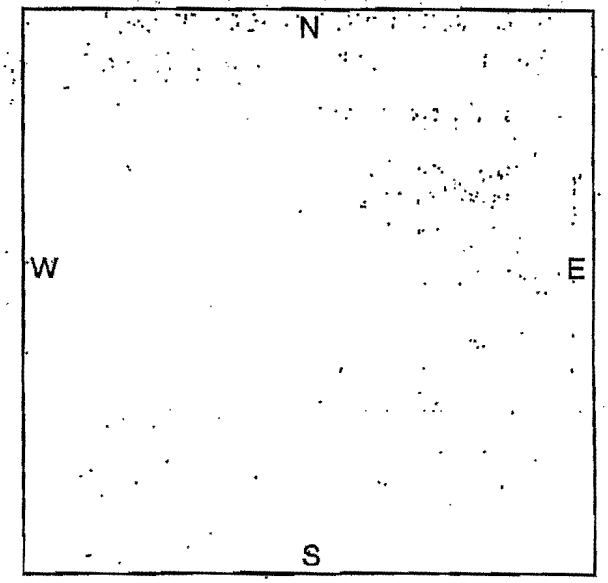
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0914

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

48

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0913
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
1000 W. GORRIE DR
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 05.05

GPS LONGITUDE: 84 53 14.40

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary AB - Augered/Bored BB - Ball Bucket
CO - Combination CT - Cable Tool DR - Driven DU - Dug
HR - Hydraulic Rotary JT - Jetted RR - Reverse Rotary OT - Other

17. Use of Site: W
A - Properly Abandoned C - Core D - Drainage
M - Monitor/Observation P - Oil/Gas R - Return
S - Standby T - Test U - Unused
W - Withdrawal X - Waste Disposal/Injection
Z - Destroyed O - Other

18. Use of Water: _____
AI - Agricultural Irrigation AQ - Aquaculture AR - Aquifer Recharge
AS - Aesthetic CO - Commercial DI - Diversion/Impoundment
DM - Domestic/Mult. Family DO - Domestic DW - Dewatering Wells
ES - Essential Service FP - Freeze Protection GI - Golf Course Irrigation
HR - Heat Pump Recharge HS - Heat Pump Supply IN - Industrial
LA - Landscape Irrigation LI - Livestock LP - Limited Use PS
MI - Mining MO - Monitor NA - Navigation
NI - Nursery Irrigation OO - Other Outside Use PF - Perishable Food
PP - Power Production PS - Public Supply RI - Recreation Irrigation
RW - Restoration Well SF - Soil Flooding SN - Sanitation
TE - Test WR - Water Based Recreation

19. Type of Lift: C
A - Air B - Bucket C - Centrifugal
J - Jetted P - Piston S - Submersible
T - Turbine N - No Pump Z - Other

20. Type of Power: E
D - Diesel E - Electric G - Gasoline
H - Hand Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer C - Current Meter E - Estimated M - Totaling Meter
O - Orifice R - Reported T - Trajectory V - Volumetric
Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated G - Pressure Gauge L - Geophysical Log R - Reported
S - Steel Tape A - Air Line T - Electric Tape Z - Other

27. Diameter: 4 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC S - Steel C - Concrete
B - Brick Z - Other

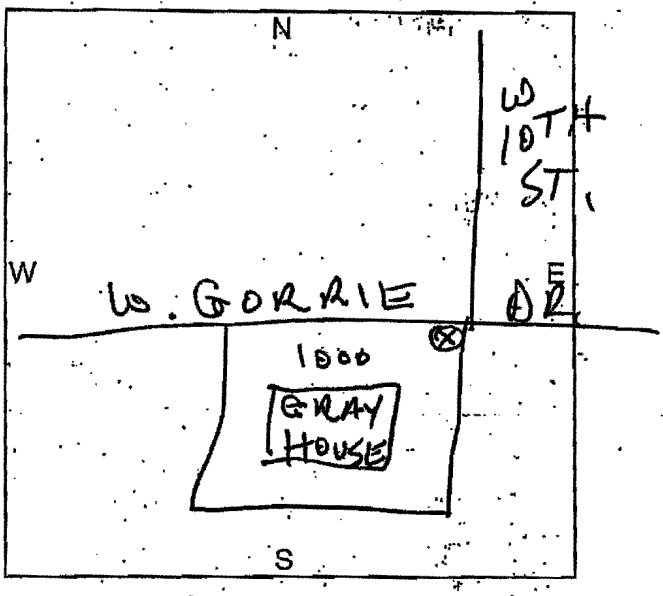
32. Screened Length: _____

33. Screened Intervals: _____

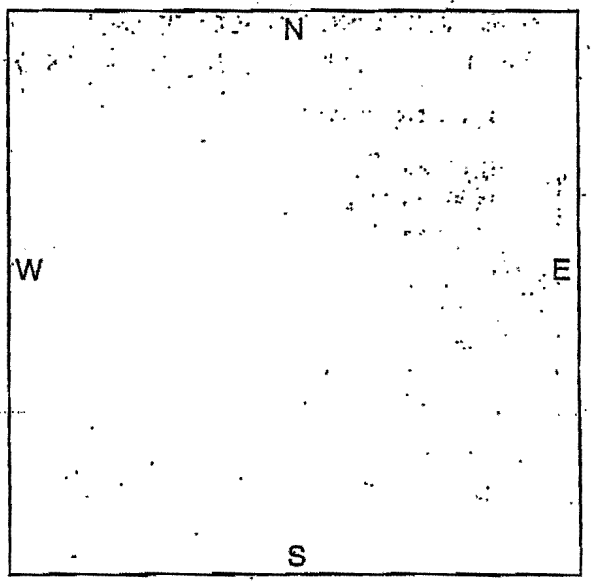
34. Finish: _____
S - Screen O - Open End X - Open Hole Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0913

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

49

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0917
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
849 W. GORRIE DR
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: [illegible]
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: [illegible]
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 14.10

GPS LONGITUDE: 84 52 58.09

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: ?
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ? 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 4/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

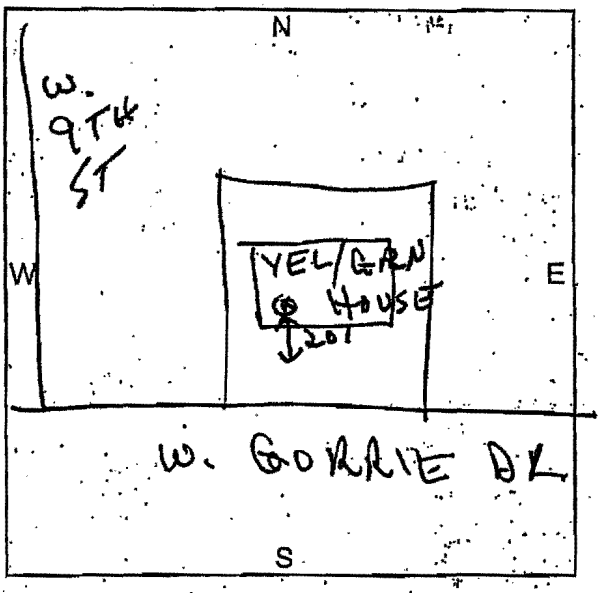
32. Screened Length: _____

33. Screened Intervals: _____

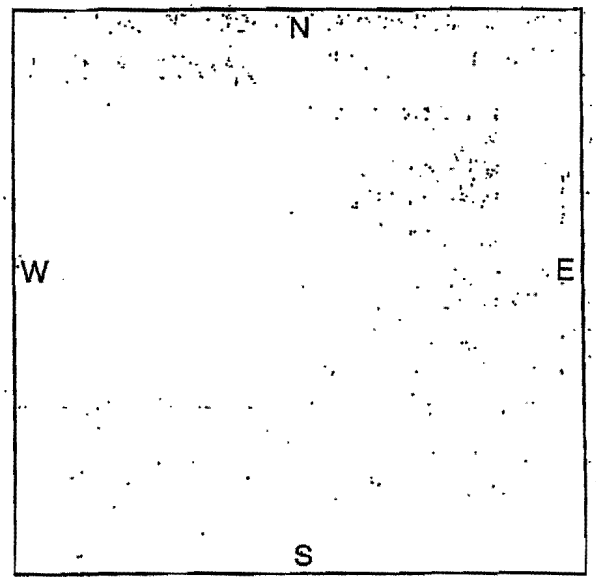
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
TOOK LAT & LONG APPROX. 20 FT. SOUTH OF WELL

FLORIDA
UNIQUE WELL ID
AAK0912

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

50

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. JAK 0911
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS** (Location): ANCHOR VAC. Mob. 773 W GORRIE DR
City: COTTAGE BY THE SEA
Zip: _____
County: _____ **Phone:** 800-824-0416

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 18.92
GPS LONGITUDE: 84 52 49.94

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: 2
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: 2
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 7 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

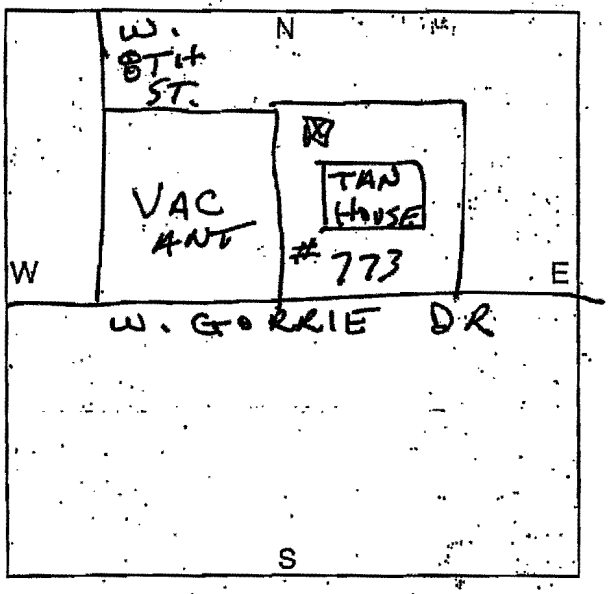
32. Screened Length: _____

33. Screened Intervals: _____

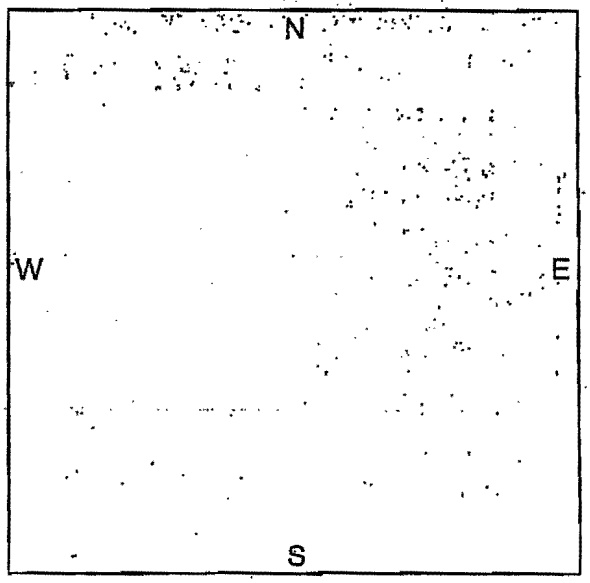
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
UNABLE TO VIEW PUMP — LOCKED ENCLOSURE

FLORIDA
UNIQUE WELL ID
AAK0911

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

51

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0910
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
GREEN STUCCO HOUSE ON
City: N. SIDE W. GORRIE DR.
Zip: NEXT TO 733 ADDRESS
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: GEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 20.96

GPS LONGITUDE: 84 52 43.44

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: ?
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ? 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 14" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

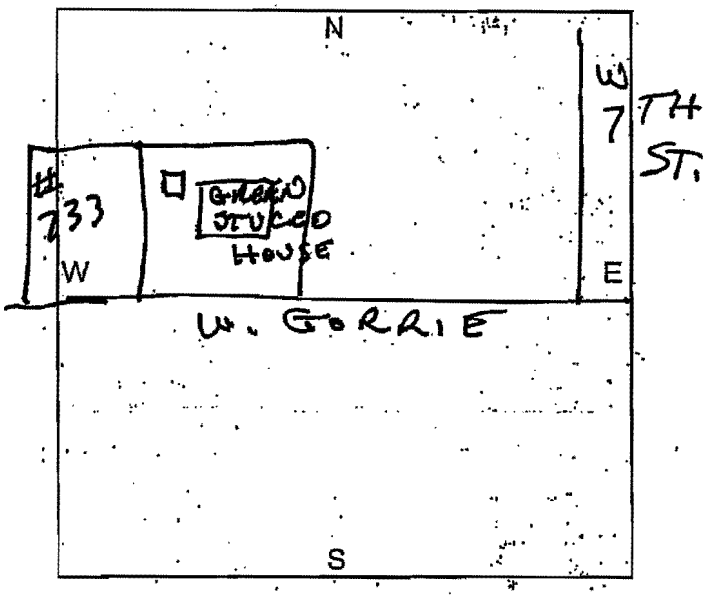
32. Screened Length: _____

33. Screened Intervals: _____

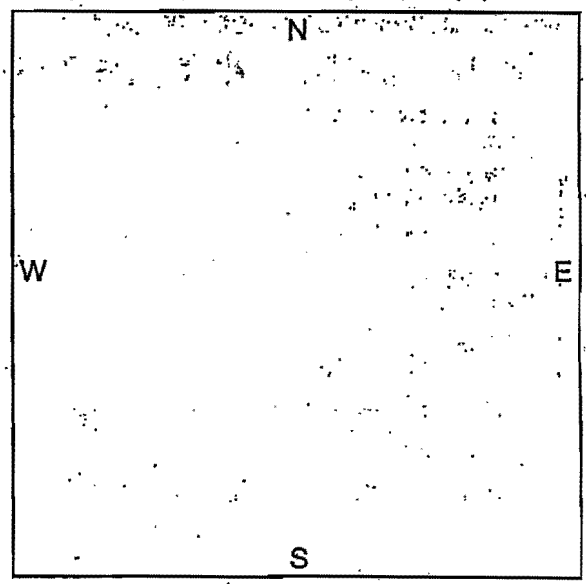
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
LOCKED ENCLOSURE

FLORIDA
UNIQUE WELL ID
AAK0910

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

52

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0909
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 700 W. GORRIE DR
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 20.95

GPS LONGITUDE: 84 52 40.19

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

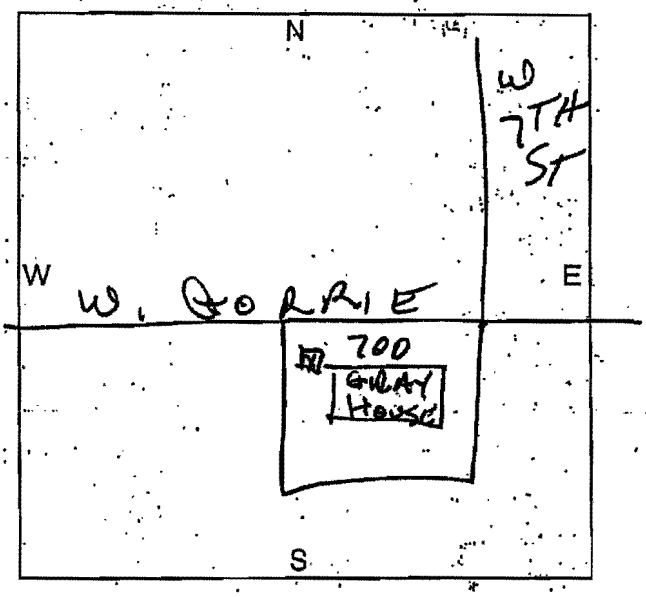
32. Screened Length: _____

33. Screened Intervals: _____

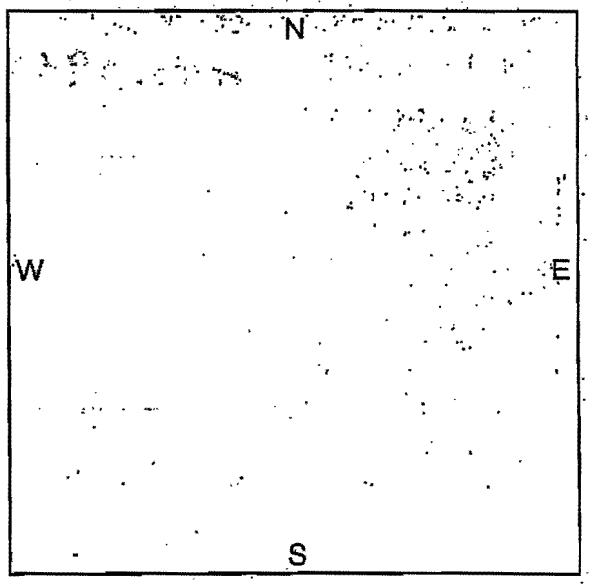
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
WELL DISCONNECTED FROM PUMP.

FLORIDA
UNIQUE WELL ID
AAK0909

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

53

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0908
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): JACK SCHOELLES
701 W. BORRIE
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: GEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 22.25

GPS LONGITUDE: 84 52 39.84

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ? 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

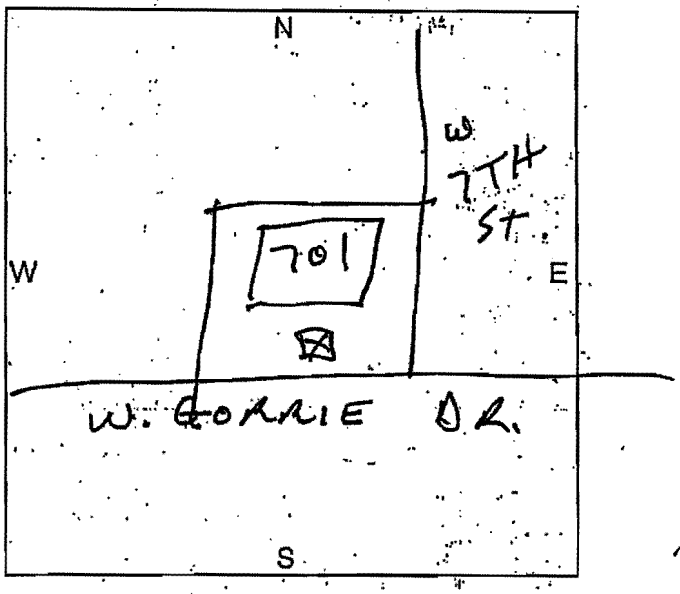
32. Screened Length: _____

33. Screened Intervals: _____

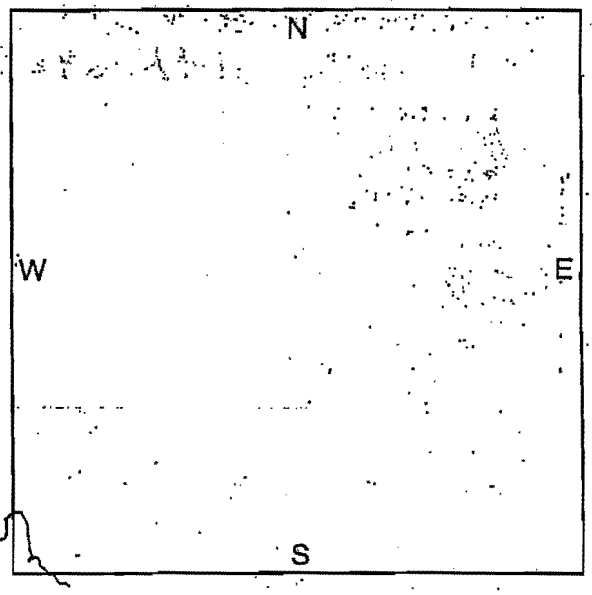
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0908

54

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0907
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. WELL ADDRESS (Location): COLLINS VAC.
648 W. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: 927-2900

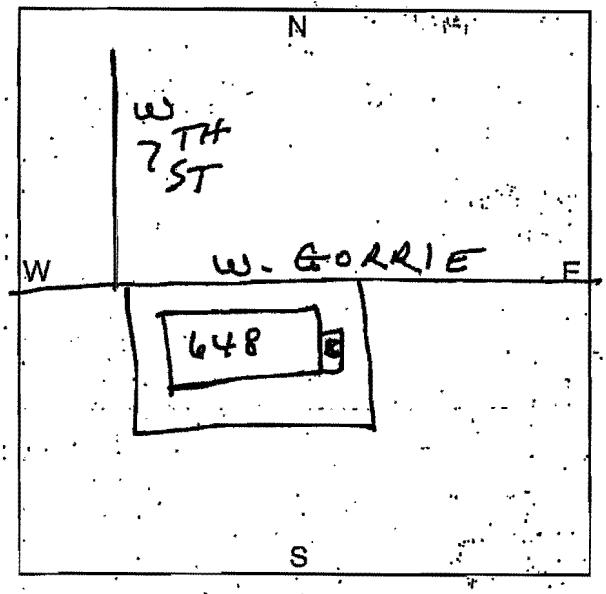
14. SCHEDULE FILLED OUT BY:
NAME: CJEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: CJEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 39 22.16
GPS LONGITUDE: 84 52 36.84

WELL INFORMATION
(Information in this column should be filled out if possible)

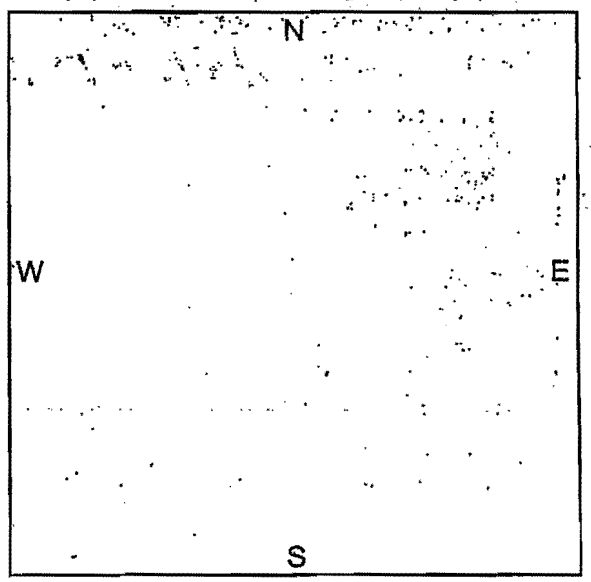
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: ?
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ? 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
LOOKS LIKE AN 1¼" GALV. WELL GOING INTO LOCKED UTILITY ROOM.

FLORIDA
UNIQUE WELL ID
AAK0907

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

55

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0906
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): MR. MIMS
616 W. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 24.38

GPS LONGITUDE: 84 52 32.71

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

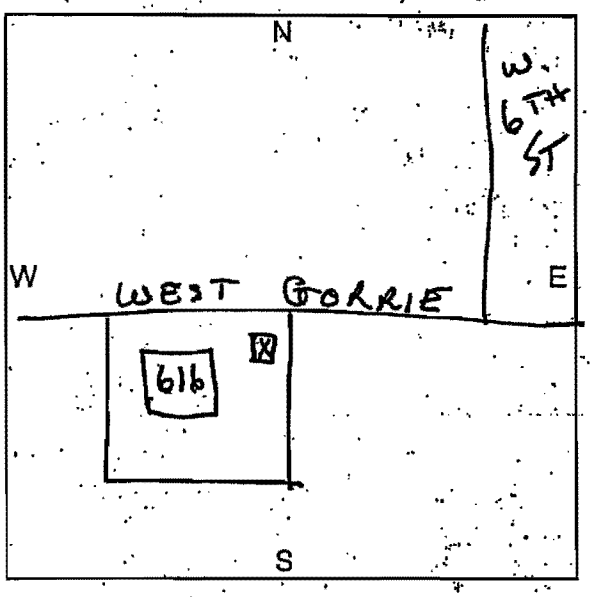
32. Screened Length: _____

33. Screened Intervals: _____

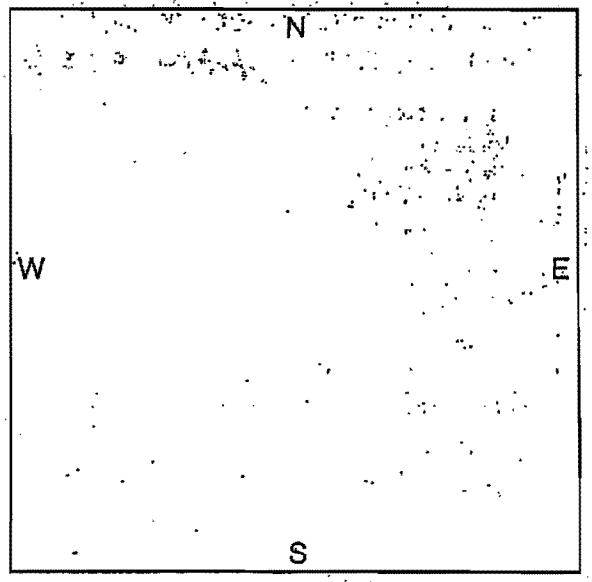
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
WELL NO BEING USED

FLORIDA
UNIQUE WELL ID
AAK0906

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

50

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0904
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 581 W. GORRIE PRUDENTIAL KEKLTY BEIGE HOUSE ON CORNER OF W. 6TH ST AND W. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: 653-2555

14. SCHEDULE FILLED OUT BY:
NAME: U.F.E.S.
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: U.F.E.S.
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 26.60

GPS LONGITUDE: 84 52 29.88

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

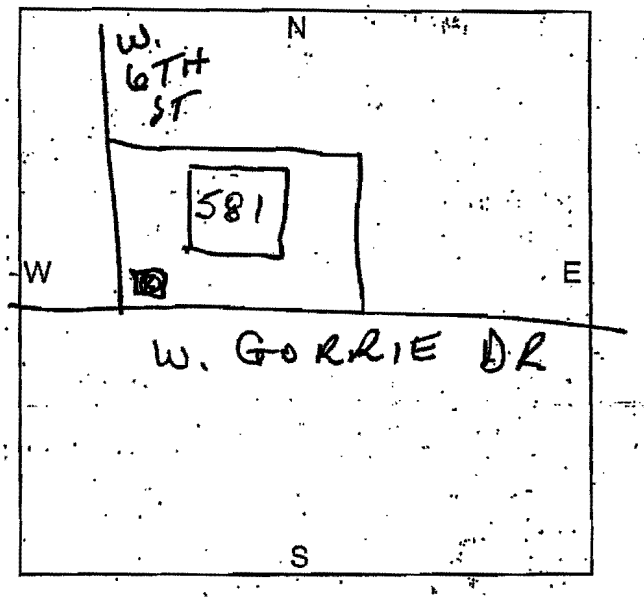
32. Screened Length: _____

33. Screened Intervals: _____

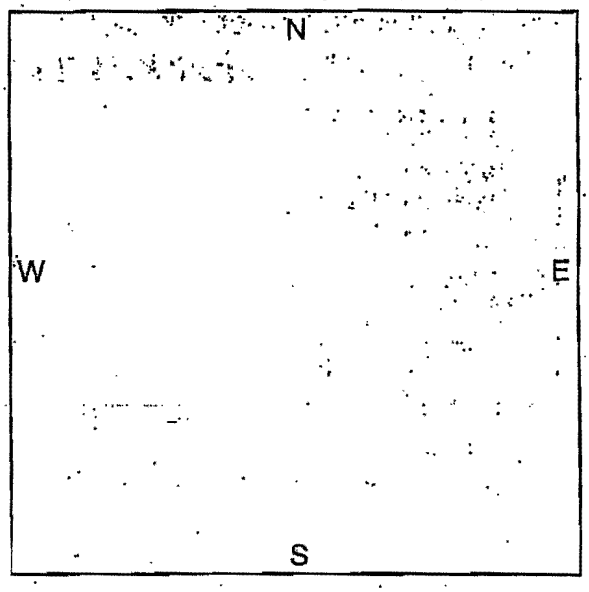
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
PUMP + TANK INSIDE LOCKED ENCLOSURE

FLORIDA
UNIQUE WELL ID
AAK0904

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

57

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0905
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 601 W. GORRIE DR
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 26.33

GPS LONGITUDE: 84 52 30.96

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

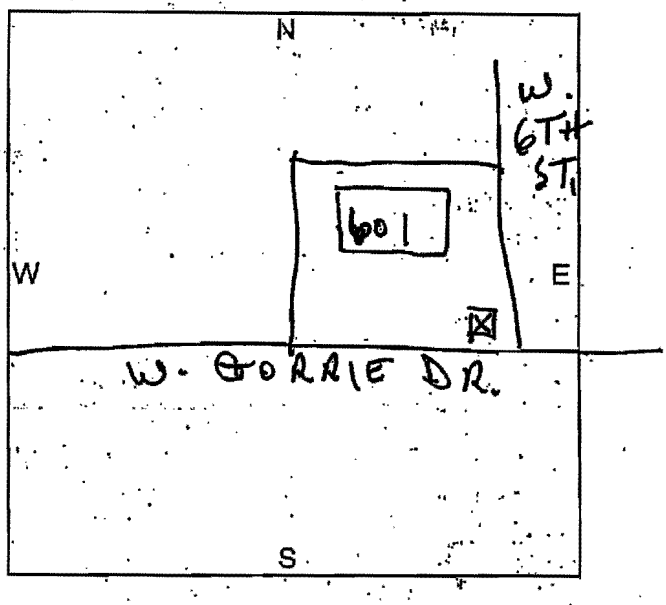
32. Screened Length: _____

33. Screened Intervals: _____

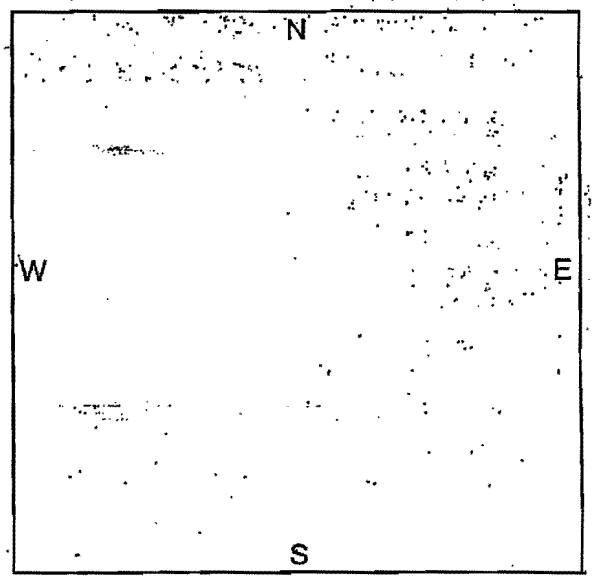
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAK0905

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

58

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0903
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____
No #

13. WELL ADDRESS (Location): COLLINS VAC. REN. SEA GLAZE GRAY HOUSE
City: ON SO. SIDE OF W. GORRIE
Zip: JUST WEST OF 5TH ST EXT.
County: _____ Phone: 927-2900

14. SCHEDULE FILLED OUT BY:
NAME: GEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GEB
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 29.76

GPS LONGITUDE: 84 52 20.93

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

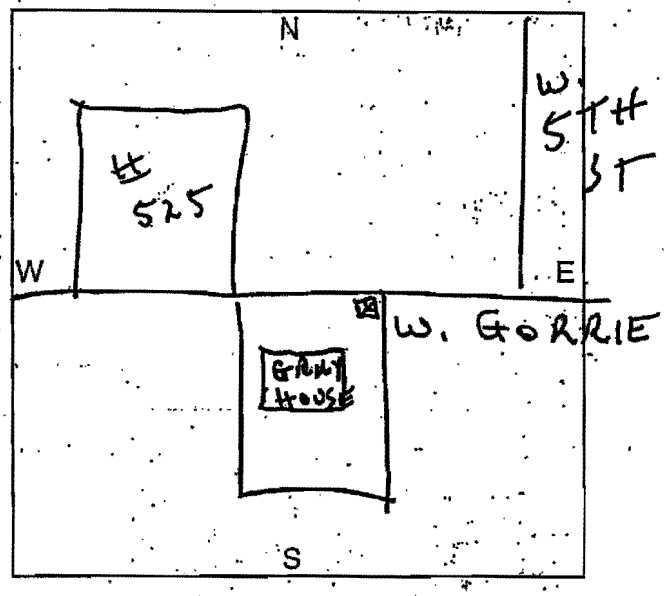
32. Screened Length: _____

33. Screened Intervals: _____

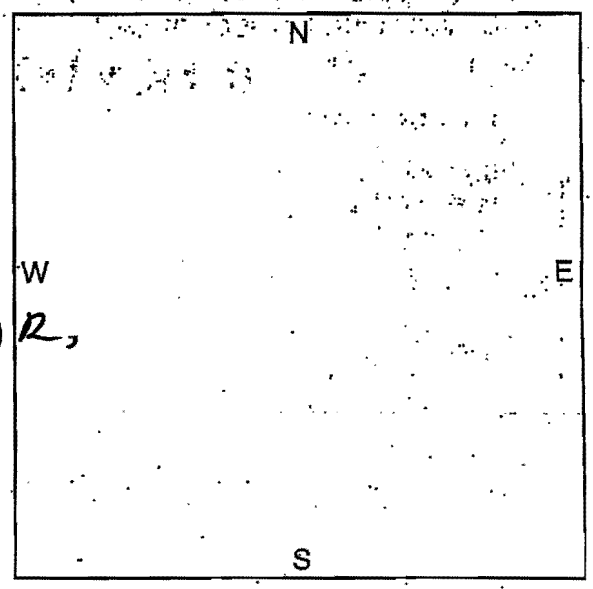
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z -

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0903

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

59

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0901 / AAK 0902
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
WHITE BLOCK HOUSE ON SD. SIDE OF W. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 10/27/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/27/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 36.16

GPS LONGITUDE: 84 52 16.06

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

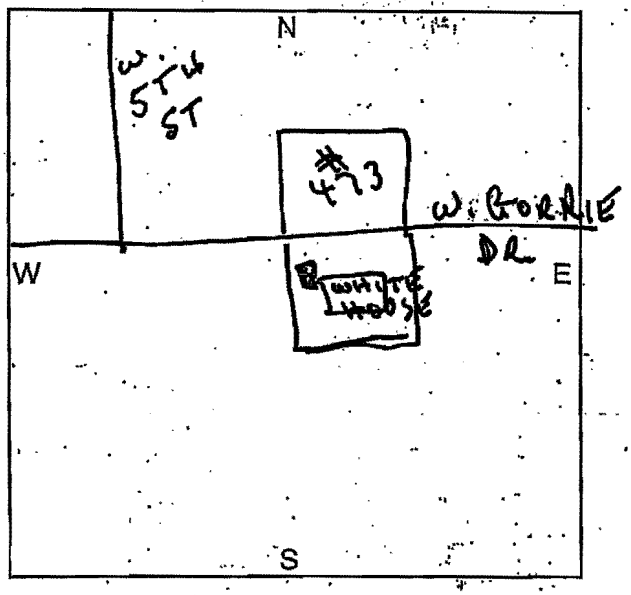
32. Screened Length: _____

33. Screened Intervals: _____

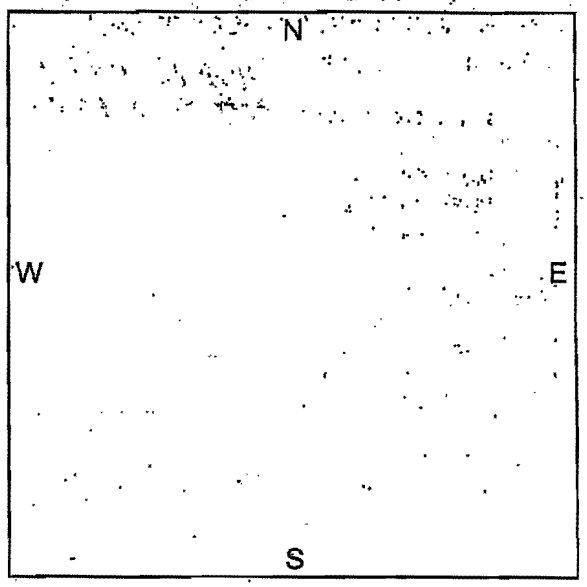
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
2 1¼" WELLS AT THIS SITE WHITE BLACK HOUSE DIRECTLY ACROSS W. GORRIE DRIVE FROM HOUSE AT 473 W. GORRIE

FLORIDA UNIQUE WELL ID AAK0901
FLORIDA UNIQUE WELL ID AAK0902

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

60

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AA 3687
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
509 W Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-26-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 33.67

GPS LONGITUDE: 84 52 22.16

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 3/4 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

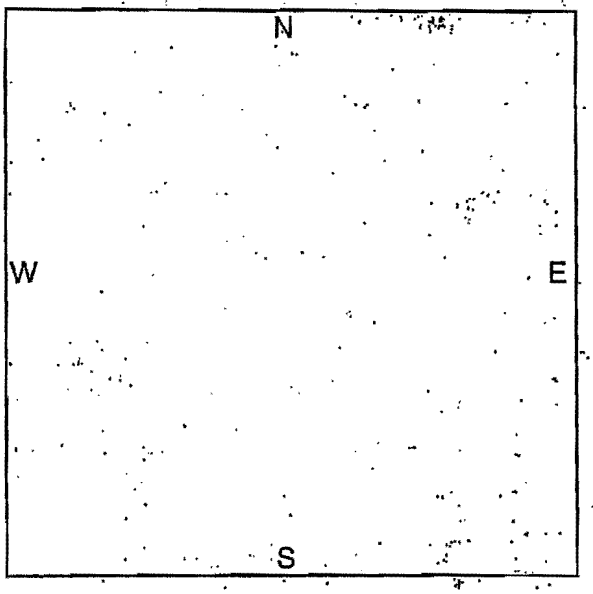
32. Screened Length: _____

33. Screened Intervals: _____

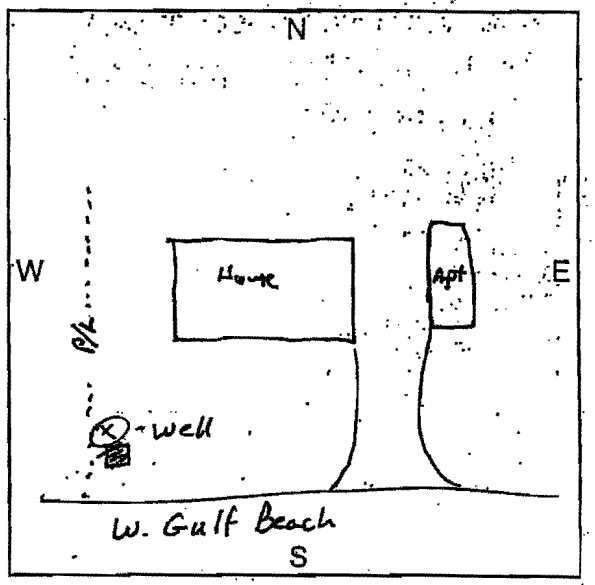
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3687

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

Lea

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA-3686
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): Anchor Vaction
557 W Gulf Beach
City: St George Island
Zip: _____
County: Franklin Phone: 800-824-0416

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-26-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 31.56

GPS LONGITUDE: 84 52 27.85

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: ES
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

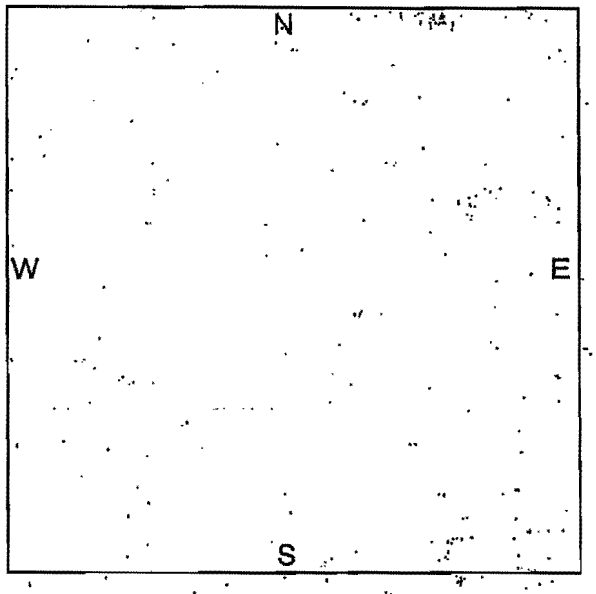
32. Screened Length: _____

33. Screened Intervals: _____

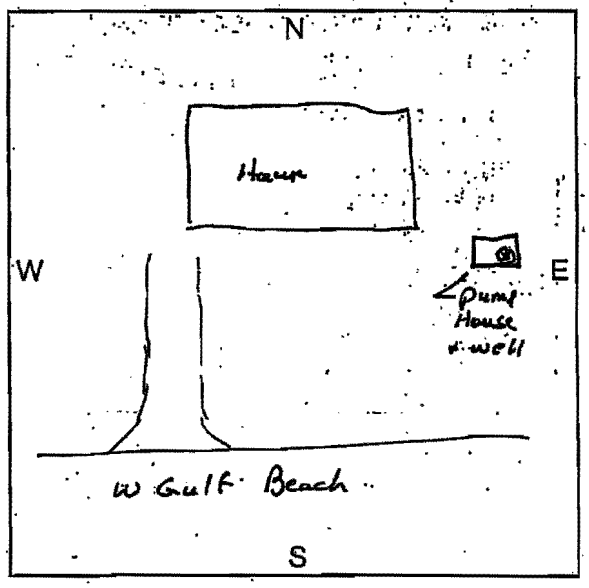
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAA3686

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

02

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA3685
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
724 W Gulf Beach
City: St George Island
Zip: _____
County: Franklin **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Bretton Brown
AGENCY: NW FWMD
DATE: 10.26.05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 23.27

GPS LONGITUDE: 84 52 43.76

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

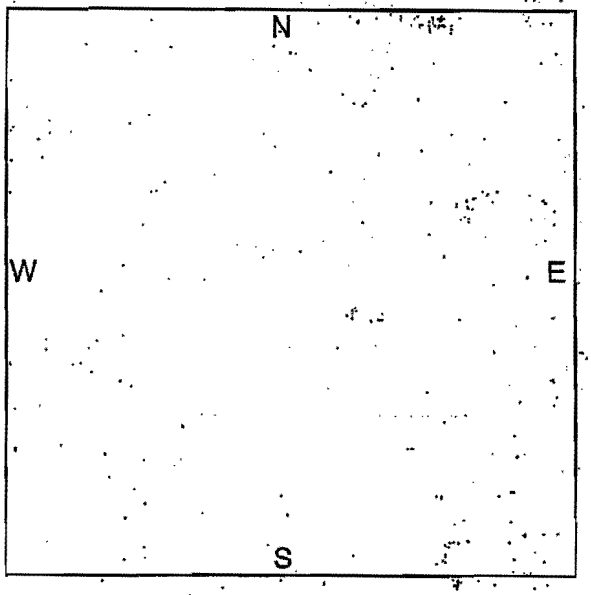
32. Screened Length: _____

33. Screened Intervals: _____

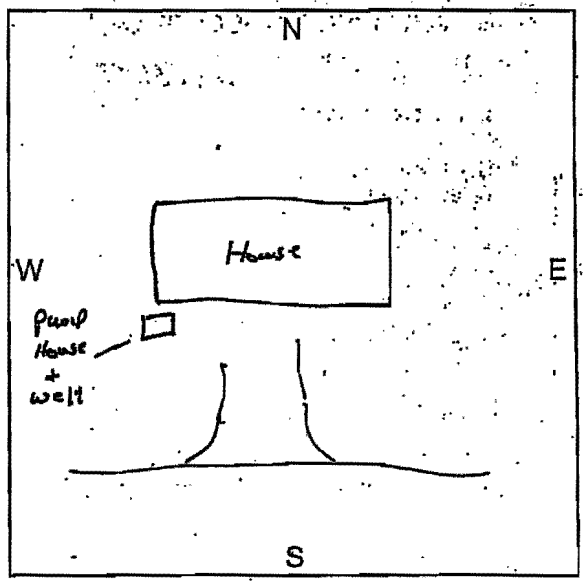
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Pump house locked - Could not access well. Ran faucett until pump came on to verify well.

FLORIDA
UNIQUE WELL ID
AAA3685

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

63

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3684
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Louis Bouy
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
965 west Gulf Beach
City: 965 west Gulf Beach St George Island
Zip: _____
County: FL Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Blow
AGENCY: NW. FW. MD
DATE: 10.26.05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 11.38

GPS LONGITUDE: 84 53 14.38

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

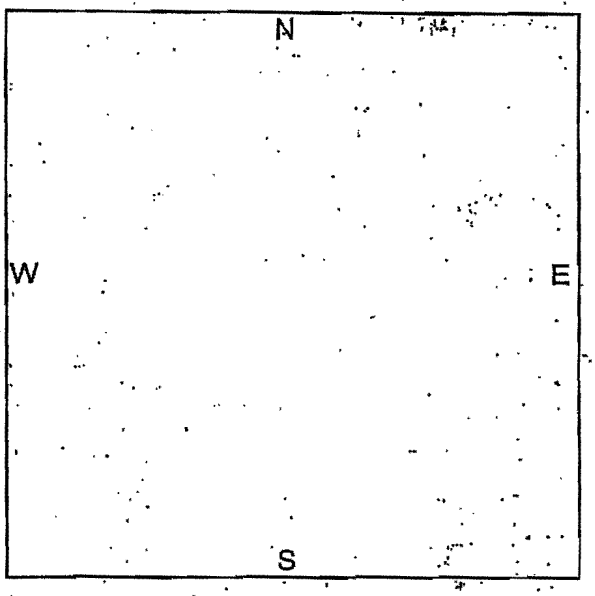
32. Screened Length: _____

33. Screened Intervals: _____

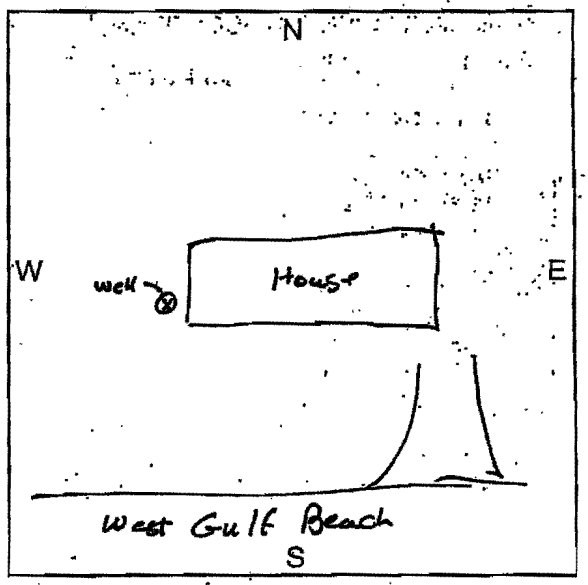
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

Well installed several years ago - driller's name not known

FLORIDA
UNIQUE WELL ID
AAA3684

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

64

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3683
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
    W
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): _____
    West Gulf Beach
    City: St George Island
    Zip: _____
    County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
    NAME: T. Brow
    AGENCY: NWFWMD
    DATE: 10-26-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____

    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

    GPS LATITUDE: 29 39 11.75

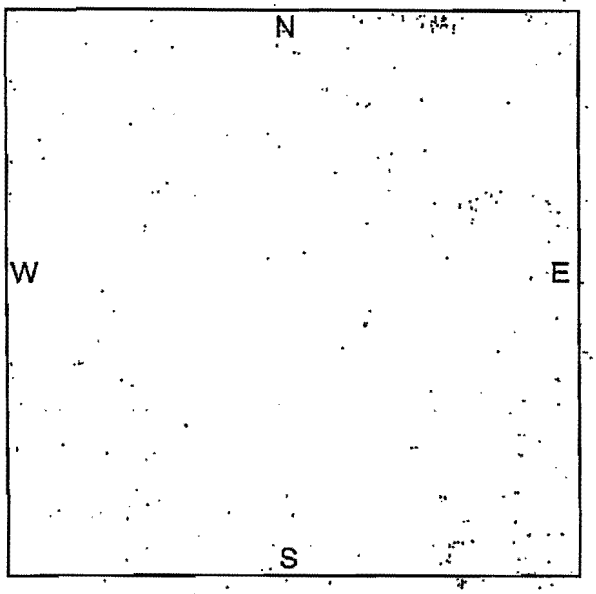
    GPS LONGITUDE: 84 53 12.87

WELL INFORMATION
(Information in this column should be filled out if possible)

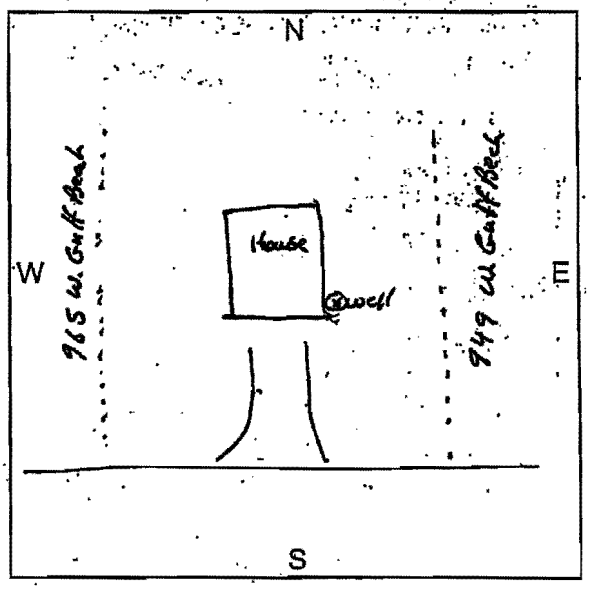
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: ?
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: ?
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
House is on lot between 949 west Gulf Beach and 965 west Gulf Beach

FLORIDA
UNIQUE WELL ID
AAA3683

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

05

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4797
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

SGICC

13. WELL ADDRESS (Location): BILL HICKS 301 E SAWYER

City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: GEB
AGENCY: _____
DATE: 10/26/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GEB
AGENCY: _____
DATE: 10/26/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 13.26

GPS LONGITUDE: 84 53 27.16

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 11 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

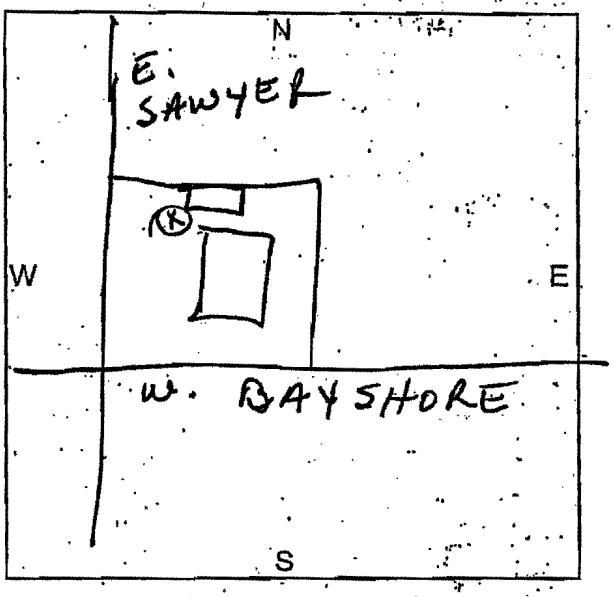
32. Screened Length: _____

33. Screened Intervals: _____

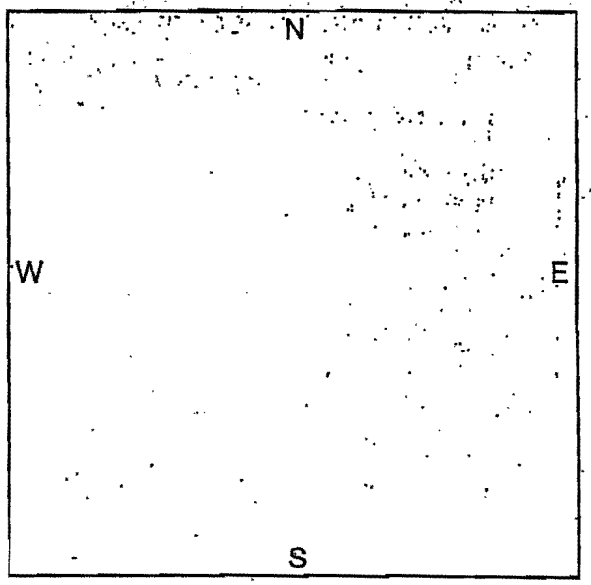
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
MR. HICKS STATED THAT SOME GUY FROM EASTPOINT — NAME HE DIDN'T KNOW — PUT THIS WELL IN FOR HIM FOR $750.00. WELL IS BACKUP WELL WHEN POWER & WATER IS OFF — PER MR. HICKS

FLORIDA
UNIQUE WELL ID
AAJ4797

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

66

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AA 5 4798
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

SGICC
13. WELL ADDRESS (Location): BILL HICKS
301 E. SAWYER
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: G.L. Hall
AGENCY: _____
DATE: 10/26/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: Owner
AGENCY: _____
DATE: 10/26/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 12.43

GPS LONGITUDE: 84 53 26.88

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

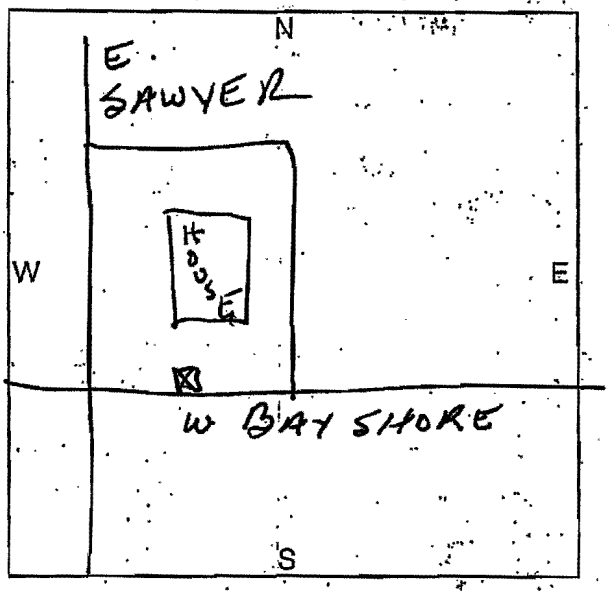
32. Screened Length: _____

33. Screened Intervals: _____

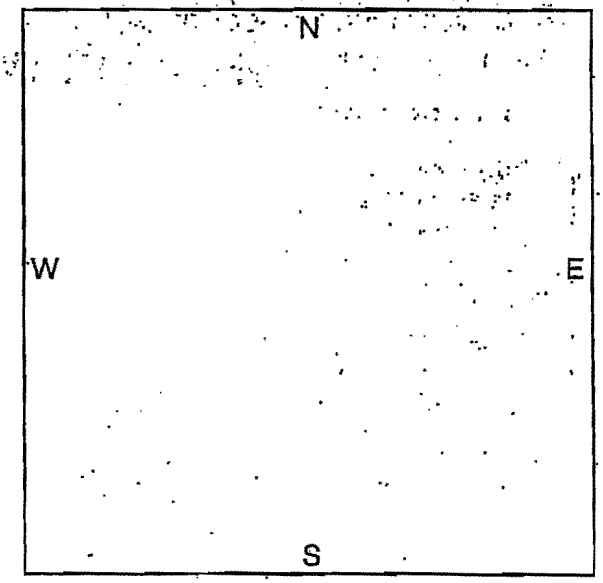
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
MR. HICKS NOTED THAT THIS WELL WAS ALREADY ON PROPERTY WHEN HE PURCHASED IT.

FLORIDA
UNIQUE WELL ID
AAJ4798

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

07

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4782
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. WELL ADDRESS (Location): RESORT VAC. PROPERTIES
873 E. ORRIE DR.
City: _____
Zip: _____
County: _____ **Phone:** _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: 10/20/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10/20/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 12.28

GPS LONGITUDE: 84 50 25.16

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: Lk
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

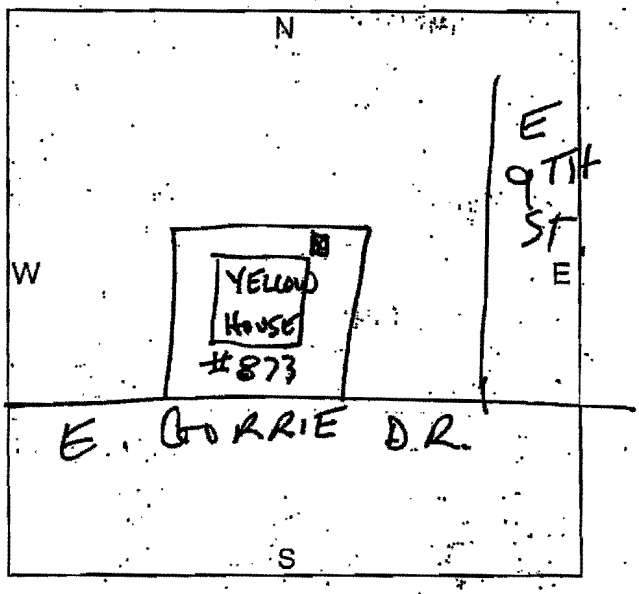
32. Screened Length: _____

33. Screened Intervals: _____

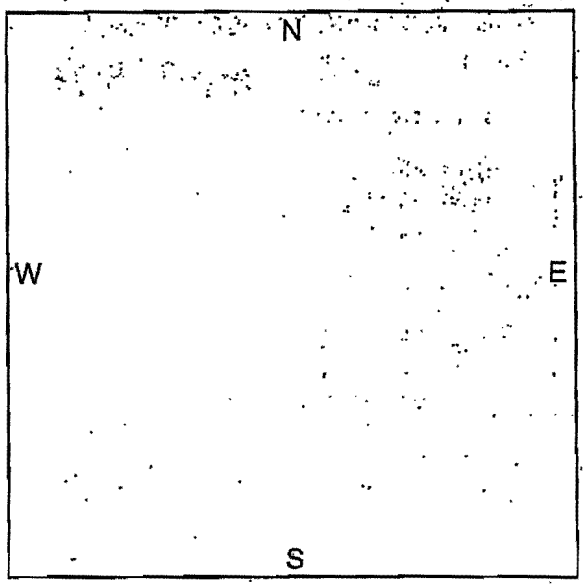
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4782

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

68

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4791
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 1248 E. GULF BCH
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: G. E. B.
AGENCY: _____
DATE: 10/24/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: G. E. B.
AGENCY: _____
DATE: 10/24/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 25.96

GPS LONGITUDE: 84 49 34.24

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

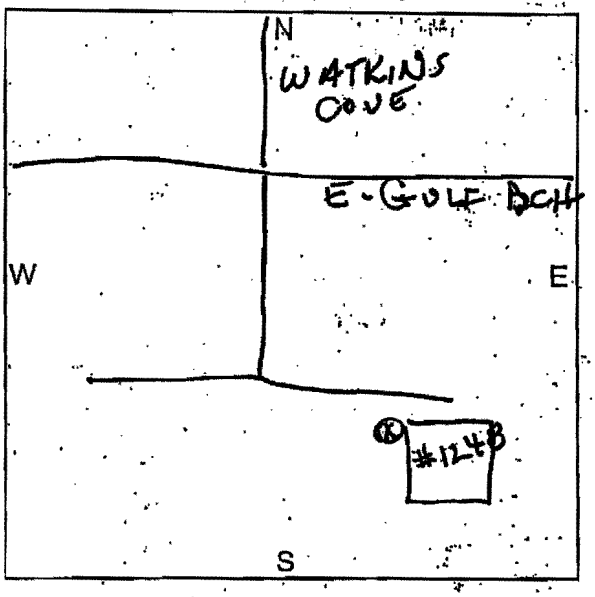
32. Screened Length: _____

33. Screened Intervals: _____

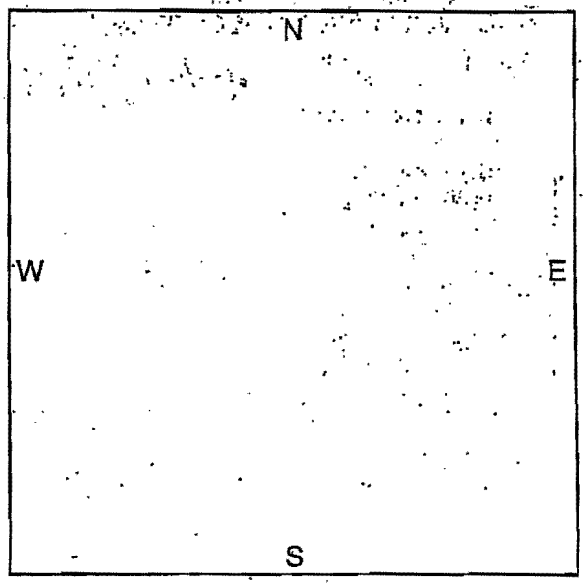
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4791

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

69

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4792
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: W. L. NORRED
12. Mailing Address: 1328 E. GULF BCH
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): SAME
    City: _____
    Zip: _____
    County: _____ Phone: _____

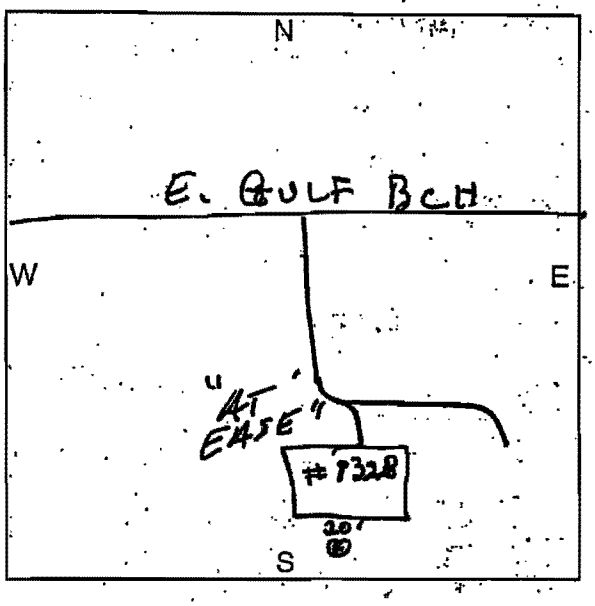
14. SCHEDULE FILLED OUT BY:
    NAME: JEW
    AGENCY: _____
    DATE: 10/24/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: JEW
    AGENCY: _____
    DATE: 10/24/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 26.06
    GPS LONGITUDE: 84 49 25.03

WELL INFORMATION
(Information in this column should be filled out if possible)

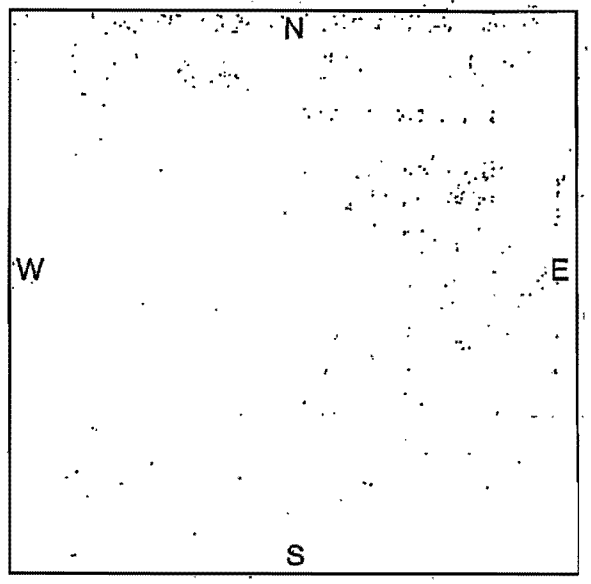
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA.
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
WELL IS BELOW GRADE ON WATER SIDE OF HOUSE APPROXIMATELY 20' SOUTH OF PORCH.

FLORIDA
UNIQUE WELL ID
AAJ4792

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

10

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4793
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
#1348 ? E. GULF BCH. DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/24/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/24/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 27.89

GPS LONGITUDE: 84 49 21.61

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: W
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

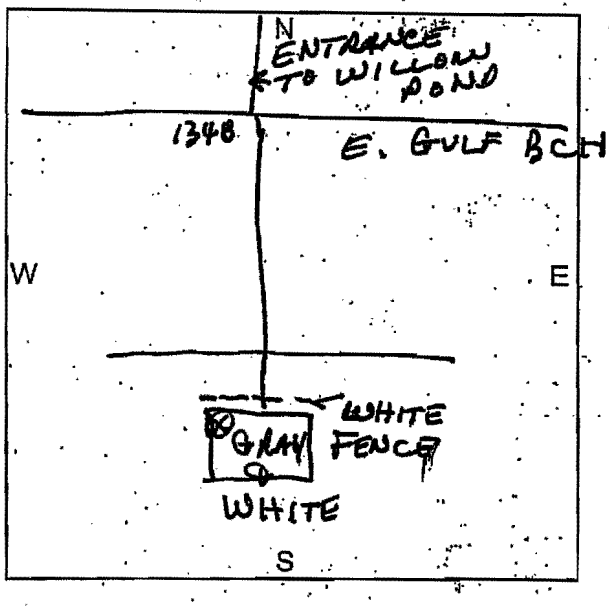
32. Screened Length: _____

33. Screened Intervals: _____

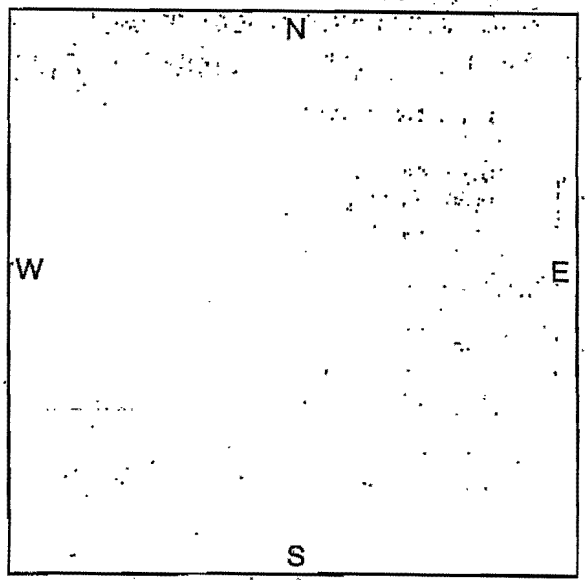
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
TANK BROKEN A LOOSE FROM PUMP

FLORIDA
UNIQUE WELL ID
AAJ4793

NEW CONSTRUCTED

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

71

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AA5 4789
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
1125 W. GORRIE
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: G.E.B.
AGENCY: _____
DATE: 10/26/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: G.E.B.
AGENCY: _____
DATE: 10/26/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 38 58.68

GPS LONGITUDE: 84 53 29.49

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mul. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

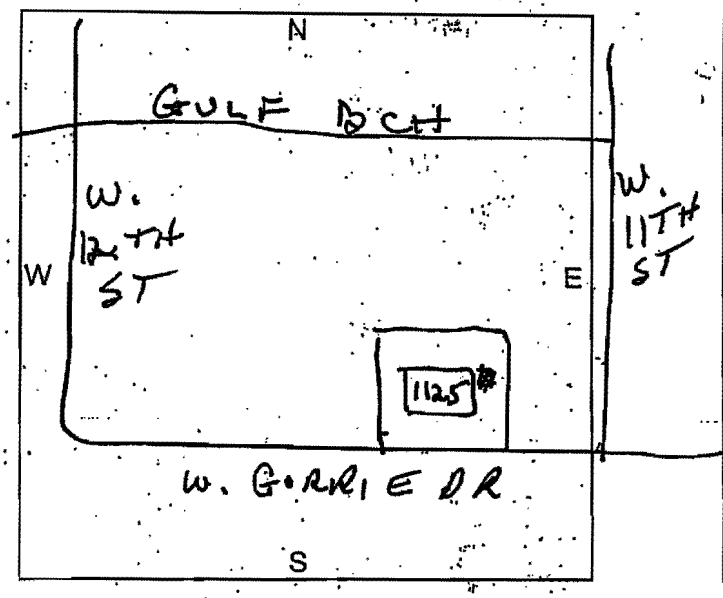
32. Screened Length: _____

33. Screened Intervals: _____

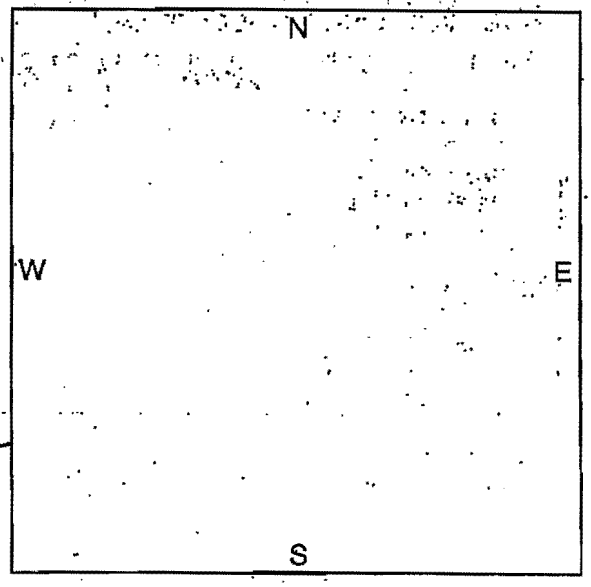
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
NEWLY CONSTRUCTED WELL - OLD IRRIGATION PUMP AT NEWLY CONSTRUCTED HOUSE

FLORIDA UNIQUE WELL ID
AAJ4789

VCW
IONSTRUCTION

72

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ4790
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. WELL ADDRESS (Location): COLLINS VAC. RENTALS
1116 W. GORRIE DR
City: _____
Zip: _____
County: _____ Phone: 927-2900

14. SCHEDULE FILLED OUT BY:
NAME: GEB
AGENCY: _____
DATE: 10/26/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GEB
AGENCY: _____
DATE: 10/26/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 38 57.44

GPS LONGITUDE: 84 53 28.27

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary, AB - Augered/Bored, BB - Bail Bucket, CO - Combination, CT - Cable Tool, DR - Driven, DU - Dug, HR - Hydraulic Rotary, JT - Jetted, RR - Reverse Rotary, OT - Other

17. Use of Site: _____
A - Properly Abandoned, C - Core, D - Drainage, M - Monitor/Observation, P - Oil/Gas, R - Return, S - Standby, T - Test, U - Unused, W - Withdrawal, X - Waste Disposal/Injection, Z - Destroyed, O - Other

18. Use of Water: LA
AI - Agricultural Irrigation, AQ - Aquaculture, AR - Aquifer Recharge, AS - Aesthetic, CO - Commercial, DI - Diversion/Impoundment, DM - Domestic/Mult. Family, DO - Domestic, DW - Dewatering Wells, ES - Essential Service, FP - Freeze Protection, GI - Golf Course Irrigation, HR - Heat Pump Recharge, HS - Heat Pump Supply, IN - Industrial, LA - Landscape Irrigation, LI - Livestock, LP - Limited Use PS, MI - Mining, MO - Monitor, NA - Navigation, NI - Nursery Irrigation, OO - Other Outside Use, PF - Perishable Food, PP - Power Production, PS - Public Supply, RI - Recreation Irrigation, RW - Restoration Well, SF - Soil Flooding, SN - Sanitation, TE - Test, WR - Water Based Recreation

19. Type of Lift: C
A - Air, B - Bucket, C - Centrifugal, J - Jetted, P - Piston, S - Submersible, T - Turbine, N - No Pump, Z - Other

20. Type of Power: E
D - Diesel, E - Electric, G - Gasoline, H - Hand, Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer, C - Current Meter, E - Estimated, M - Totaling Meter, O - Orifice, R - Reported, T - Trajectory, V - Volumetric, Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated, G - Pressure Gauge, L - Geophysical Log, R - Reported, S - Steel Tape, A - Air Line, T - Electric Tape, Z - Other

27. Diameter: 2" 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC, S - Steel, C - Concrete, B - Brick, Z - Other

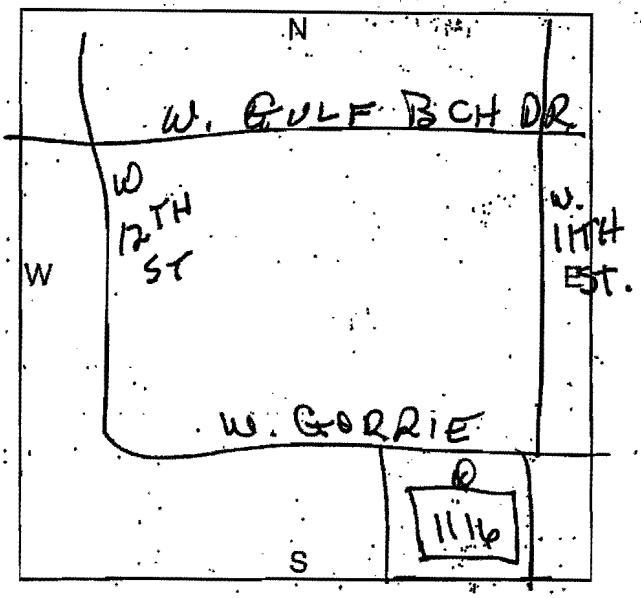
32. Screened Length: _____

33. Screened Intervals: _____

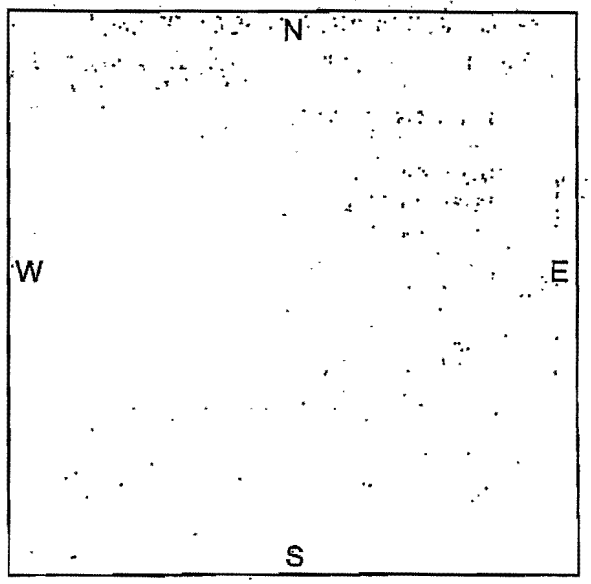
34. Finish: _____
S - Screen, O - Open End, X - Open Hole, Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
1HP STA-RITE PUMP

FLORIDA
UNIQUE WELL ID
AAJ4790

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

73

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0900
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 1141 W. GORRIE
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 10/26/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/26/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 38 57.43

GPS LONGITUDE: 84 53 31.04

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

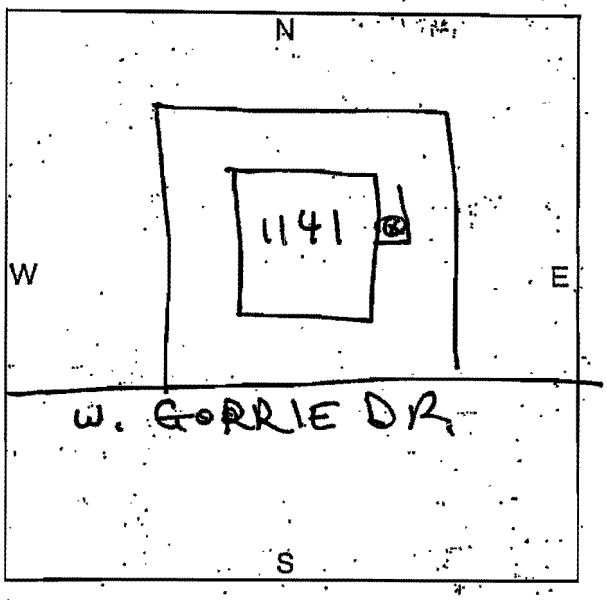
32. Screened Length: _____

33. Screened Intervals: _____

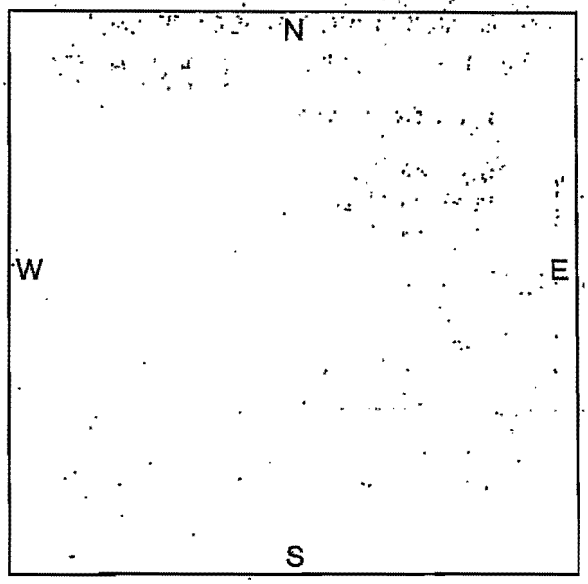
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0900

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

74

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAJ4799
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): PRUDENTIAL
NO # W. GARRIE
City: _____
Zip: _____
County: _____ Phone: 927-2666

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 28.05

GPS LONGITUDE: 84 52 28.10

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Property Abandoned; C - Cond; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

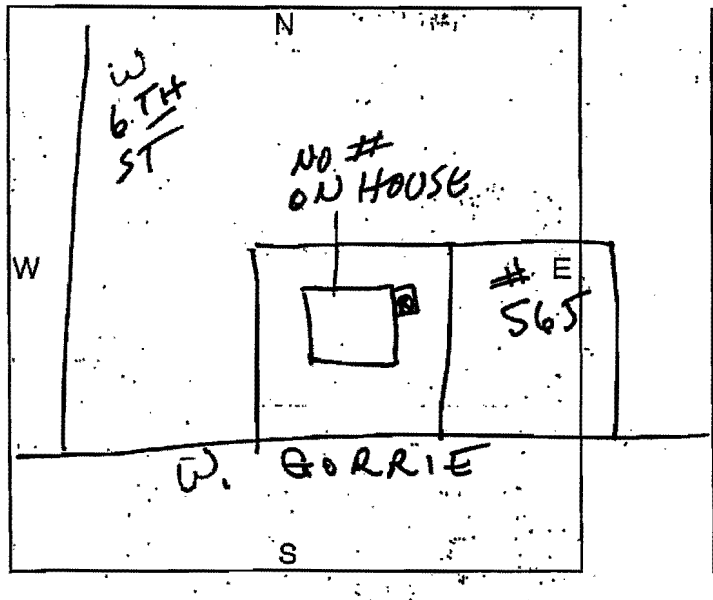
32. Screened Length: _____

33. Screened Intervals: _____

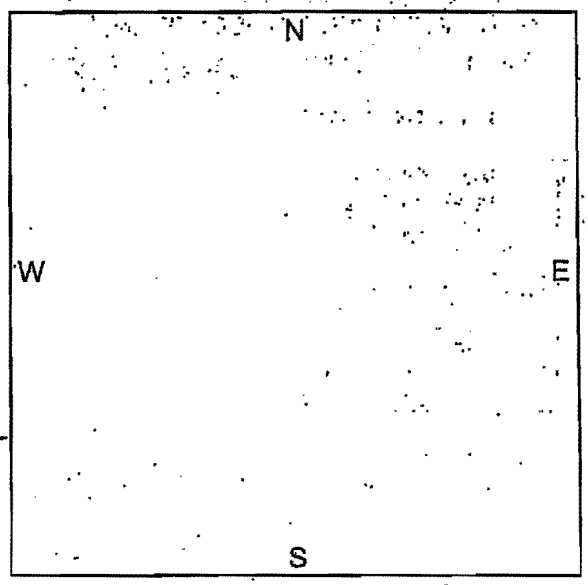
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
NO # ON HOUSE - 2ND HOUSE ON NORTH SIDE OF STREET EAST OF E. 6TH WELL APPEARS TO BE ABOUT 15 FEET FROM AEROBIC TANK

FLORIDA
UNIQUE WELL ID
AAJ4799

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

75

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

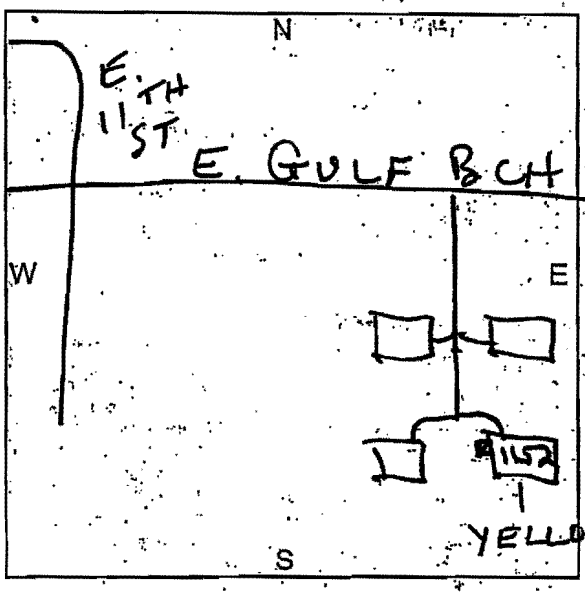
1. FLORIDA UNIQUE I.D. AAJ 4788
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** 1152 E. GULF BCH DR
    City: _____
    Zip: _____
    County: _____ **Phone:** _____
14. **SCHEDULE FILLED OUT BY:**
    NAME: C.E. Bright
    AGENCY: _____
    DATE: 10/20/05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10/20/05 **PHONE:** _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 21.98
    GPS LONGITUDE: 84 49 47.83

WELL INFORMATION
(Information in this column should be filled out if possible)

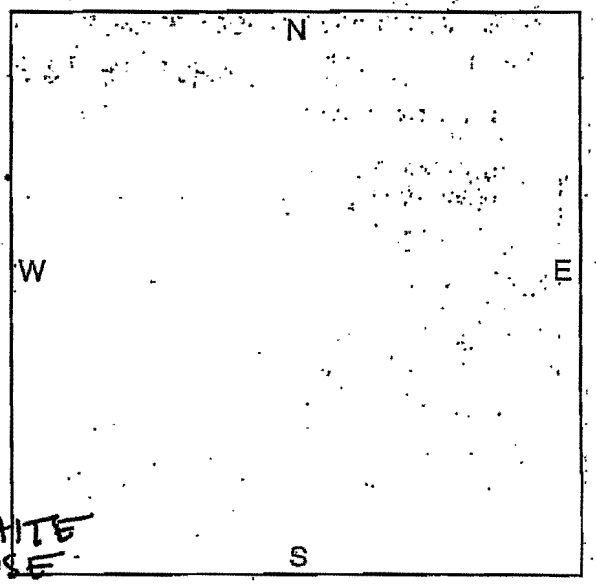
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4788

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

76

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAS 4787
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): COLLINS VAC. RENTALS
1135 E GULF BCH DR.
City: KINJA BAY
Zip: _____
County: _____ Phone: 927-2900

14. SCHEDULE FILLED OUT BY:
NAME: GPS
AGENCY: _____
DATE: 10/20/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GPS
AGENCY: _____
DATE: 10/20/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 25.76

GPS LONGITUDE: 84 49 53.82

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Multi Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ? 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

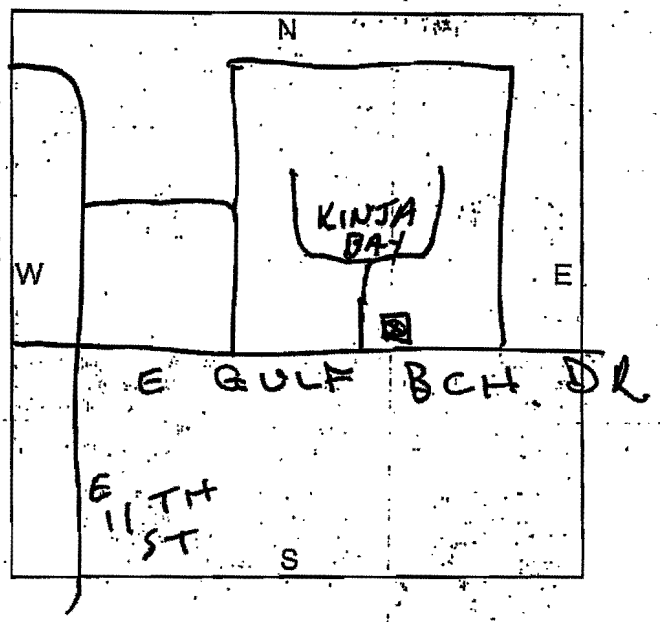
32. Screened Length: _____

33. Screened Intervals: _____

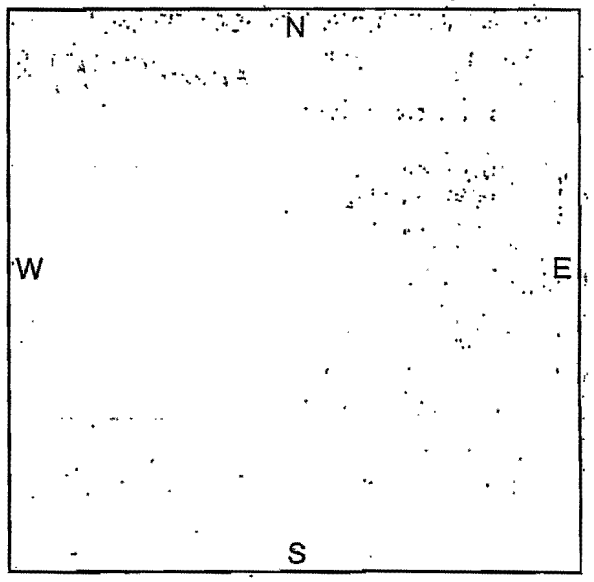
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
PUMP + TANK INSIDE LOCKED HOUSE

FLORIDA
UNIQUE WELL ID
AAJ4787

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

77

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4784
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
SUN COAST REALTY
13. WELL ADDRESS (Location): _____
1108? E. GULF BCH DR.
City: 1ST. DRIVE E. OF 11TH ST.
Zip: ON S. SOUTH
County: _____ Phone: 927-2282

14. SCHEDULE FILLED OUT BY:
NAME: GAB
AGENCY: _____
DATE: 10/20/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GAB
AGENCY: _____
DATE: 10/20/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 21.74
GPS LONGITUDE: 84 49 56.03

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Multi Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

32. Screened Length: _____

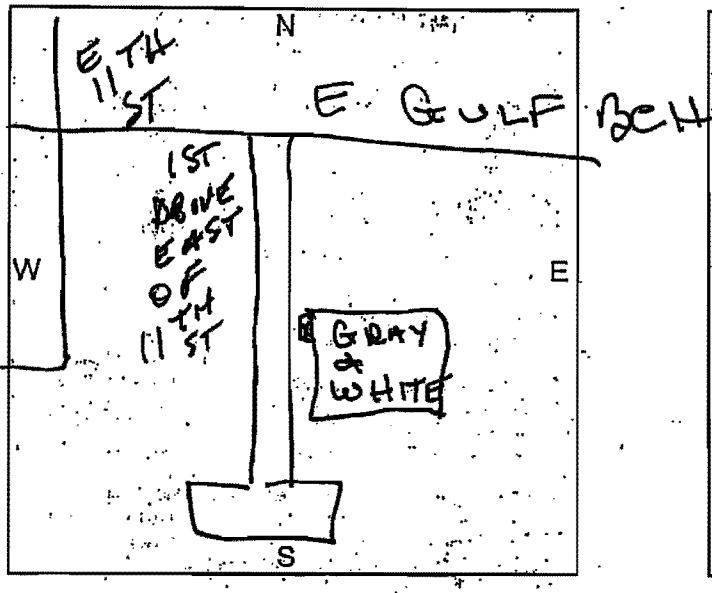
33. Screened Intervals: _____

34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

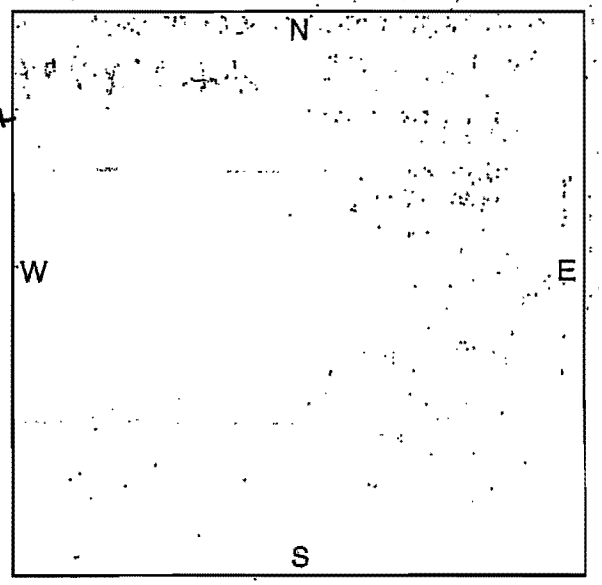
Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

1108?

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4784

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

78

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4785
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)

    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 1136 E. GULF BCH
    City: _____
    Zip: _____
    County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
    NAME: OES
    AGENCY: _____
    DATE: 10/20/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
    NAME: OES
    AGENCY: _____
    DATE: 10/20/05 **PHONE:** _____

    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

    GPS LATITUDE: 29 40 23.00

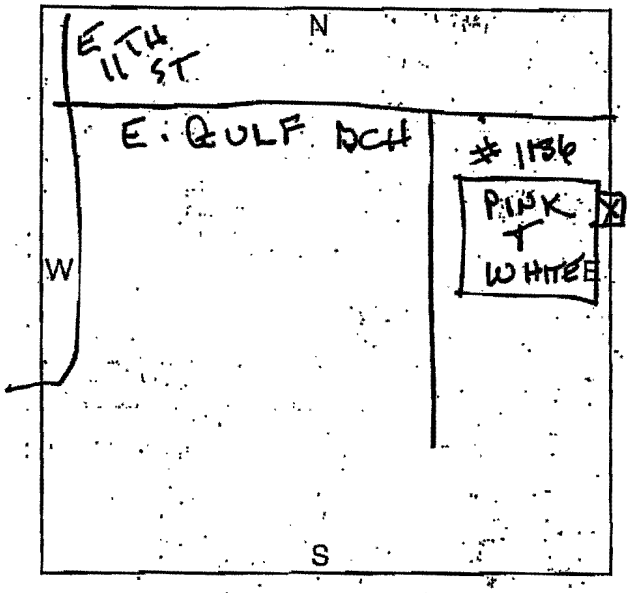
    GPS LONGITUDE: 84 49 51.84

WELL INFORMATION
(Information in this column should be filled out if possible)

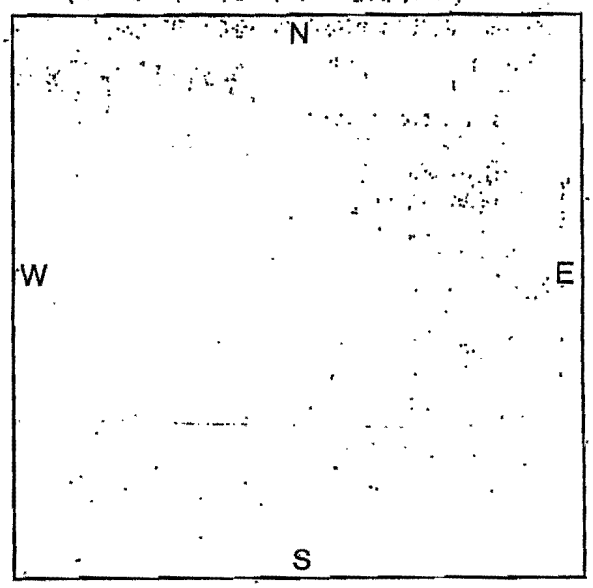
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Beller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain _____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4785

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

79

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4783
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. WELL ADDRESS (Location): 872 E. GORRIE DR.

City: _____
Zip: _____
County: _____ **Phone:** _____

14. SCHEDULE FILLED OUT BY:
NAME: G E Bryant
AGENCY: _____
DATE: 10/20/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: G E B
AGENCY: _____
DATE: 10/20/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 10.99

GPS LONGITUDE: 84 50 24.21

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 14" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

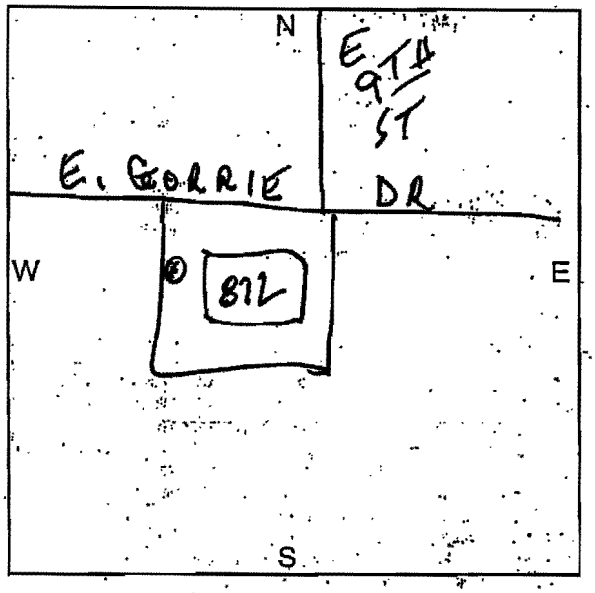
32. Screened Length: _____

33. Screened Intervals: _____

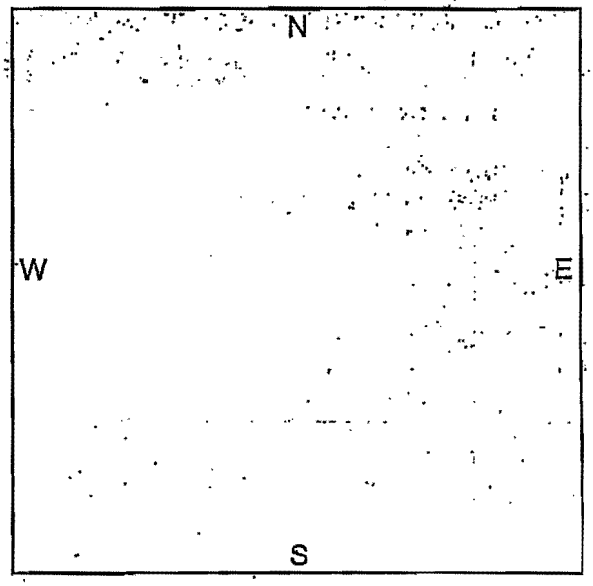
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
WELL NOT BEING USED, NO PUMP ON IT

FLORIDA
UNIQUE WELL ID
AAJ4783

80

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

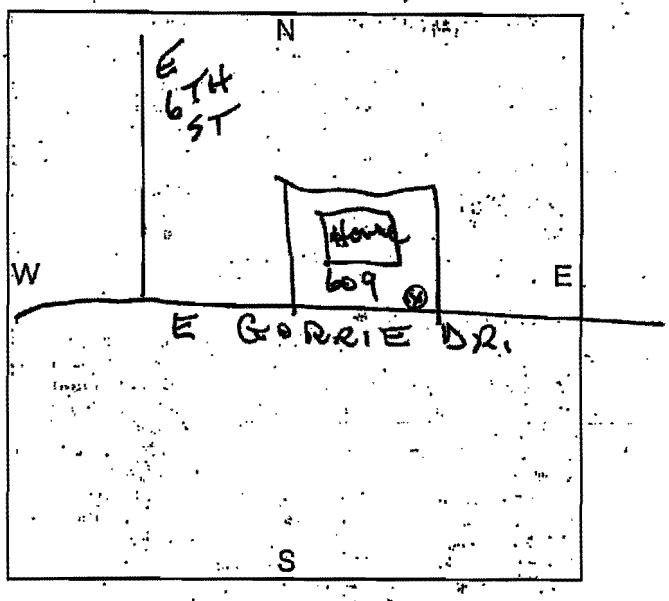
1. FLORIDA UNIQUE I.D. AAJ 4748
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): COLLINS RENTALS
    609 E GORRIE DR.
    City: _____
    Zip: _____
    County: _____ Phone: 927-2900
14. SCHEDULE FILLED OUT BY:
    NAME: _____
    AGENCY: _____
    DATE: 10/20/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: 10/20/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 02.23
    GPS LONGITUDE: 84 50 58.48

WELL INFORMATION
(Information in this column should be filled out if possible)

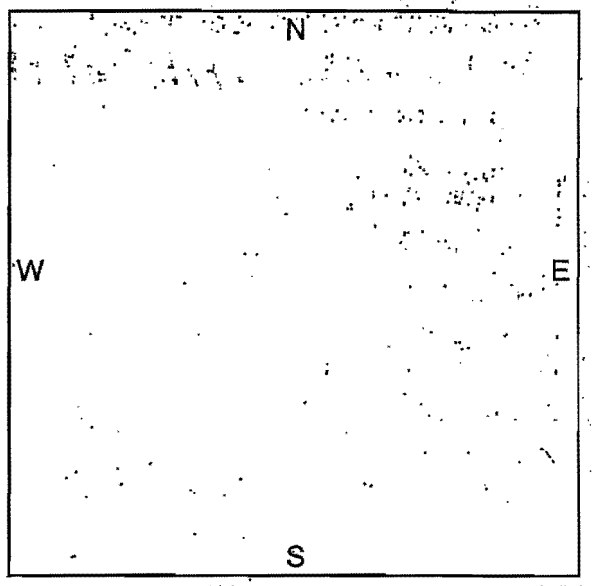
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bell Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: DO
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: EC
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4748

81

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ-4778 4779
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
T _____ (N or S) R _____ (E or W)
Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** RESORT VAC. 625 E. GORRIE DR.
City: _____
Zip: _____
County: _____ **Phone:** 866-927-2722

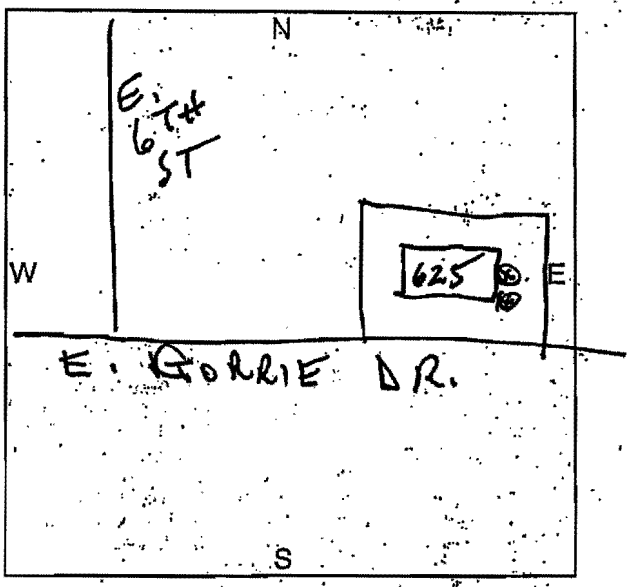
14. **SCHEDULE FILLED OUT BY:**
NAME: C. E. H.
AGENCY: _____
DATE: 10/20/05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/20/05 **PHONE:** _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 03.98
GPS LONGITUDE: 84 50 56.56

WELL INFORMATION
(Information in this column should be filled out if possible)

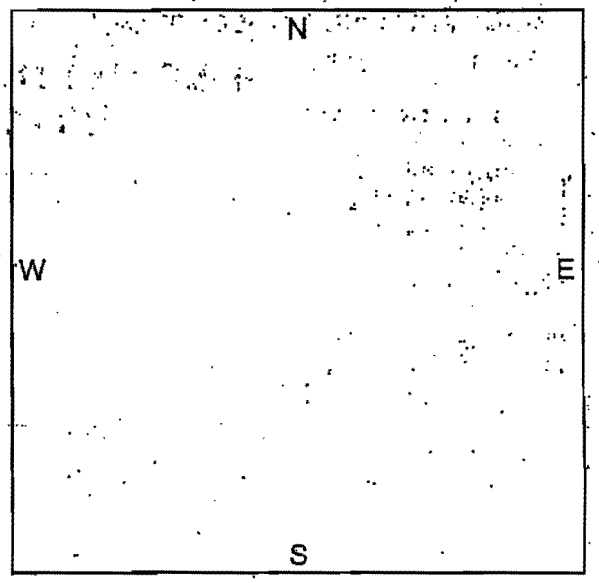
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: ?
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO

46. Is Well location Subject to Flooding? YES NO Explain_____

FLORIDA
UNIQUE WELL ID
AAJ4779

47. REMARKS/NOTES
1½" PVC WELL LOOKS TO BE STILL IN USE
1½" GAL. WELL IS NOT BEING USE NO PUMP ON IT

FLORIDA
UNIQUE WELL ID
AAJ4778

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

03

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAS 4780
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 749 E. GORRIE DR
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: 10/20/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10/20/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 08.20

GPS LONGITUDE: 84 50 41.17

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: 2
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

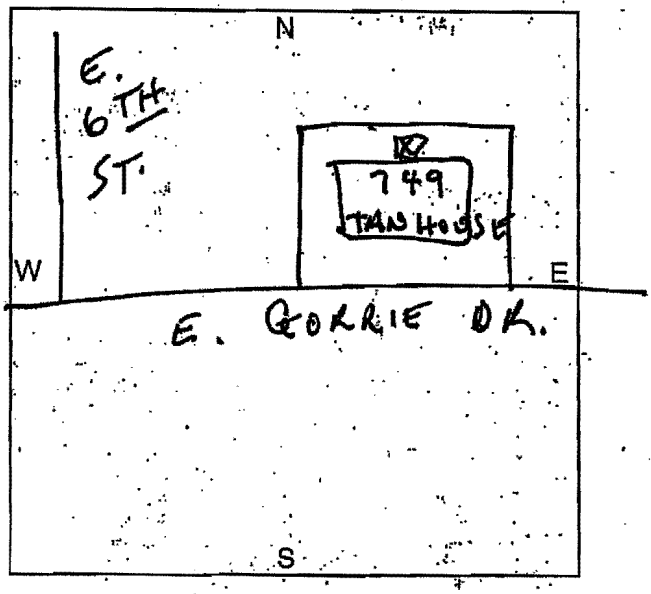
32. Screened Length: _____

33. Screened Intervals: _____

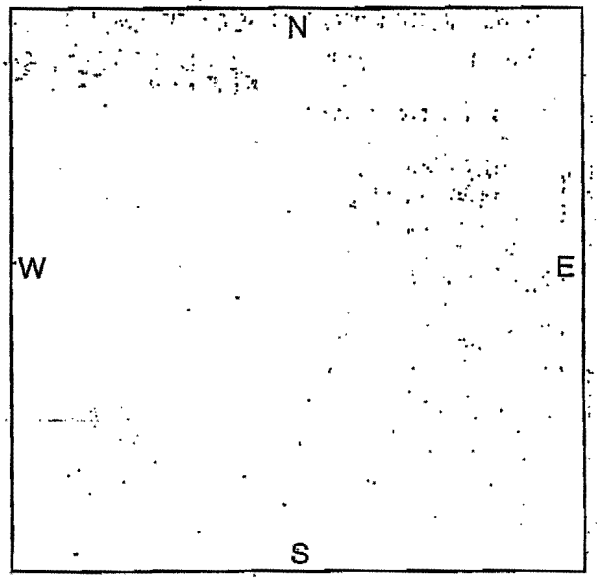
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4780

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

83

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4781
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: CHARLOTTE JAMES
12. Mailing Address: 257 E. GORRIE DR.

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____

City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: J.E.B.
AGENCY: _____
DATE: 10/20/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: J.E.B.
AGENCY: _____
DATE: 10/20/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 08.54

GPS LONGITUDE: 84 50 39.58

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: 7
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

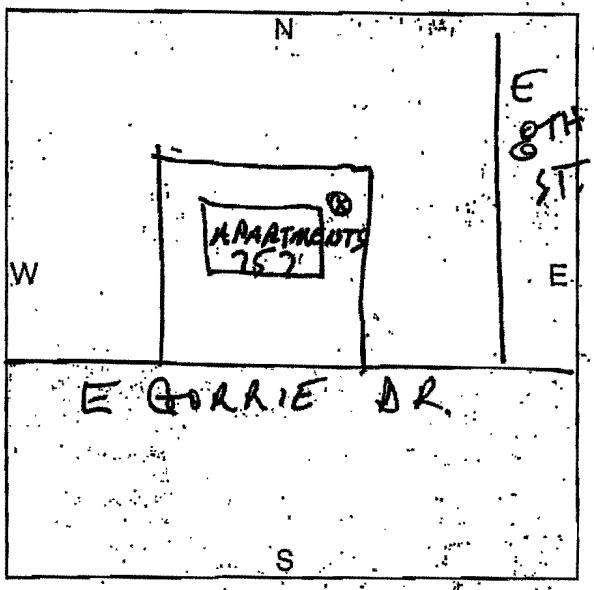
32. Screened Length: _____

33. Screened Intervals: _____

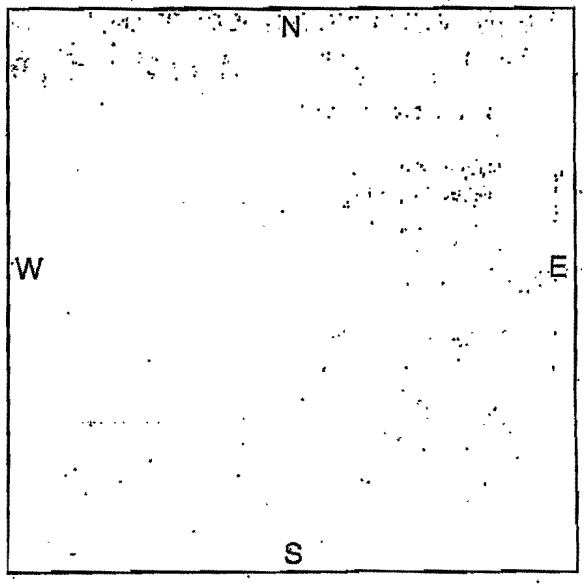
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
WELL HAS NO PUMP ON IT NOT BEING USED

FLORIDA
UNIQUE WELL ID
AAJ4781

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 84

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4777
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

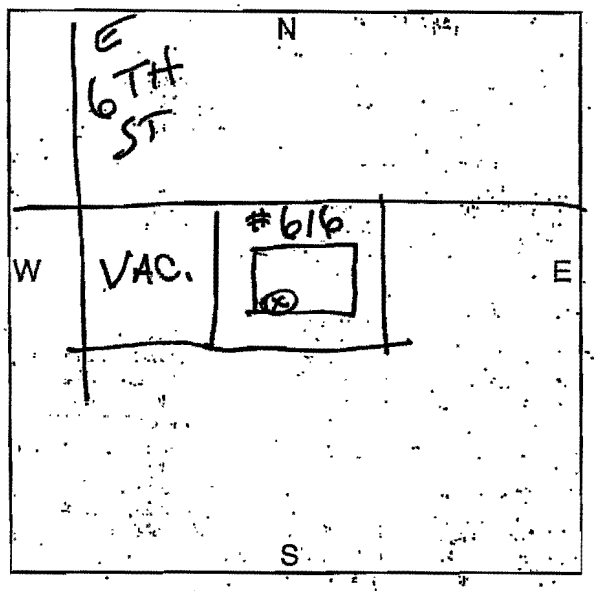
11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. WELL ADDRESS (Location): 616 E. GULF BCH.
City: _____
Zip: _____
County: _____ Phone: _____
14. SCHEDULE FILLED OUT BY:
NAME: CJEB
AGENCY: _____
DATE: 10/19/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: CJEB
AGENCY: _____
DATE: 10/19/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 03.84
GPS LONGITUDE: 84 50 58.09

WELL INFORMATION
(Information in this column should be filled out if possible)

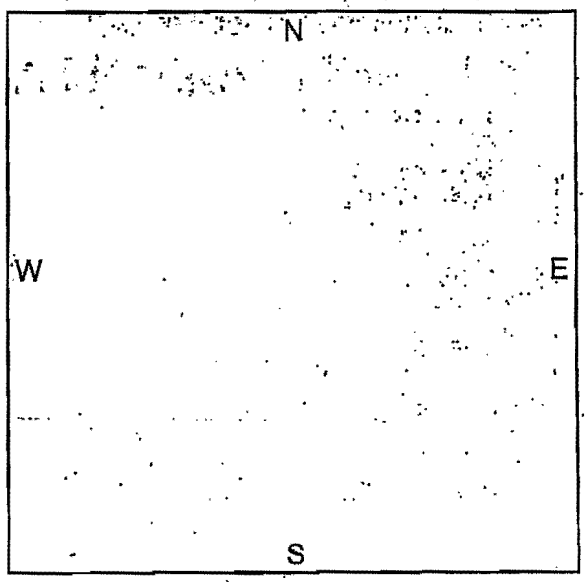
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4777

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 85

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4765
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

SUNCOAST REALTY
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: 927-2282
13. WELL ADDRESS (Location): YELLOW HOUSE ON E. SIDE OF E. 11TH ST ON CORNER OF E. GORRIE & E. 11TH ST.
City: _____
Zip: _____
County: _____ Phone: _____

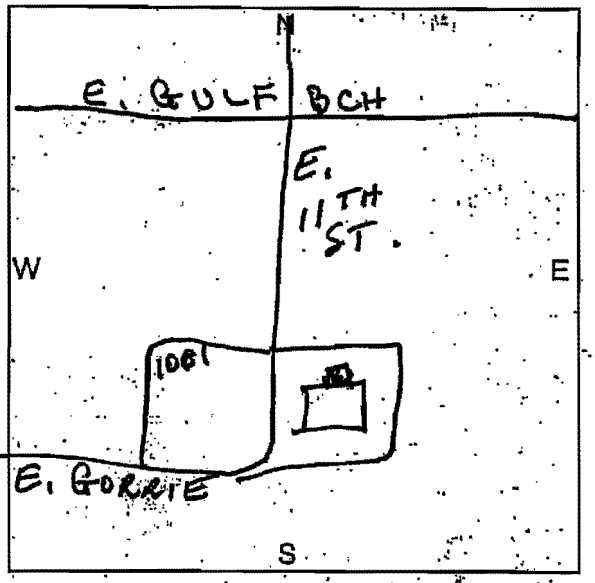
14. SCHEDULE FILLED OUT BY:
NAME: T. E. B.
AGENCY: _____
DATE: 10/19/08 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: T.E.B.
AGENCY: _____
DATE: 10/19/08 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 21.10
GPS LONGITUDE: 84 49 56.94

WELL INFORMATION
(Information in this column should be filled out if possible)

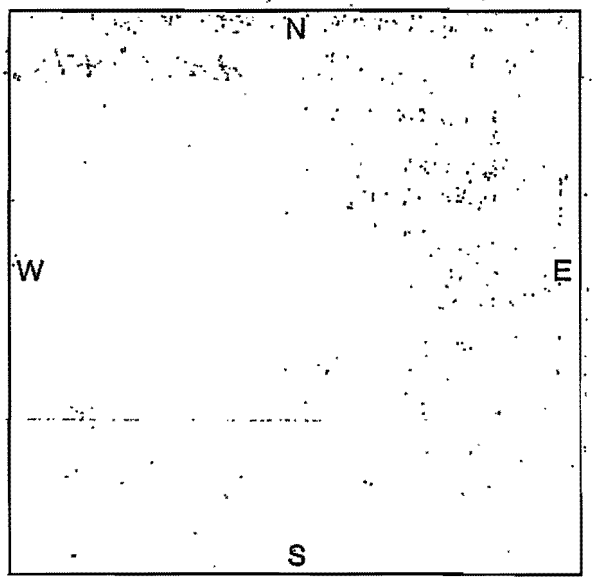
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAJ4765

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4766
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. **WELL ADDRESS (Location):** _____
1041 E. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

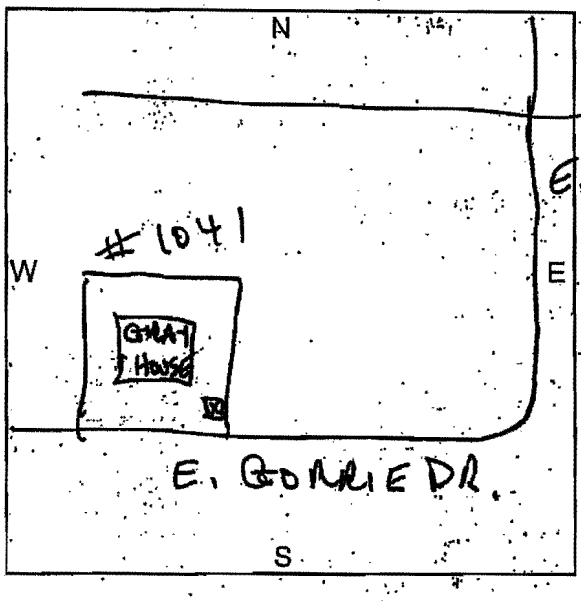
14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 10/19/05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/19/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 18.59
GPS LONGITUDE: 84 50 03.86

WELL INFORMATION
(Information in this column should be filled out if possible)

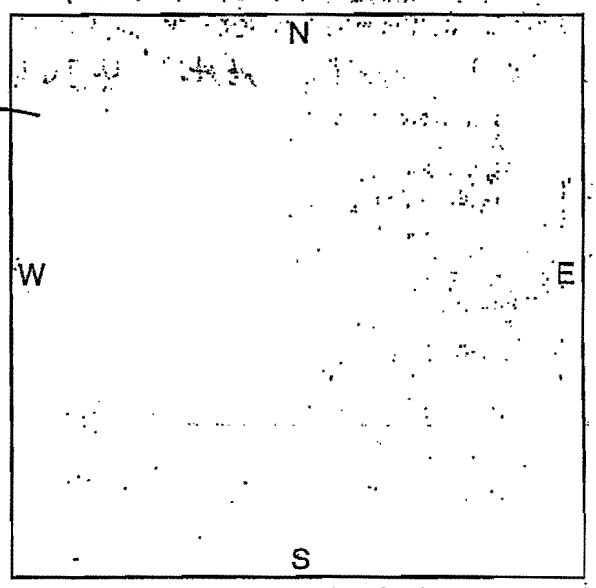
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4766

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

87

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4767
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

COLLINS VAC. RENTALS
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: 927-2900

13. WELL ADDRESS (Location): _____
1024 E. GORRIE DR
City: GULF BREEZE OR NAVARRE
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: 10/19/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10/19/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 17.05

GPS LONGITUDE: 84 50 06.12

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

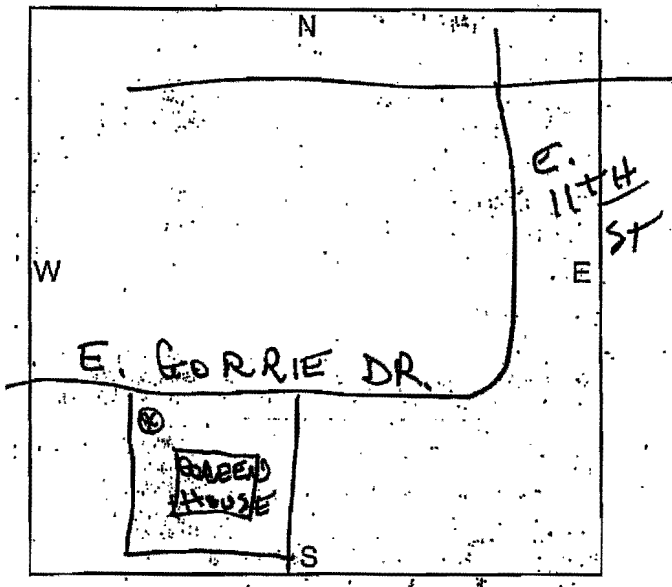
32. Screened Length: _____

33. Screened Intervals: _____

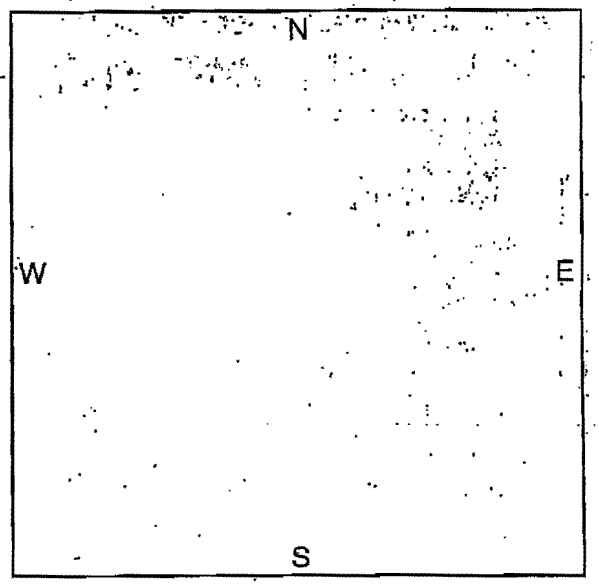
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4767

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 88

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAS 4768
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

ANCHOR REALTY
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** 927-4010

13. **WELL ADDRESS (Location):** _____
1016 E. GORRIE DR.
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: GENE
AGENCY: _____
DATE: 10/19/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: GENE
AGENCY: _____
DATE: 10/19/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 16.85
GPS LONGITUDE: 84 50 06.42

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

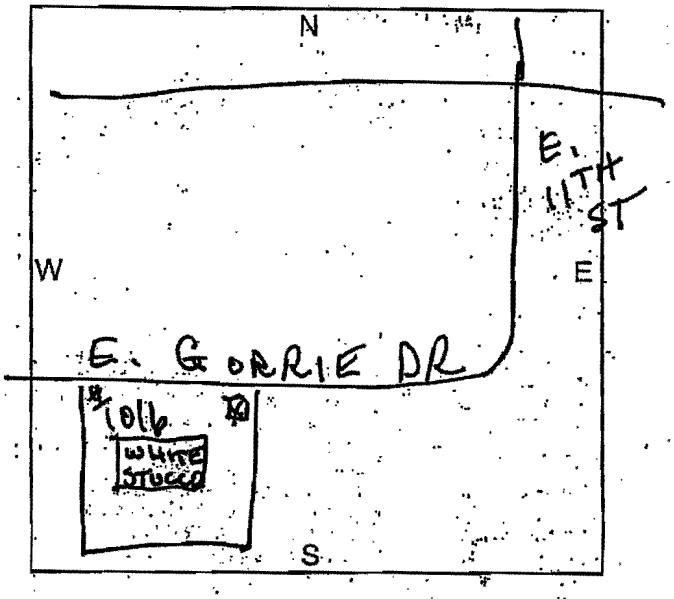
32. Screened Length: _____

33. Screened Intervals: _____

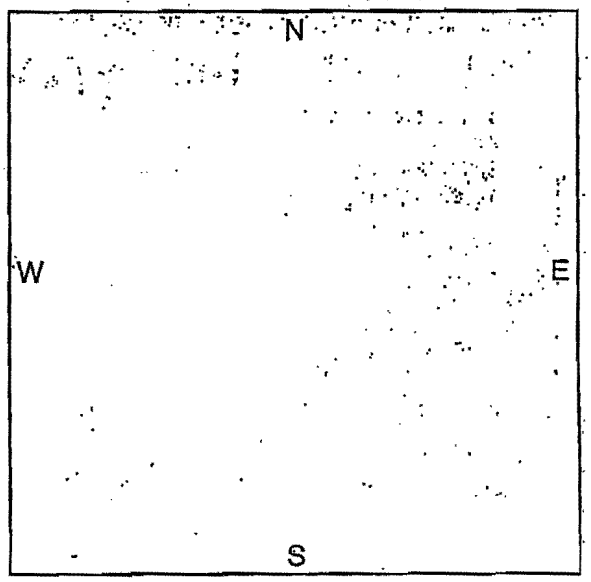
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4768

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

89

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4769
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): YELLOW HOUSE ON PILINGS
    1009 E. GORRIE DR
    City: _____
    Zip: _____
    County: _____ Phone: _____

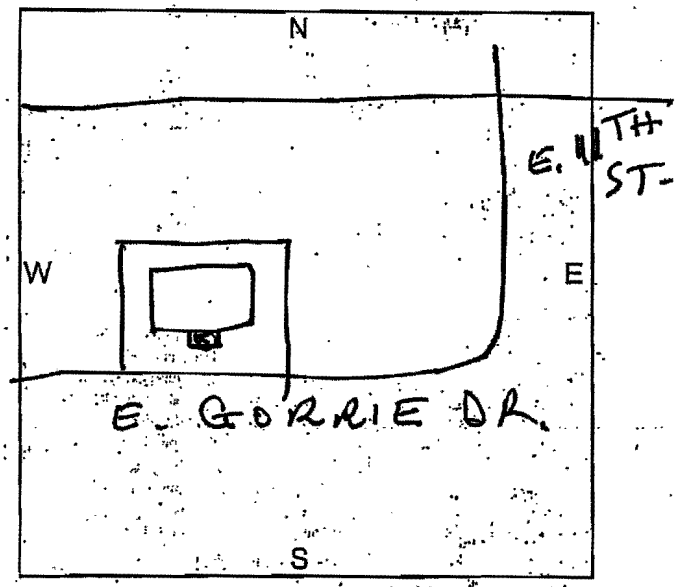
14. SCHEDULE FILLED OUT BY:
    NAME: [illegible]
    AGENCY: _____
    DATE: 10/19/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: [illegible]
    AGENCY: _____
    DATE: 10/19/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 17.47
    GPS LONGITUDE: 84 50 08.02

WELL INFORMATION
(Information in this column should be filled out if possible)

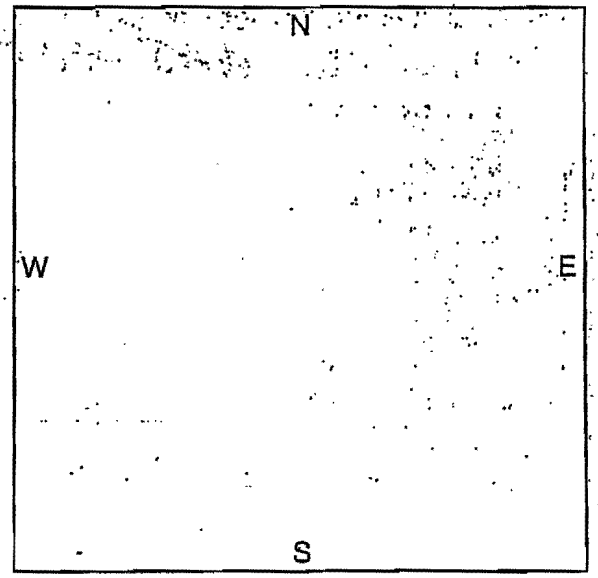
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: G
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totalizing Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4769



STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

90

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4770
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: SUNCOAST REALTY
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: 927-2282

13. WELL ADDRESS (Location): _____
1000 E. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: GEB
AGENCY: _____
DATE: 10/19/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: GEB
AGENCY: _____
DATE: 10/19/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 15.95

GPS LONGITUDE: 84 50 09.72

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Multi Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: ?
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: ? 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

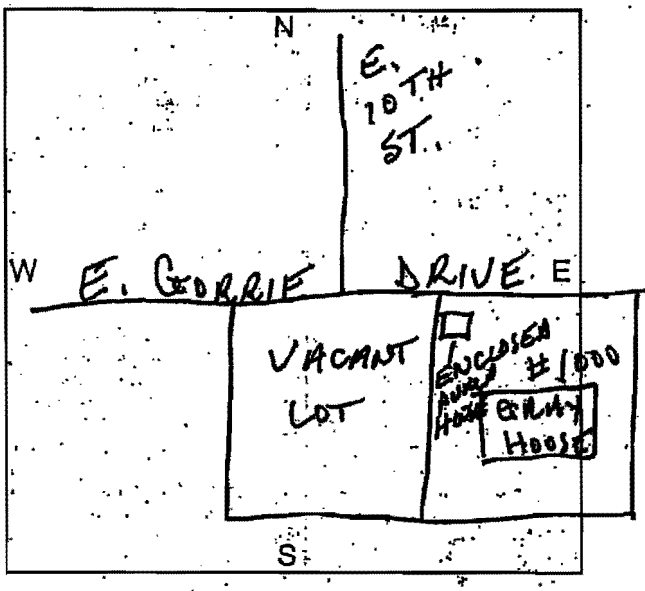
32. Screened Length: _____

33. Screened Intervals: _____

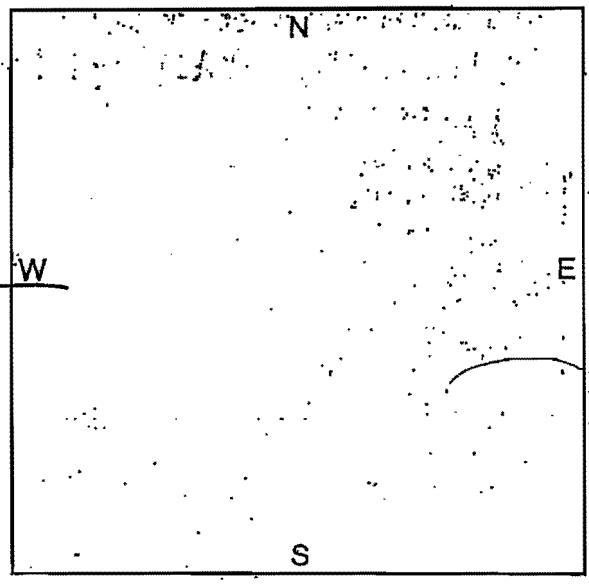
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
UNABLE TO CHECK INSIDE OF PUMP HOUSE I DON'T KNOW IF WELL IS ACTIVE OR NOT.

FLORIDA
UNIQUE WELL ID
AAJ4770

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

91

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAJ 4771
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS** (Location): 949 E. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: GZB
AGENCY: _____
DATE: 10/19/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: GZB
AGENCY: _____
DATE: 10/19/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 15.17
GPS LONGITUDE: 84 50 15.28

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: UR
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

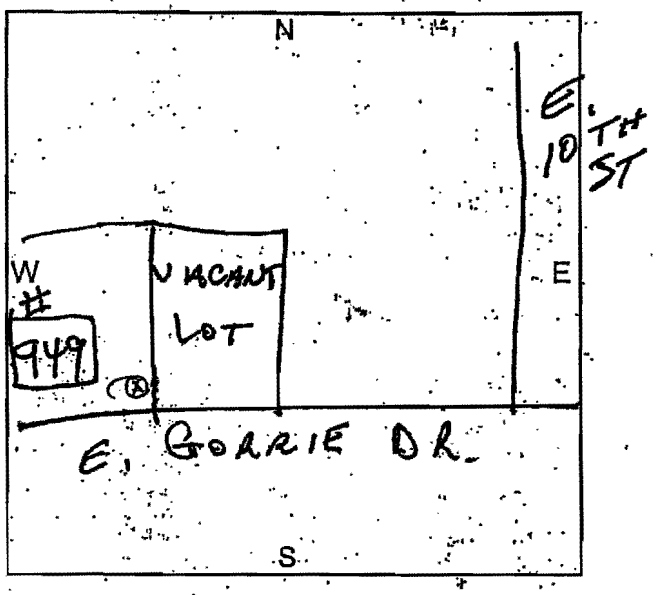
32. Screened Length: _____

33. Screened Intervals: _____

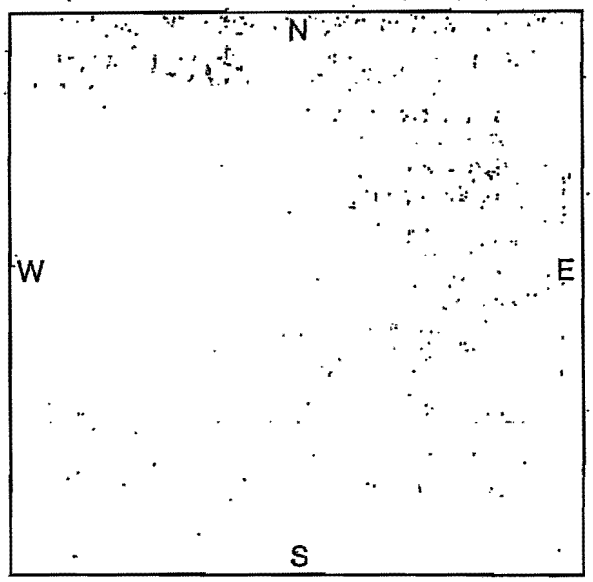
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4771

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. HAJ 4772
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
949 E. GORDIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: G.E.B.
AGENCY: _____
DATE: 10/19/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: G.E.B.
AGENCY: _____
DATE: 10/19/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 14.88

GPS LONGITUDE: 84 50 16.14

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Multi Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

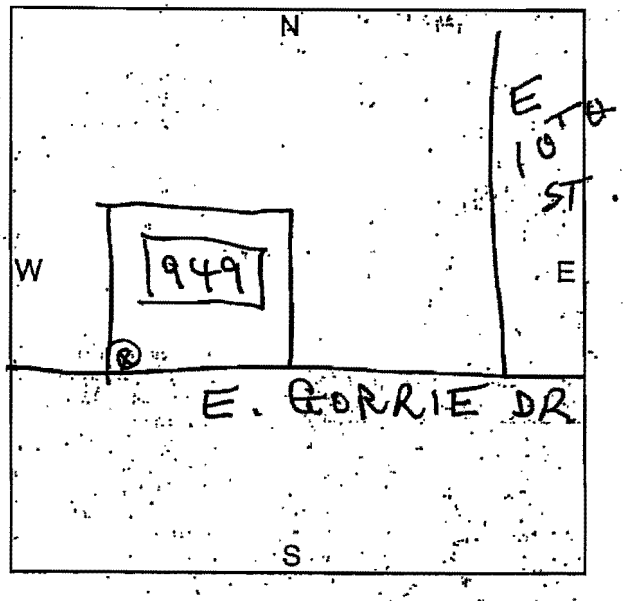
32. Screened Length: _____

33. Screened Intervals: _____

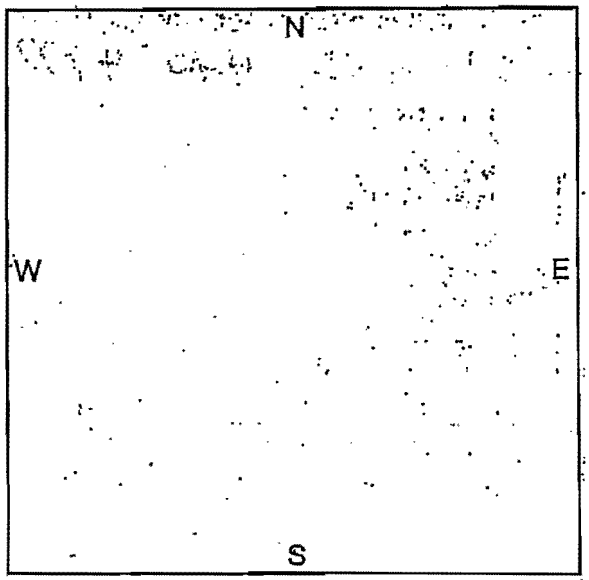
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
PUMP DISCONNECTED FROM WELL

FLORIDA
UNIQUE WELL ID
AAJ4772

STATE OF FLORIDA

92

WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4723
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

BROWN/GRAY HOUSE
13. WELL ADDRESS (Location): 948 E. GORRIE DR.

City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: G.E. Boyett
AGENCY: _____
DATE: 10/19/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10/19/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 14.03

GPS LONGITUDE: 84 50 14.10

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

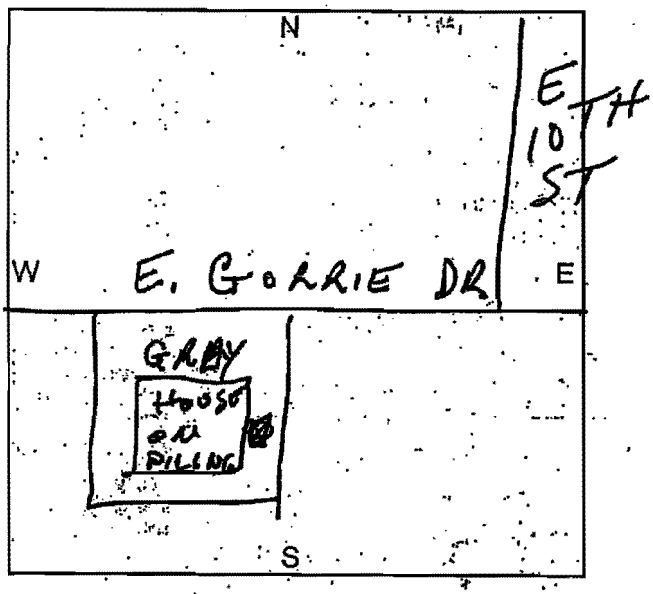
32. Screened Length: _____

33. Screened Intervals: _____

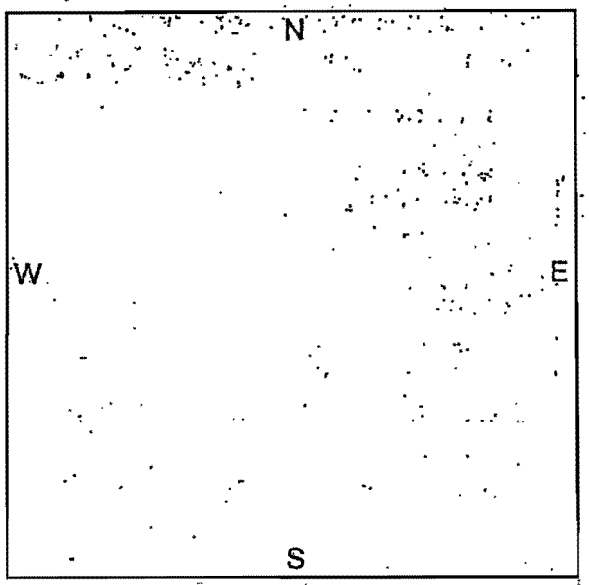
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
WELL INSIDE OF ENCLOSED HOUSE
COULD NOT VIEW PUMP & WELL

FLORIDA
UNIQUE WELL ID
AAJ4773

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

93

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAS 4774
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

COLLINS VAC. RENTALS
11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 946 E. GORRIE DR.
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: J.C.B.
AGENCY: NWFWMD
DATE: 10/19/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: J.C.B.
AGENCY: NWFWMD
DATE: 10/19/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 14.09

GPS LONGITUDE: 84 50 15.53

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

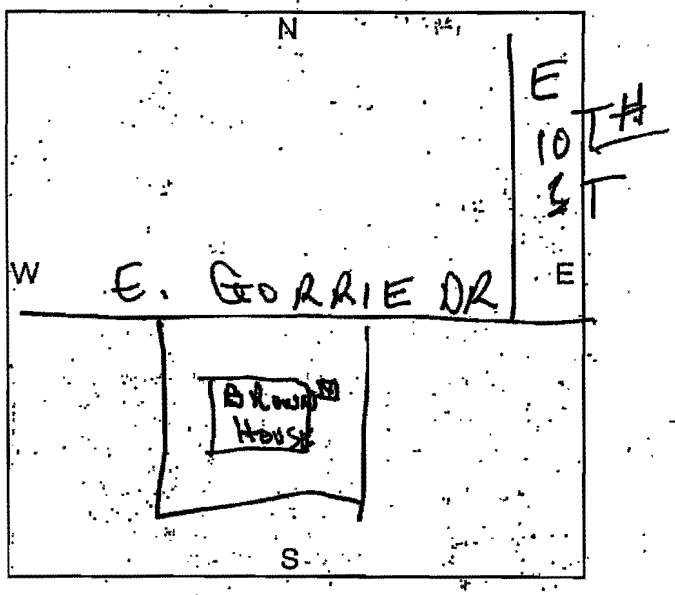
32. Screened Length: _____

33. Screened Intervals: _____

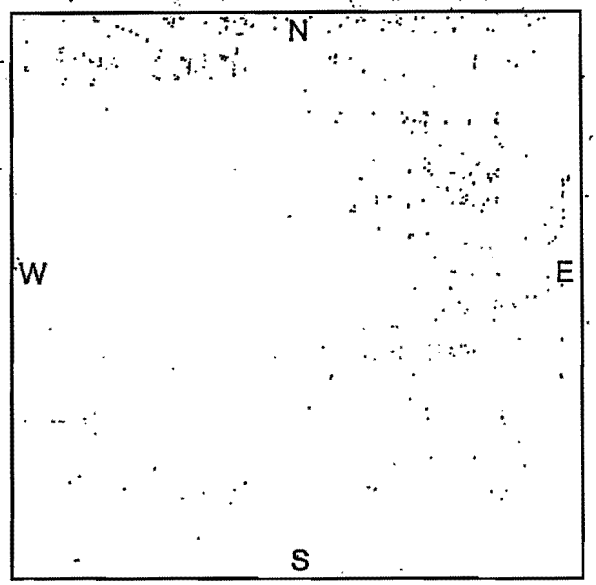
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4774

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

94

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4775
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: COLLINS VAC. RENTALS
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: 922-2900
13. WELL ADDRESS (Location): 924 E. GORRIE DR
City: _____
Zip: _____
County: _____ Phone: _____

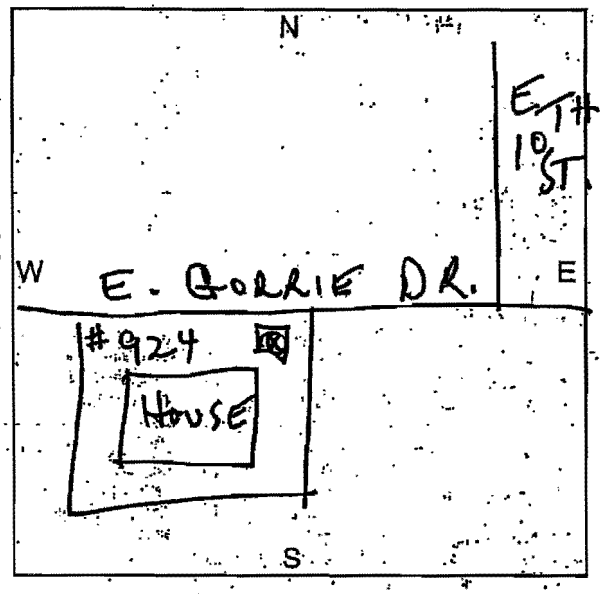
14. SCHEDULE FILLED OUT BY:
NAME: G. E. P.
AGENCY: _____
DATE: 10/19/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: G. E. P.
AGENCY: _____
DATE: 10/19/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 30 40 13.32
GPS LONGITUDE: 84 50 18.14

WELL INFORMATION
(Information in this column should be filled out if possible)

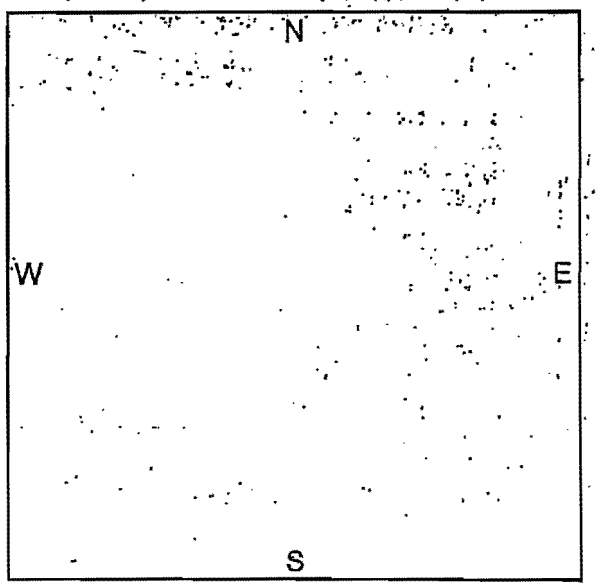
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4775

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

95

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4776
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

RESORT VAC. PROPERTIES
11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: 866 927-2322
13. WELL ADDRESS (Location): 909 E. GORRIE DR
City: _____
Zip: _____
County: _____ Phone: _____

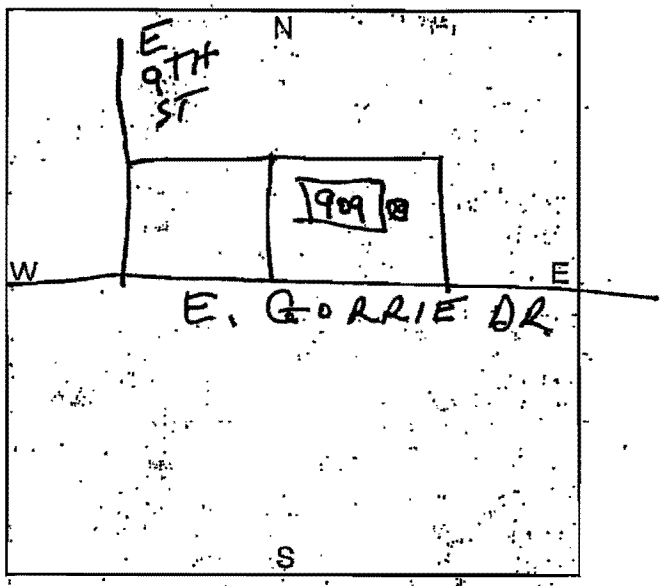
14. SCHEDULE FILLED OUT BY:
NAME: [illegible]
AGENCY: _____
DATE: 10/19/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: [illegible]
AGENCY: _____
DATE: 10/19/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 13.91
GPS LONGITUDE: 84 50 20.85

WELL INFORMATION
(Information in this column should be filled out if possible)

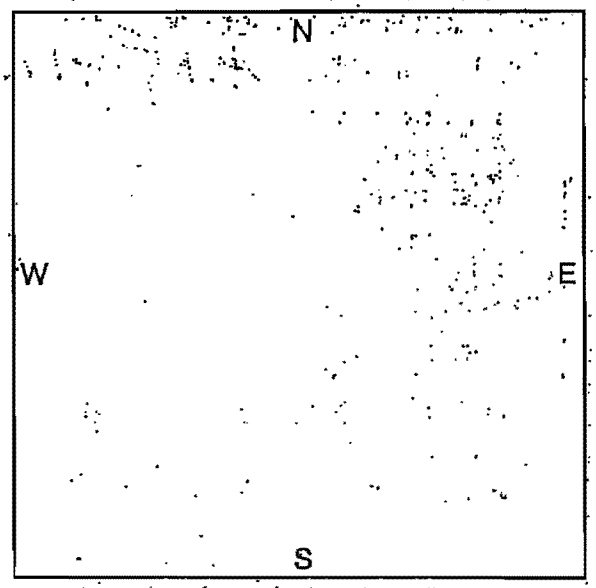
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball/Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4776

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

96

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. No Tag
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (If any):
9. SYSTEM NAME (If any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

    Altitude ____ 7.5 Minute Quad ____

11. OWNER'S NAME:
12. Mailing Address:

    City:
    State: Zip:
    County: Phone:

13. WELL ADDRESS (Location): Weatherwood #4
    516 E. Gorrie Street
    City: St George Island
    Zip:
    County: Phone: 866-927-2322

14. SCHEDULE FILLED OUT BY:
    NAME: Tom Brow
    AGENCY: NWFWMD
    DATE: 10-17-05 PHONE:

15. GPS INFORMATION PROVIDED BY:
    NAME:
    AGENCY:
    DATE: PHONE:

    DATUM: WGS-84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

    GPS LATITUDE: 293957.19

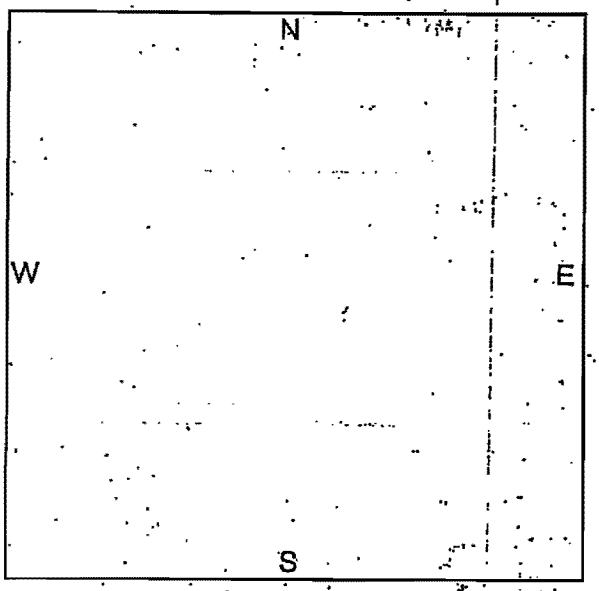
    GPS LONGITUDE: 845107.36

WELL INFORMATION
(Information in this column should be filled out if possible)

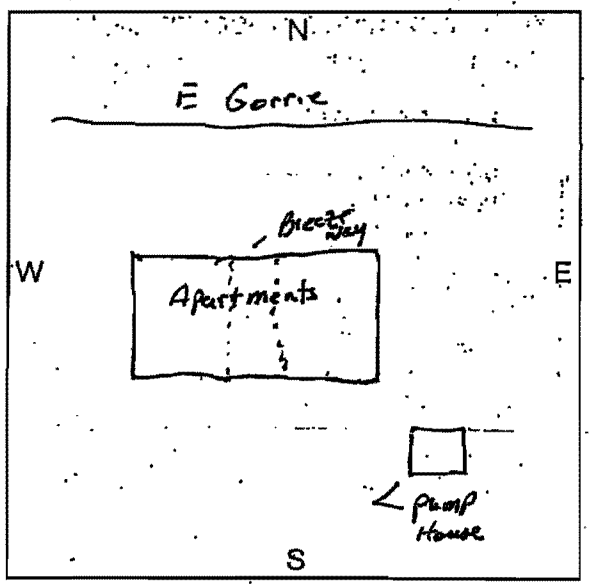
16. Method of Construction: ?
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: ?
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: ?
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield:
24. Method of Measurement:
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels:
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement:
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: ? 28. Well Depth:
29. Depth of Casing:
30. Source of Well Information:
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: ?
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length:
33. Screened Intervals:
34. Finish: S
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Well not in use - could not access inside of pump house - door buried partially by Sand.

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

97

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

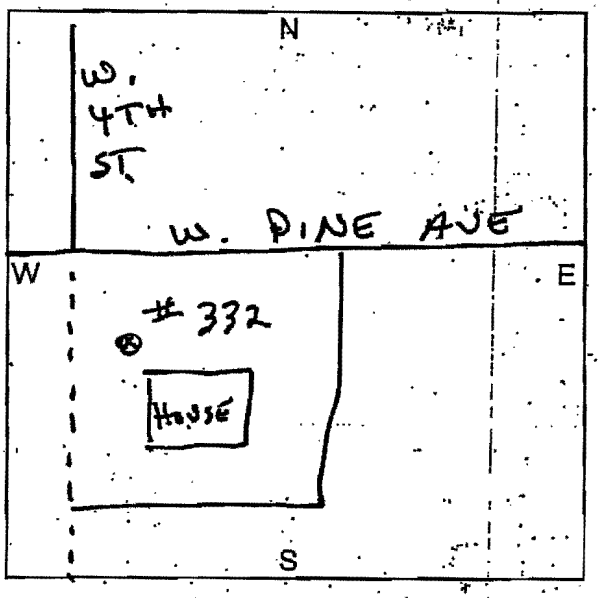
1. FLORIDA UNIQUE I.D. NO TAG
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS (Location):** #332 W. PINE AVE.
    City: _____
    Zip: _____
    County: _____ Phone: _____
14. **SCHEDULE FILLED OUT BY:**
    NAME: [illegible]
    AGENCY: _____
    DATE: 10/12/05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: [illegible]
    AGENCY: _____
    DATE: 10/12/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 39 42.40
    GPS LONGITUDE: 84 52 08.81

WELL INFORMATION
(Information in this column should be filled out if possible)

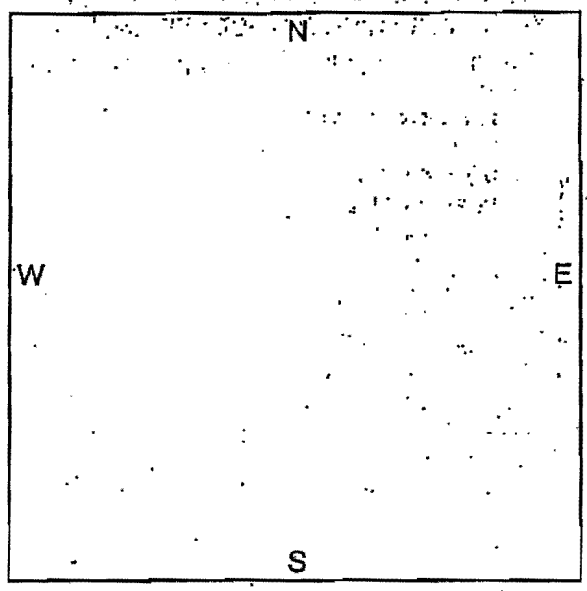
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: N
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
THIS WELL DOES NOT HAVE A PUMP ON IT BUT IT IS CAPPED.

Place Tag Here

98

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** _____
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** BUCCANEER INN
12. **Mailing Address:** ~~420~~ W. GORRIE 160
City: _____
State: _____ **Zip:** _____
County Code: _____ **Phone:** _____

13. **WELL ADDRESS** (location): SAME
City: _____
Zip: _____
County Code: _____ **Phone:** _____

14 **SCHEDULE FILLED OUT BY:**
NAME: JIE. BRIGHT
AGENCY: _____
DATE: 10/11/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: TOM SHEPARD
AGENCY: _____
DATE: 10/11/05 PHONE: _____
DATUM: _____ (Default WGS 84)
ESTIMATED ACCURACY: _____ (<1, 1-3, 3-5, > 5 meters)
GPS LATITUDE: 29 39 40.98
GPS LONGITUDE: 84 51 51.88

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO- Monitor; NA - Navigation; NI - Nursery-Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

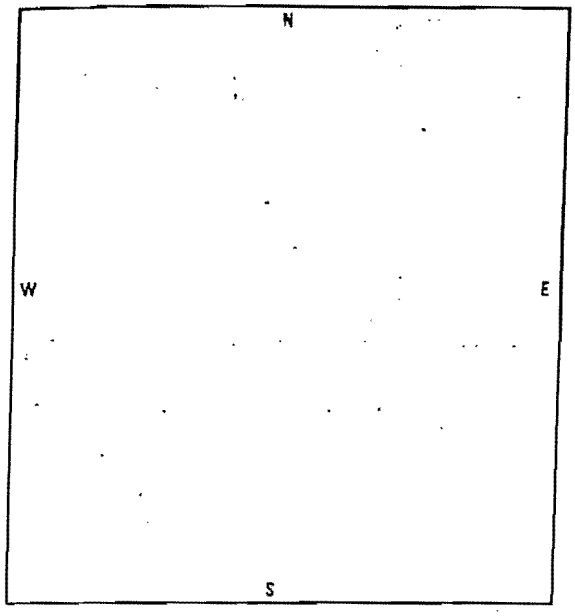
27 Diameter: 2" 28 Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31 Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

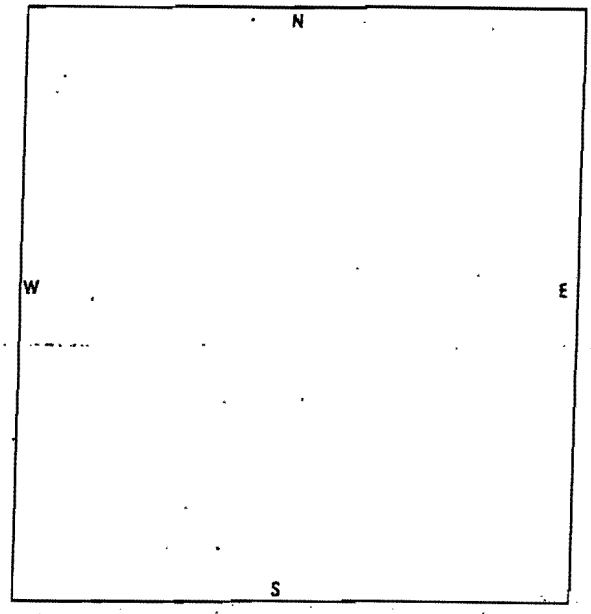
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43 Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain_____

46. Is Well Location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____
_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAK0226

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** _____
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** BUCCANEER INN
12. **Mailing Address:** [redacted] US GORRIE
1160
City: _____
State: _____ **Zip:** _____
County Code: _____ **Phone:** _____

13. **WELL ADDRESS** (location): _____
City: _____
Zip: _____
County Code: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/11/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: Tom SHEPARD
AGENCY: _____
DATE: 10/11/05 **PHONE:** _____
DATUM: _____ (Default WGS 84)
ESTIMATED ACCURACY: _____ (<1, 1-3, 3-5, >5 meters)
GPS LATITUDE: 29 39 40.86
GPS LONGITUDE: 84 51 51.90

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery-Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

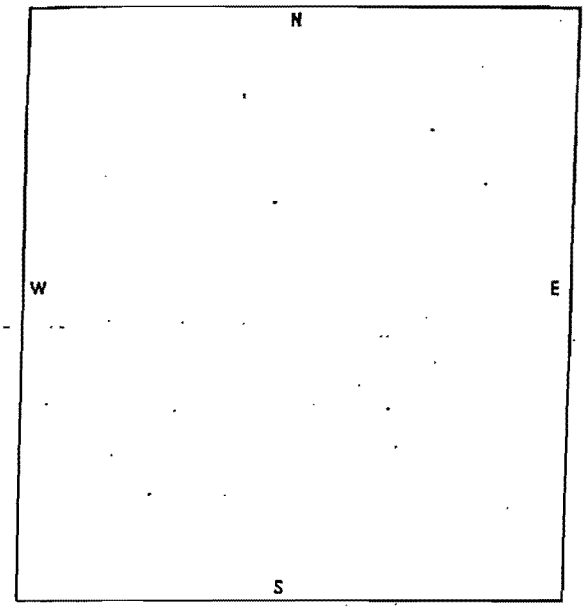
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

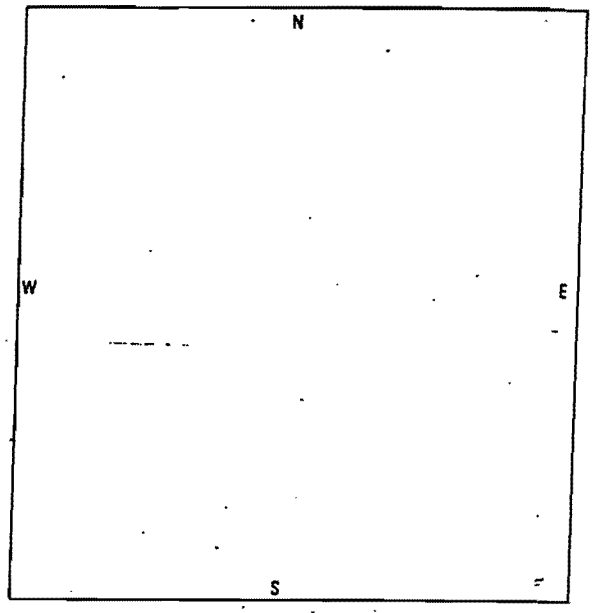
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43 Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain_____

46. Is Well Location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____
_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAK0225

99

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** _____
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___
    T _____ (N or S) **R** _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** ARMISTEAD REALTY
12. **Mailing Address:** 900 W. GORRIE
    City: _____
    State: _____ **Zip:** _____
    County Code: _____ **Phone:** _____
13. **WELL ADDRESS** (location): _____
    City: _____
    Zip: _____
    County Code: _____ **Phone:** _____

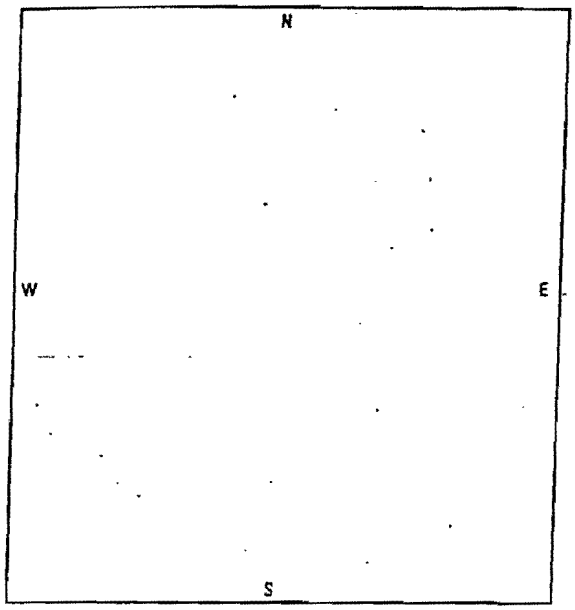
14. **SCHEDULE FILLED OUT BY:**
    NAME: J. E. BRIGHT
    AGENCY: _____
    DATE: 10/11/05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: TOM SHEPARD
    AGENCY: _____
    DATE: 10/11/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    ESTIMATED ACCURACY: _____ (<1, 1-3, 3-5, >5 meters)
    GPS LATITUDE: 29 39 10.46
    GPS LONGITUDE: 845303.62

WELL INFORMATION
(Information in this column should be filled out if possible)

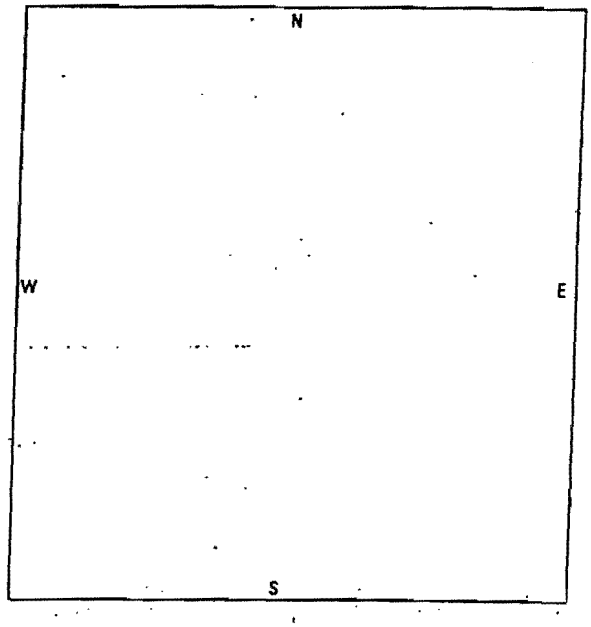
16. Method of Construction: _____
    AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LH
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels:
    A. Measuring Point Distance from Land Surface _____
    B. Water Level below Land Surface _____
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28 Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____

39. Contractor Name _____

40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

_____

_____

_____

_____

_____

FLORIDA
UNIQUE WELL ID
AAK0224

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** _____
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** ARMISTEAD REALTY
12. **Mailing Address:** 900 W. GORRIE

City: _____
State: _____ **Zip:** _____
County Code: _____ **Phone:** _____

13. **WELL ADDRESS** (location): _____

City: _____
Zip: _____
County Code: _____ **Phone:** _____

14 **SCHEDULE FILLED OUT BY:**
NAME: J. E. BRIGHT
AGENCY: _____
DATE: 10/11/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JOHN SHEPARD
AGENCY: _____
DATE: 10/11/05 PHONE: _____

DATUM: _____ (Default WGS 84)
ESTIMATED ACCURACY: _____ (<1, 1-3, 3-5, >5 meters)
GPS LATITUDE: 29 39 10.45
GPS LONGITUDE: 84 53 03.62

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery-Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

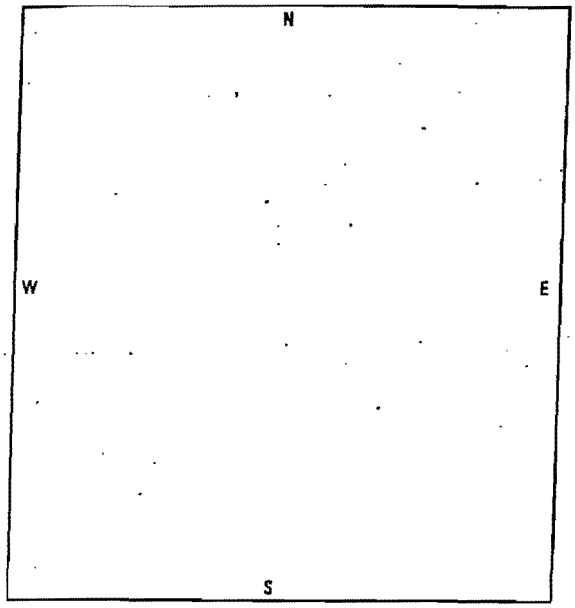
27 Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31 Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

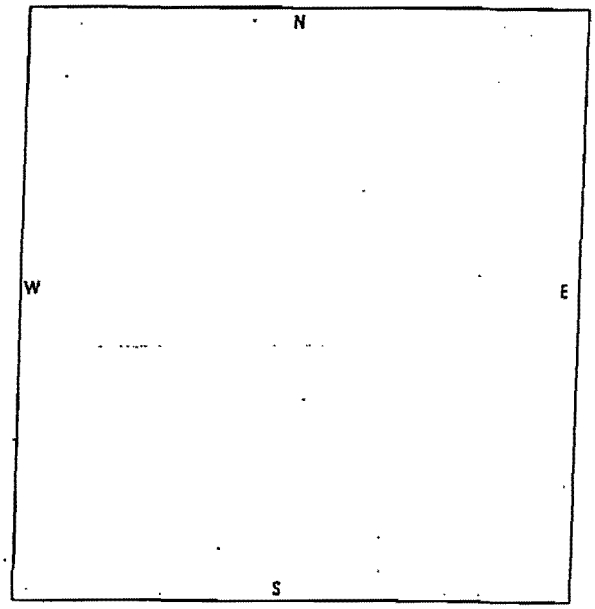
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____

39. Contractor Name _____

40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43 Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

_____

_____

_____

_____

_____

FLORIDA
UNIQUE WELL ID
AAK0223

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

100

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

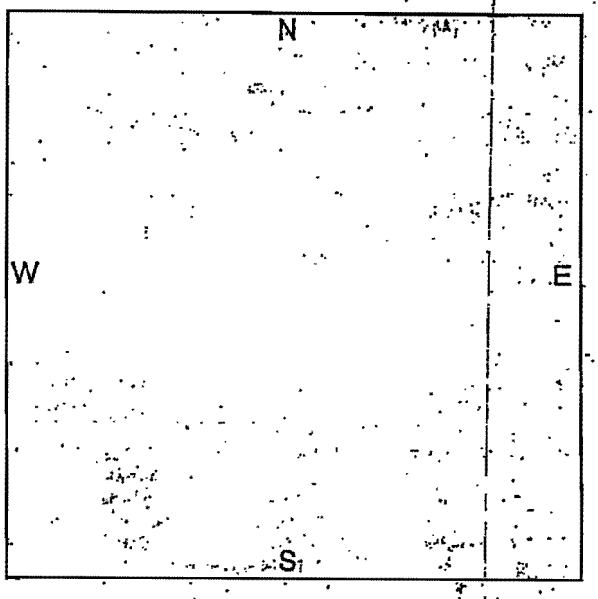
1. FLORIDA UNIQUE I.D. _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): _____
    404 E Gulf Beach
    City: St George Island
    Zip: _____
    County: _____ Phone: _____
14. SCHEDULE FILLED OUT BY:
    NAME: T Brown
    AGENCY: NWFWMD
    DATE: 10-18-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 293959.53
    GPS LONGITUDE: 845120.77

WELL INFORMATION
(Information in this column should be filled out if possible)

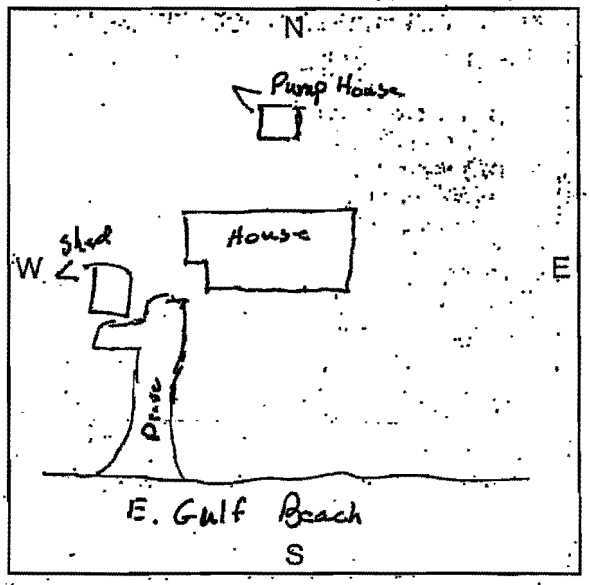
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: _____ 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Pump House locked - No access to well

Place Tag Here

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

101

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): The M House
416 Pine
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-19-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: _____

GPS LONGITUDE: _____

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

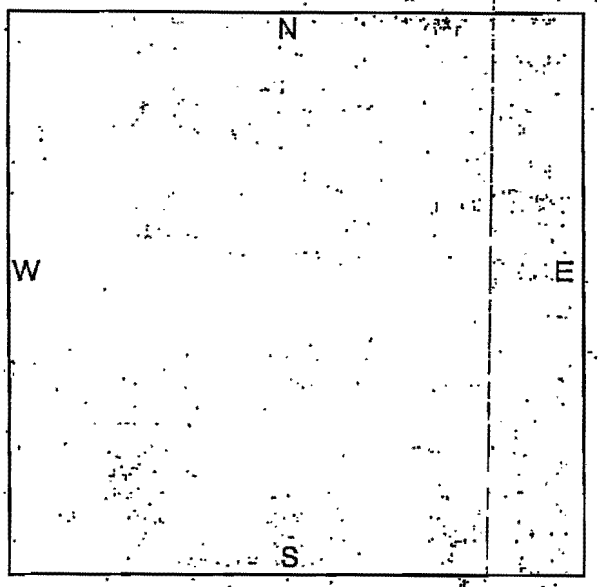
32. Screened Length: _____

33. Screened Intervals: _____

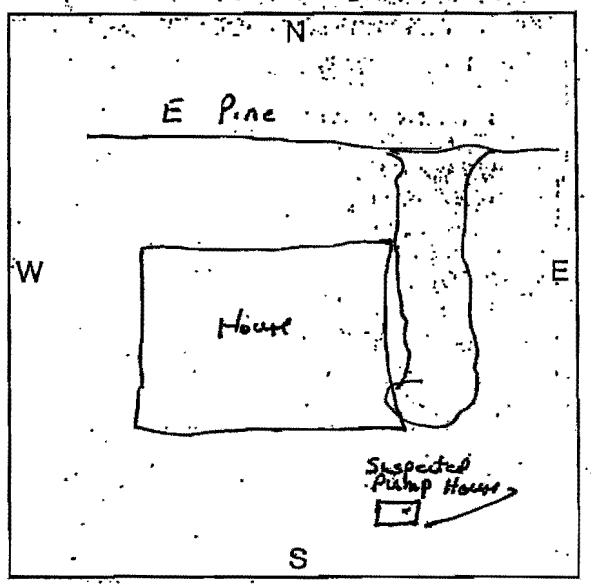
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

162

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** _____
2. NWFWMD CPS I.D.: No permit
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** ?
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 132 Franklin Blv
City: ST. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: _____ PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-10-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 49.34

GPS LONGITUDE: 84 51 50.77

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: JT?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

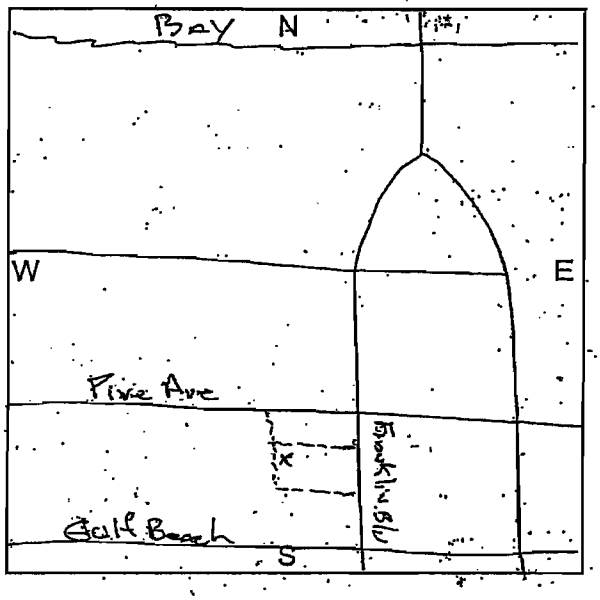
32. Screened Length: _____

33. Screened Intervals: _____

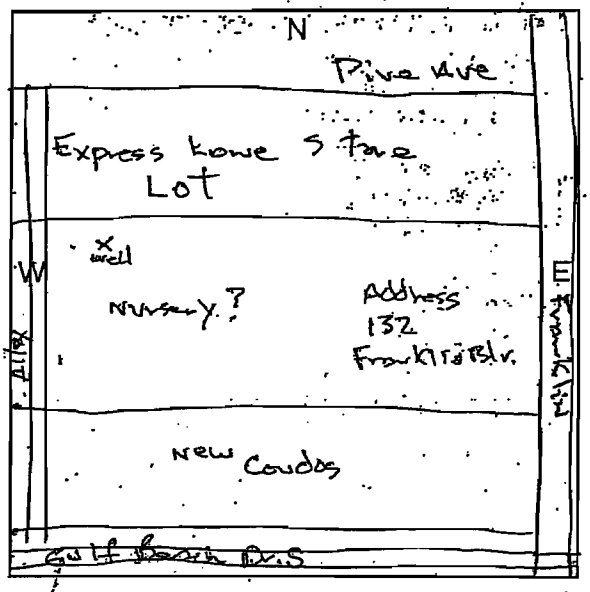
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____
_____
_____
_____
_____

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. _____
2. NWFWMD CPS I.D.: No permit
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: ?
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. WELL ADDRESS (Location): 132 Franklin Blv
City: ST. George Island
Zip: _____
County: Frank Phone: _____

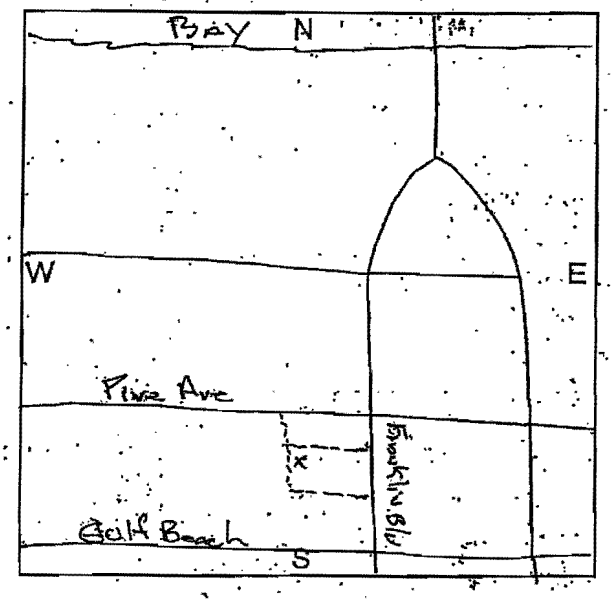
14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: _____ PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10-10-05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 39 49.34
GPS LONGITUDE: 84 51 50.77

WELL INFORMATION
(Information in this column should be filled out if possible)

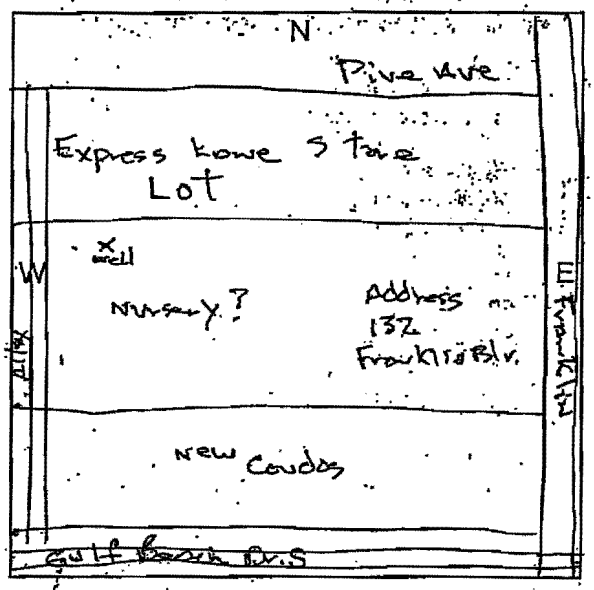
16. Method of Construction: JT?
AU - Air Rotary; AB - Augered/Borad; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____
_____
_____
_____
_____

Place Tag Here

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

102

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Century 21 Collins Realty, Inc.
12. **Mailing Address:** 600 East Gulf Beach Dr.
City: St George Island
State: FL **Zip:** 32328
County: Franklin **Phone:** 927-3100
13. **WELL ADDRESS (Location):** Same
City: _____
Zip: _____
County: _____ **Phone:** _____

4. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-13-05 **PHONE:** _____

GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: _____

GPS LONGITUDE: _____

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1"-2" 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

32. Screened Length: _____

33. Screened Intervals: _____

34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

104

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
E Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-19-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294018.06

GPS LONGITUDE: 845019.54

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

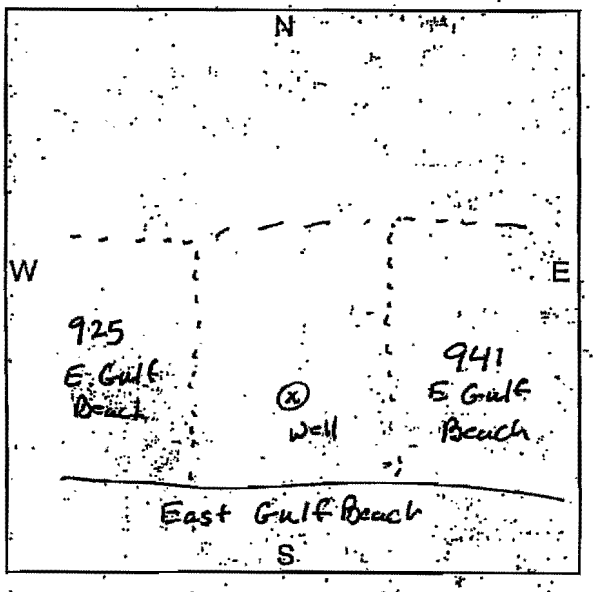
32. Screened Length: _____

33. Screened Intervals: _____

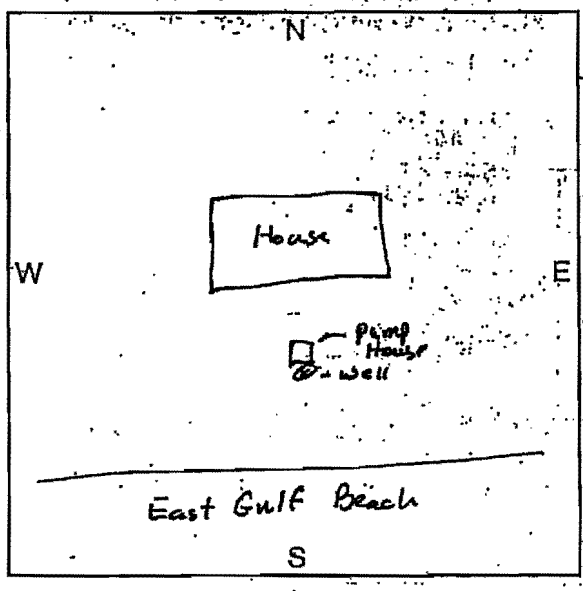
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0776

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

105

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** _____
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** 664 East Pine
City: St. George Island
Zip: _____
County: Franklin **Phone:** _____

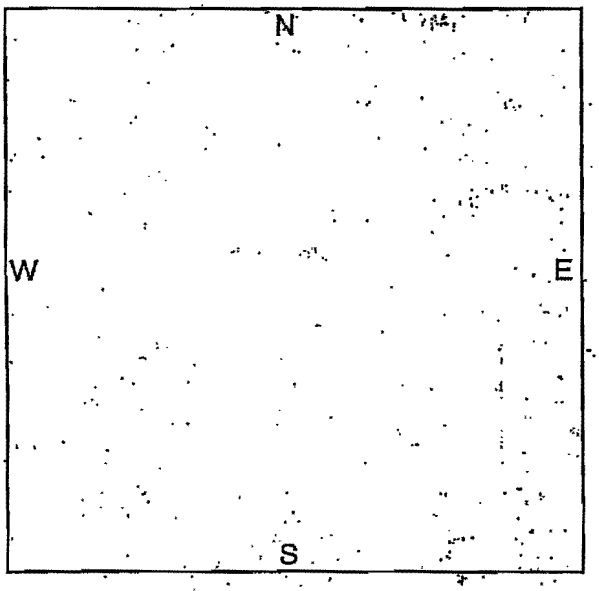
14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-13-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ **PHONE:** _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: N29° 40 09.66
GPS LONGITUDE: W84° 50 55.51

WELL INFORMATION
(Information in this column should be filled out if possible)

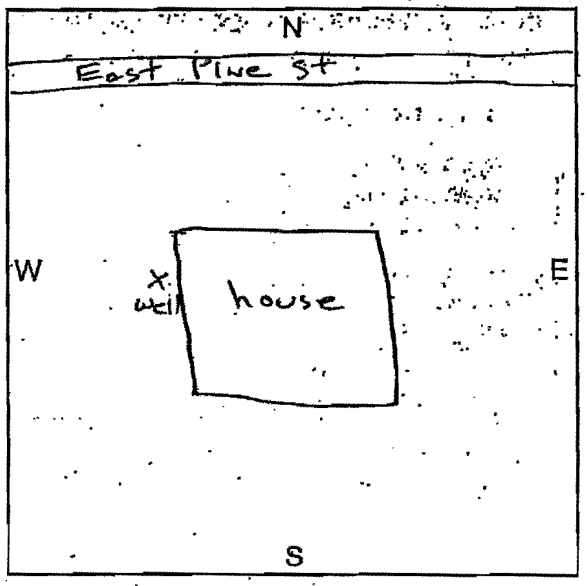
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; (W) Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____ ?
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; (DO) - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; (LA) Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; (N) No Pump; Z - Other
20. Type of Power: _____
D - Diesal; (E) Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
(P - PVC); S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition ____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
X Pump cut off well

FLORIDA
UNIQUE WELL ID
AAK0787

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

IDO

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0200
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Lamar & Margie
12. **Mailing Address:** Sims. 612 Hwy 90
City: Quincy
State: FL **Zip:** 32352
County: 39 **Phone:** _____
13. **WELL ADDRESS** (Location): 816 E. Gulf Beach Dr.
City: St. George Island
Zip: 32328
County: Franklin **Phone:** _____

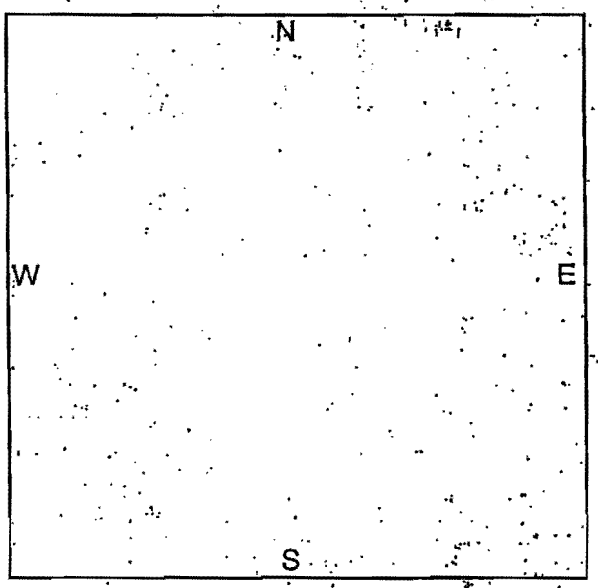
14. **SCHEDULE FILLED OUT BY:**
NAME: Tom Shepard
AGENCY: _____
DATE: 10-5-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-19-05 **PHONE:** _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29401157
GPS LONGITUDE: 84503471

WELL INFORMATION
(Information in this column should be filled out if possible)

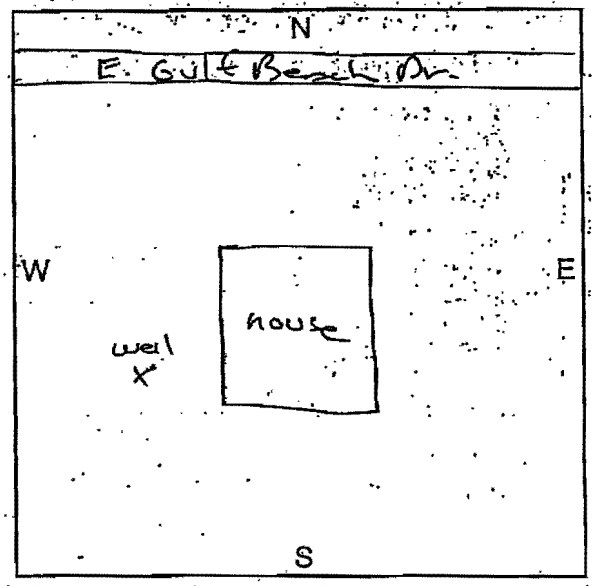
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: DO
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1/2 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name Owner 30 years ago
40. License Number _____

41. Casing Specifications: Standard ✓ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition OK

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Owner wants to know if the Dist has any rules that govern water running off next door neighbors property that just built house to the East. Well has tested salty

FLORIDA
UNIQUE WELL ID
AAK0200

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

107

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0201
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Ray Wester
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS** (Location): Lot 9 Block H. Unit 2 E. Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-19-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-19-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters) 4
GPS LATITUDE: N29°40'14.35
GPS LONGITUDE: W84°50'27.3

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

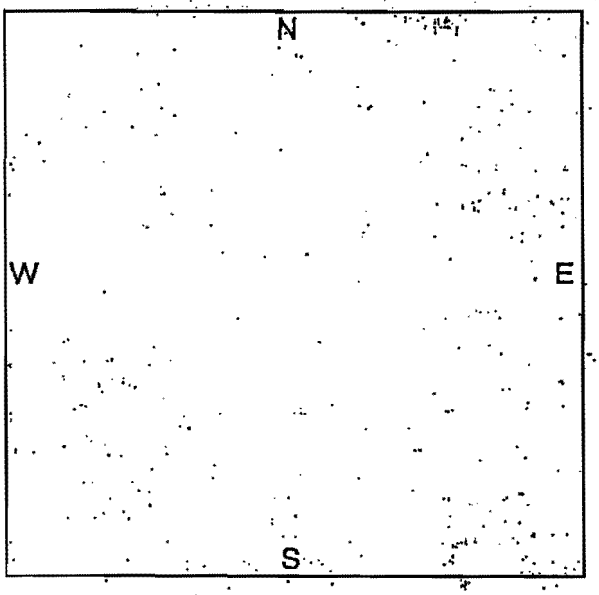
32. Screened Length: _____

33. Screened Intervals: _____

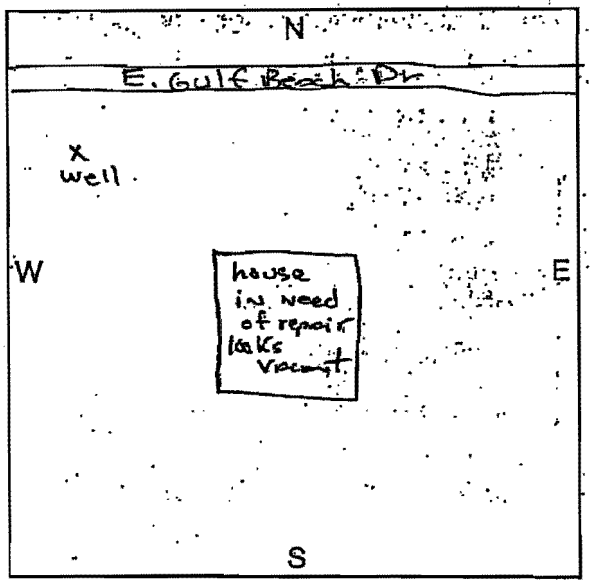
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____
43. Well Seal Condition Open w/ 90 on top

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0201

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

108

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AWK 0202
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** West of 948 E. Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin **Phone:** _____
Sea Shanty
Resort Vacation Properties 866-927-2522

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-19-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-19-05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N 29° 40 17 43

GPS LONGITUDE: W 84° 50 17 34

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

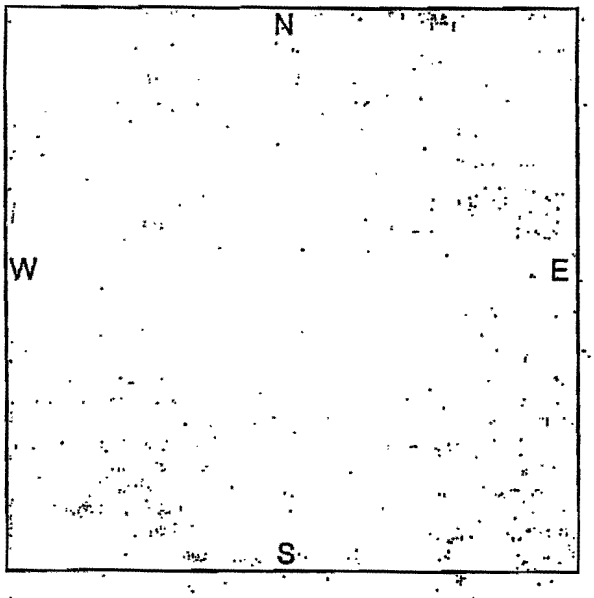
32. Screened Length: _____

33. Screened Intervals: _____

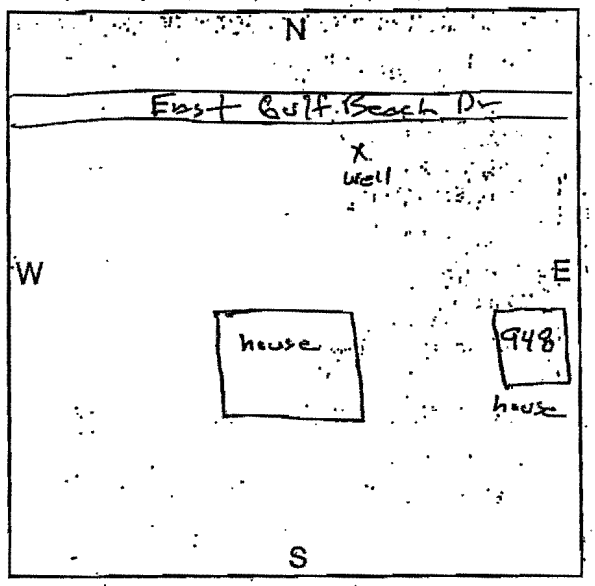
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number
41. Casing Specifications: Standard ✓ Substandard
If Substandard, Explain
42. Properly Grouted?
43. Well Seal Condition OK
44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other
45. Adequate Setbacks from House and/or Septic System? YES NO Explain
46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0202

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

109

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

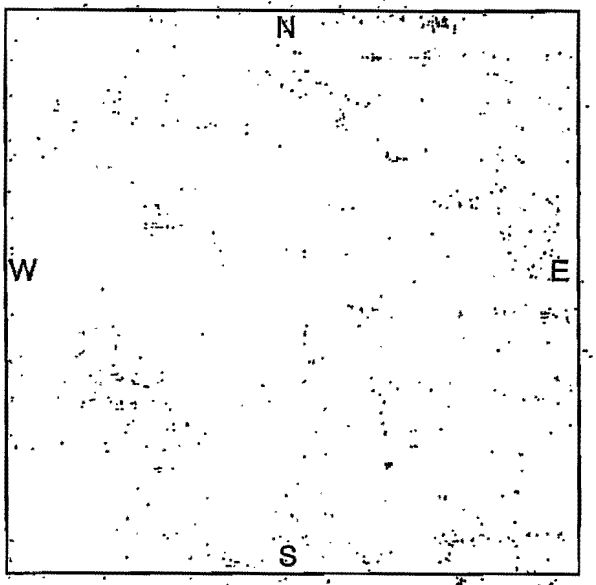
1. FLORIDA UNIQUE I.D. AAK 0203
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T ___ (N or S) R ___ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS (Location):** _____
    964 E. Gulf Beach
    City: St George Island
    Zip: _____
    County: _____ Phone: _____
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Brown
    AGENCY: _____
    DATE: _____ PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-19-05 PHONE: _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 18.40
    GPS LONGITUDE: 84 50 15.04

WELL INFORMATION
(Information in this column should be filled out if possible)

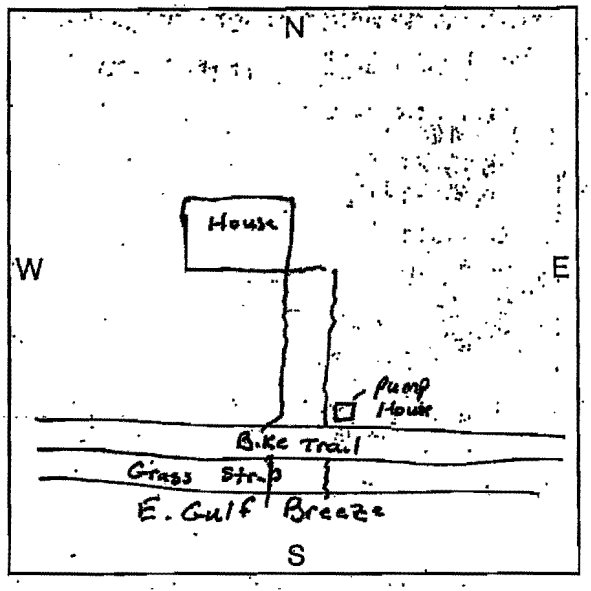
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ___ 22. Pump Intake Depth: ___
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: _____ 28. Well Depth: _____
29. Depth of Casing: ___
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Pump House Is locked- Could not access well

FLORIDA
UNIQUE WELL ID
AAK0203

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

110

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0204
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 1001 E. Gulf Beach Dr
City: St. George Island
Zip: _____
County: Franklin Phone: _____
Alden By The Sea Resort Vacation Properties 866-927-2322

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-18-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-18-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29°40'21.36"

GPS LONGITUDE: W84°50'10.85"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

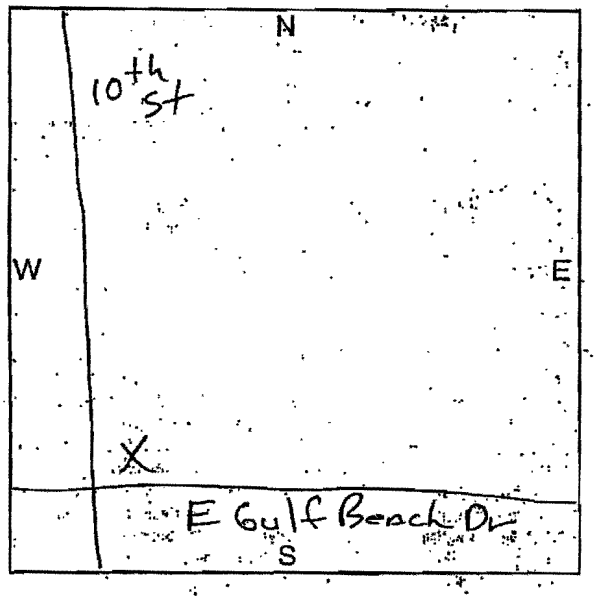
32. Screened Length: _____

33. Screened Intervals: _____

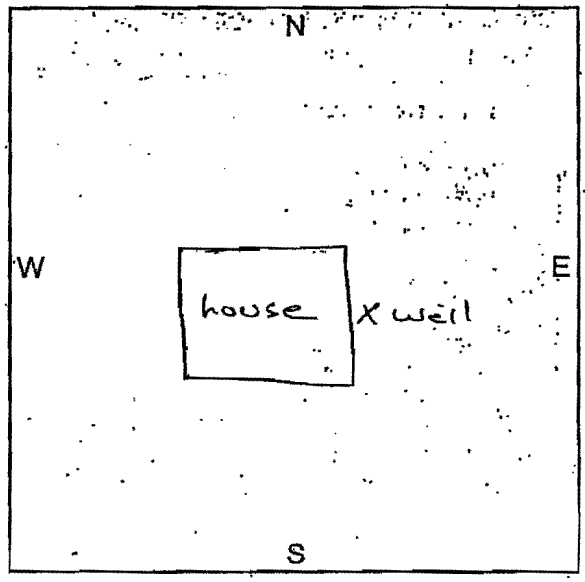
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition OK

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0204

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0205
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 320 Brinkley
City: St. George Island
Zip: _____
County: _____ **Phone:** _____

Sea Star Fishin Inn Collins Vacation Rental 927-2900

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-18-05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-18-05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29°40'31.02"

GPS LONGITUDE: W84° 50' 06.36"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

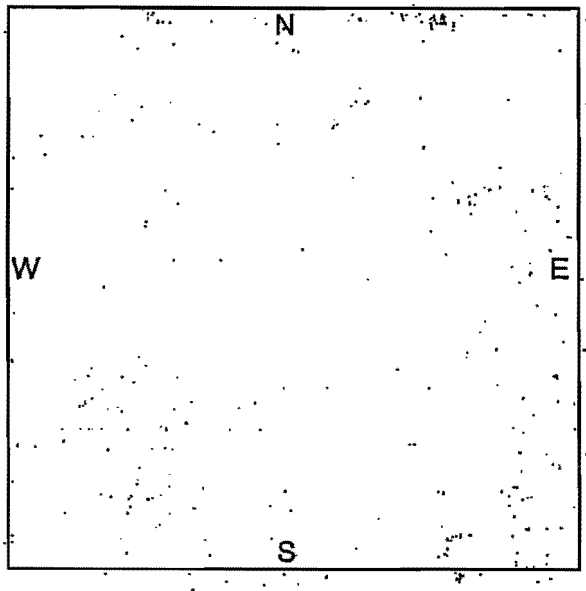
32. Screened Length: _____

33. Screened Intervals: _____

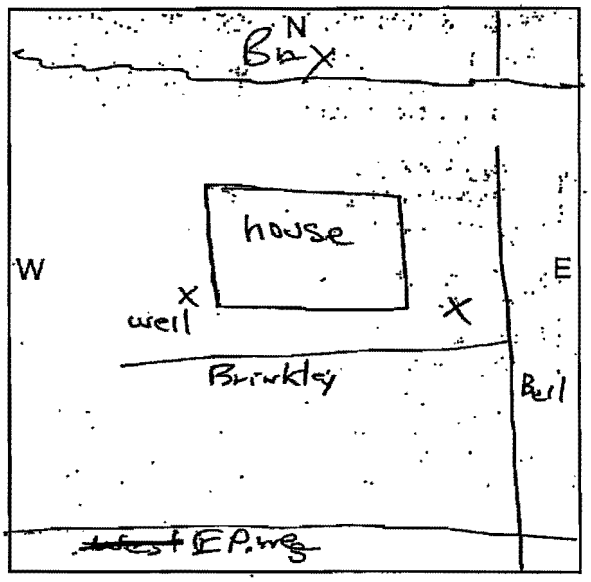
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. /
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain

42. Properly Grouted? _____
43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other

45. Adequate Setbacks from House and/or Septic System? YES NO Explain

46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0205

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

112

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

2 wells

1. **FLORIDA UNIQUE I.D.** AAK0206
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 1065 Brinkley
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: Tom Shepard
AGENCY: _____
DATE: 10-18-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-18-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29°40'30.88"

GPS LONGITUDE: 84°50'06.50"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

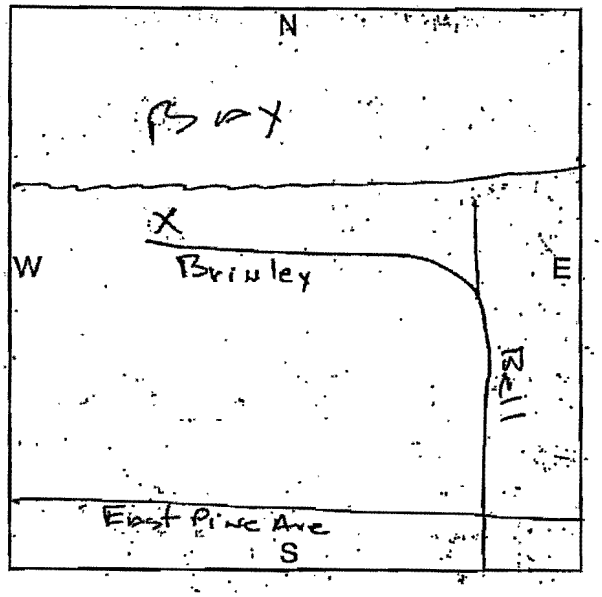
32. Screened Length: _____

33. Screened Intervals: _____

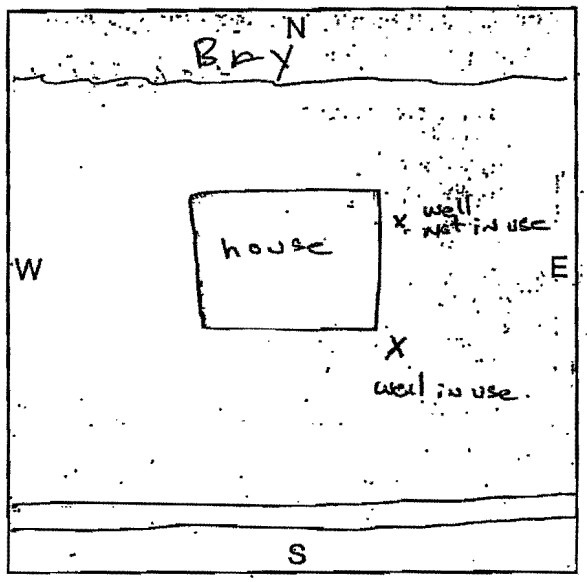
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO.
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard Substandard
If Substandard, Explain

42. Properly Grouted? 43. Well Seal Condition

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other

45. Adequate Setbacks from House and/or Septic System? YES NO Explain

46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES
X One well in use and one well open w/pipe core stuck in it. 1½" Dia

FLORIDA
UNIQUE WELL ID
AAK0206

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

113

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0207
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

9664 Eastpoint Ln Lake Worth FL 33467

11. OWNER'S NAME: Victor Joyce Cobb
12. Mailing Address: PO 641
City: Eastpoint
State: FL Zip: 32328
County: _____ Phone: _____

13. WELL ADDRESS (Location): 981 East Pine
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: 10-18-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29° 40 20 36

GPS LONGITUDE: 84 50 24 60

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

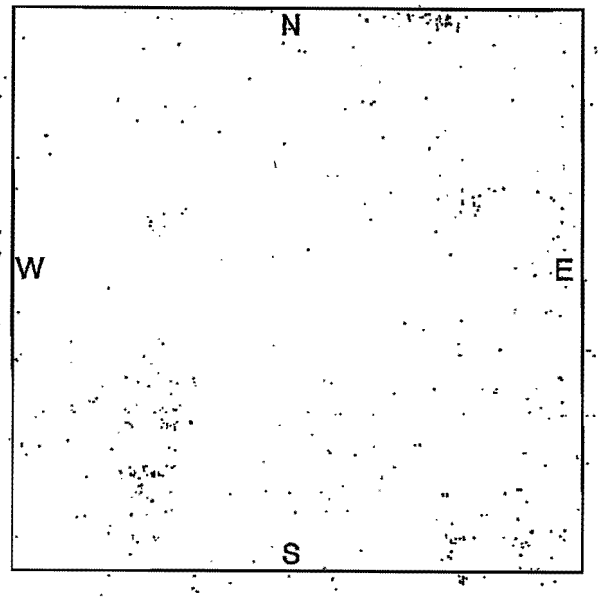
32. Screened Length: _____

33. Screened Intervals: _____

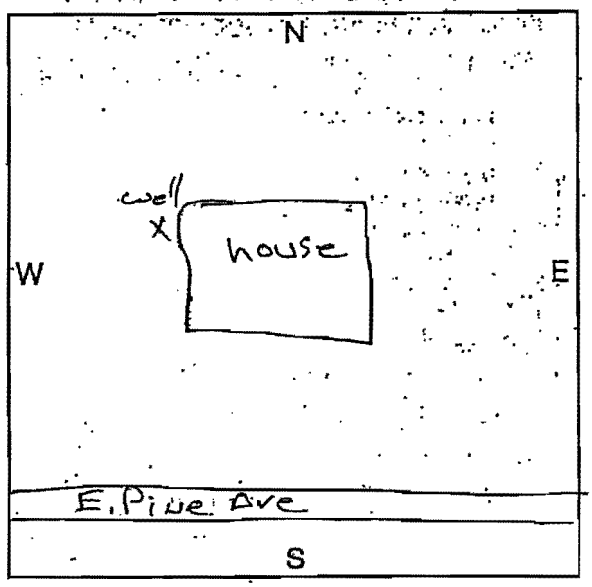
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ? 38. INSPECTION NO: 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard Substandard
If Substandard, Explain

42. Properly Grouted? 43. Well Seal Condition OK

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other

45. Adequate Setbacks from House and/or Septic System? YES NO Explain

46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0207

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

114

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0208
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Lee Benoit
12. **Mailing Address:** 872 Pine Ave
City: St. George Island
State: _____ Zip: _____
County: Franklin Phone: 927-3354
13. **WELL ADDRESS (Location):** 872 E. Pine Ave
City: _____
Zip: _____
County: Frank Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-18-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

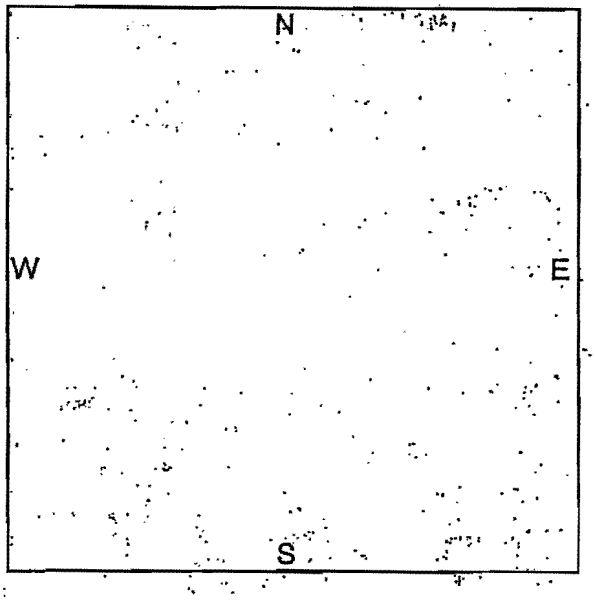
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: N29°40 17 73
GPS LONGITUDE: W84° 50 27 42

WELL INFORMATION
(Information in this column should be filled out if possible)

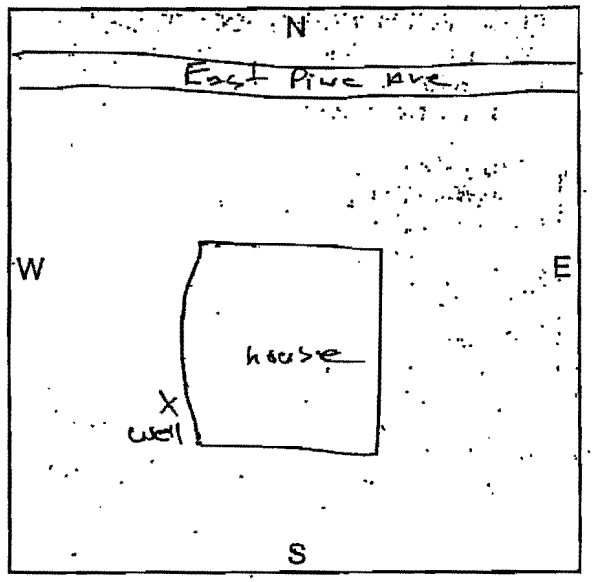
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____
41. Casing Specifications: Standard ✓ Substandard _____
If Substandard, Explain _____
42. Properly Grouted? _____ 43. Well Seal Condition OK
44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____
45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____
46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0208

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

115

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

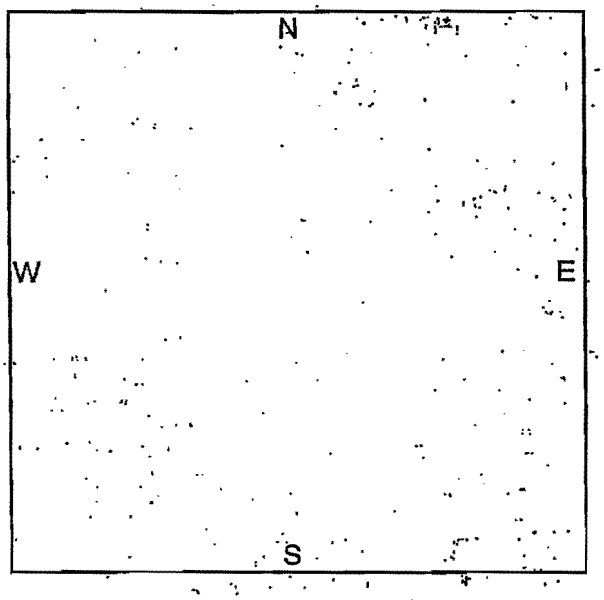
1. FLORIDA UNIQUE I.D.: NAK0209
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): 740 East Pine
    City: St. George Island
    Zip: _____
    County: Franklin Phone: 866-927-2322
    "Sea n' Double" Resort Vacation Properties
14. SCHEDULE FILLED OUT BY:
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-18-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: N29°40'12.88"
    GPS LONGITUDE: W84° 50' 44.53"

WELL INFORMATION
(Information in this column should be filled out if possible)

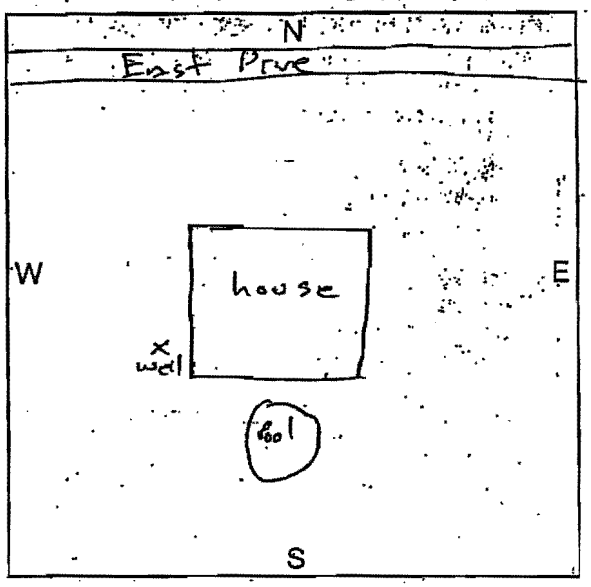
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ? 38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ✓ Substandard
If Substandard, Explain

42. Properly Grouted? 43. Well Seal Condition ok

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other

45. Adequate Setbacks from House and/or Septic System? YES NO Explain

46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0209

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

116

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0210
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 473 East Gulf Beach
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29°40'00.47"

GPS LONGITUDE: W84°51'16.09"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

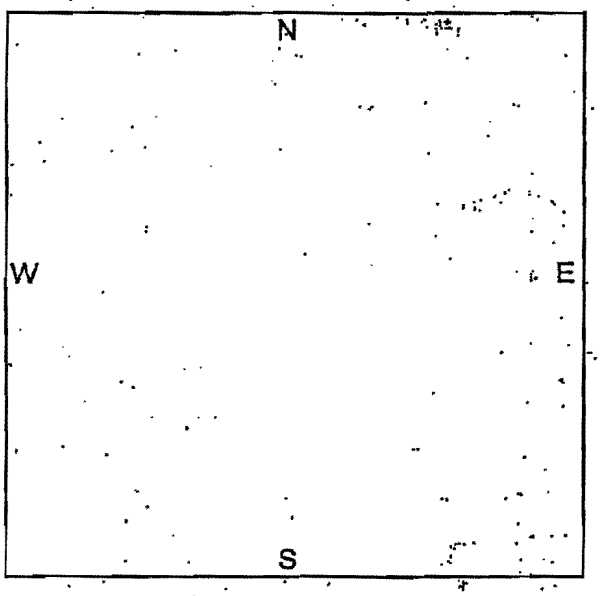
32. Screened Length: _____

33. Screened Intervals: _____

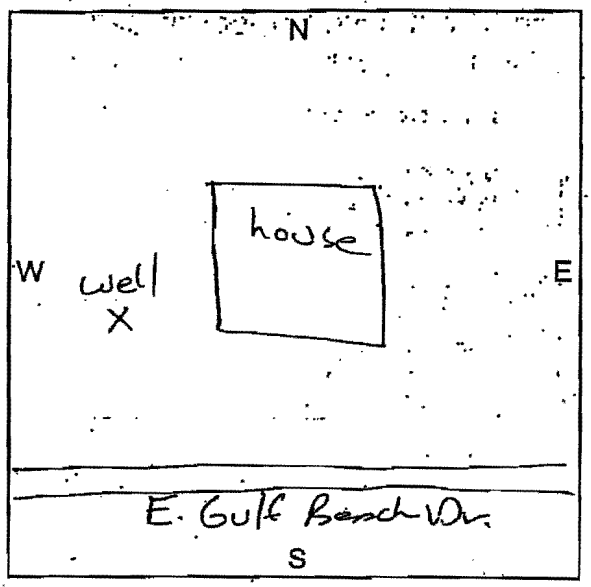
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
* Well not in US pipe to pump broken

FLORIDA
UNIQUE WELL ID
AAK0210

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

117

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AMK0211
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Grady & Marsha
12. **Mailing Address:** Underwood

City: Tait
State: FL Zip: _____
County: 73 Phone: _____

13. **WELL ADDRESS (Location):** 565 E as Gulf Beach

City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 8507

GPS LONGITUDE: 84 51 04 48

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

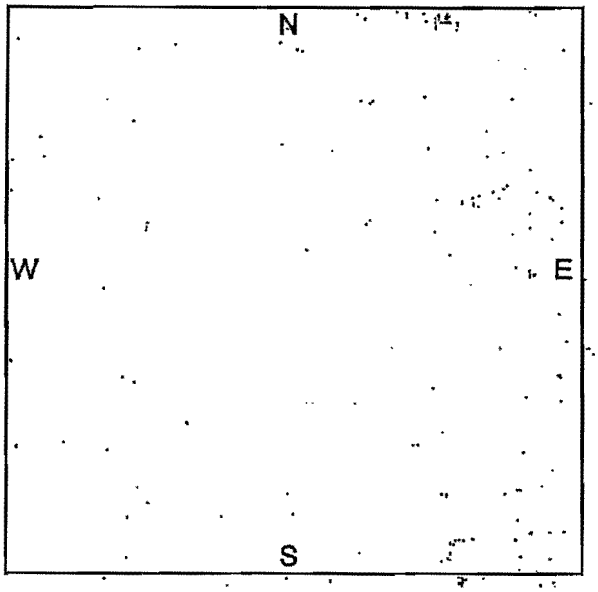
32. Screened Length: _____

33. Screened Intervals: _____

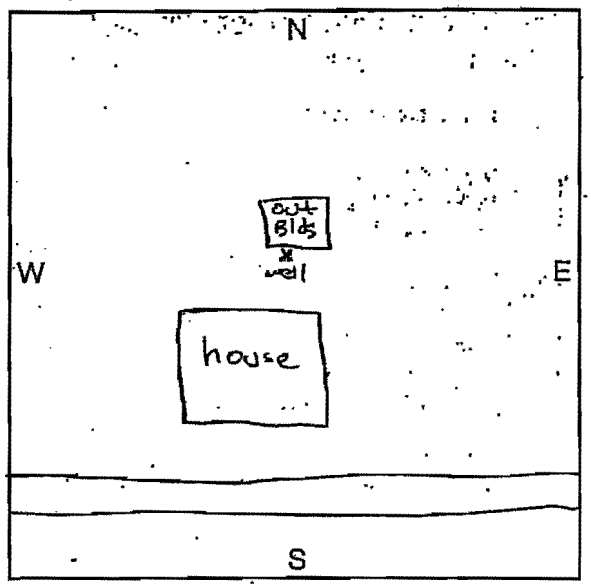
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition ____

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
* Well has threaded plug on it, neighbor says it is deep well.

FLORIDA
UNIQUE WELL ID
AAK0211

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

118

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AN K0212
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Glay + Sue Mahoney
12. Mailing Address: 557 East Garrie Dr
City: St. George Island
State: FL Zip: _____
County: Franklin Phone: _____

13. WELL ADDRESS (Location): 557 East Garrie Dr
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: 10-17-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10-17-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29°40'31.36"

GPS LONGITUDE: W84°51'03.93"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

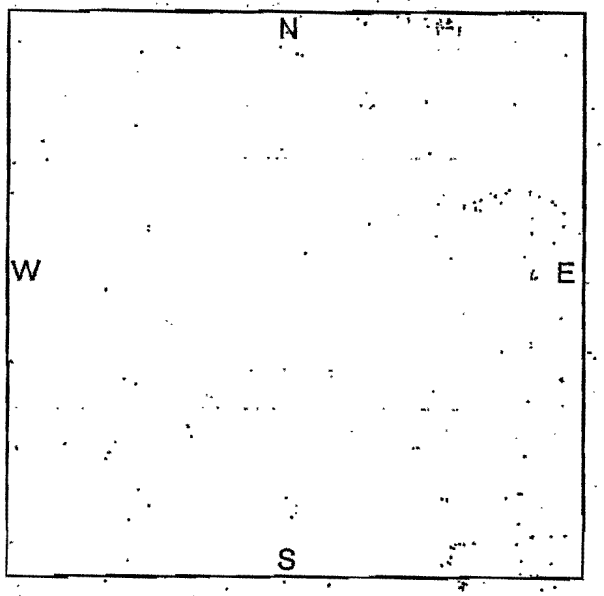
32. Screened Length: _____

33. Screened Intervals: _____

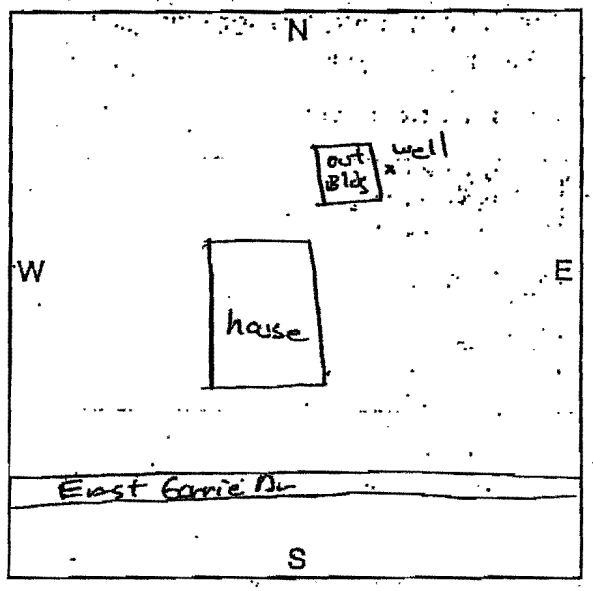
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ✓ Substandard
If Substandard, Explain

42. Properly Grouted?
43. Well Seal Condition

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other

45. Adequate Setbacks from House and/or Septic System? YES NO Explain

46. Is Well location Subject to Flooding? YES NO Explain

47. REMARKS/NOTES
Pump not hooked up, well has threaded plug

FLORIDA
UNIQUE WELL ID
AAK0212

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

119

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0213
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS** (Location): _____
next House East of 533 East Gorrie
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-17-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-17-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29395996

GPS LONGITUDE: 84510667

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/2 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

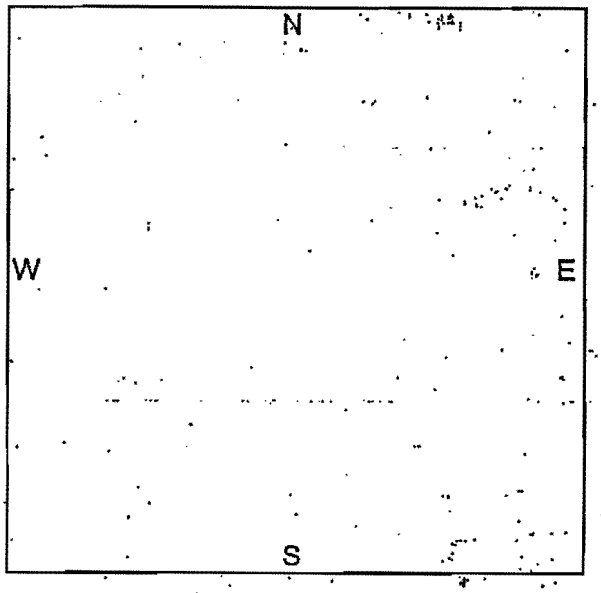
32. Screened Length: _____

33. Screened Intervals: _____

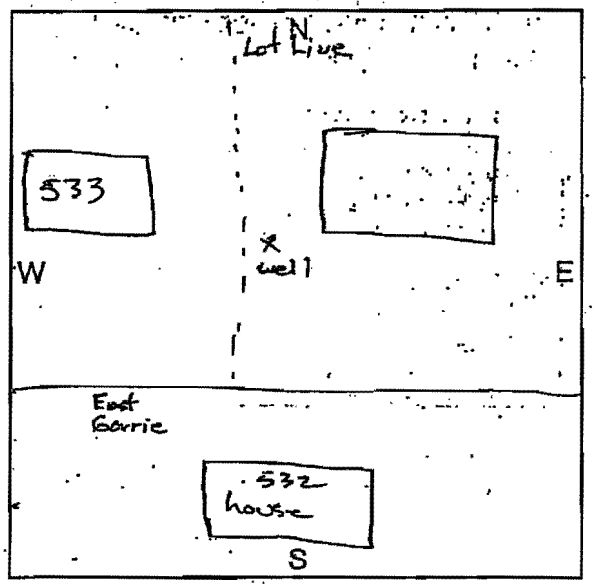
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition ____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
* Well still has pump, looks like has not been in service for years

FLORIDA
UNIQUE WELL ID
AAK0213

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

120

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0214
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 401 East Gorrie
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: 10-17-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29395458
GPS LONGITUDE: 84512360

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

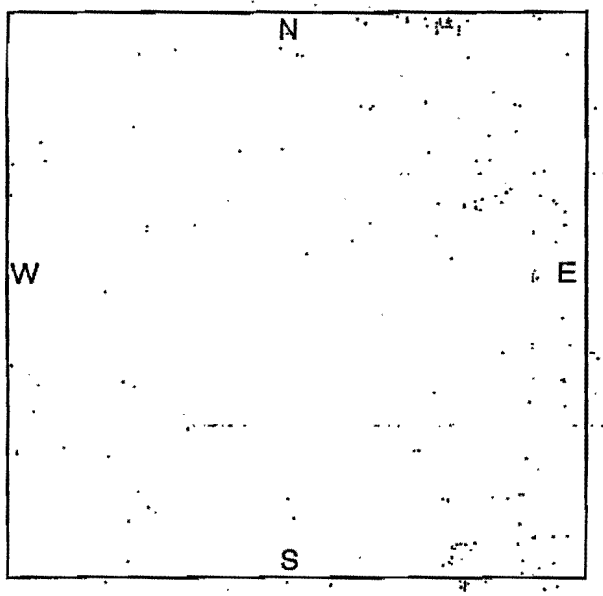
32. Screened Length: _____

33. Screened Intervals: _____

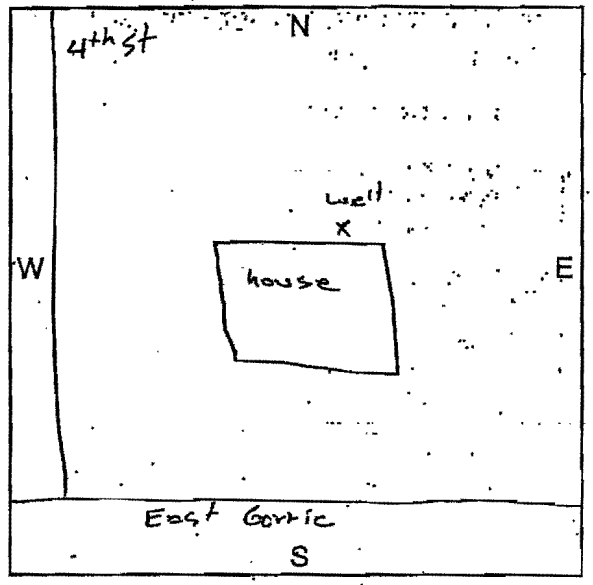
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0214

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

12

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** ANK0215
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 317 East Garrie
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 10-17-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-17-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29° 39' 52.48"

GPS LONGITUDE: 84° 51' 26.89"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

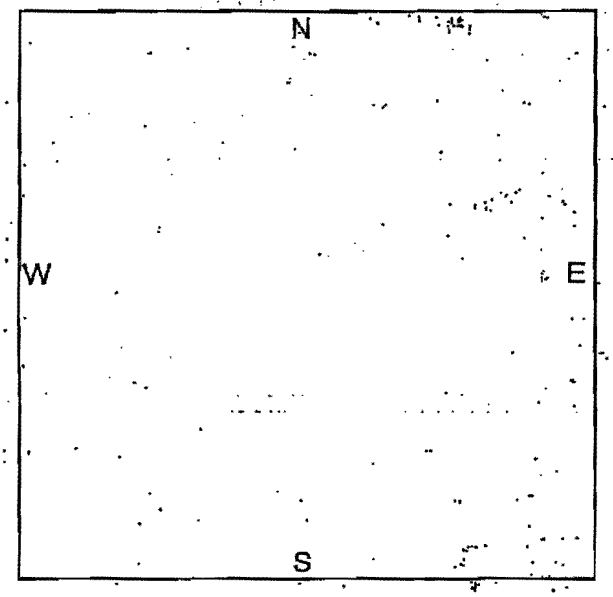
32. Screened Length: _____

33. Screened Intervals: _____

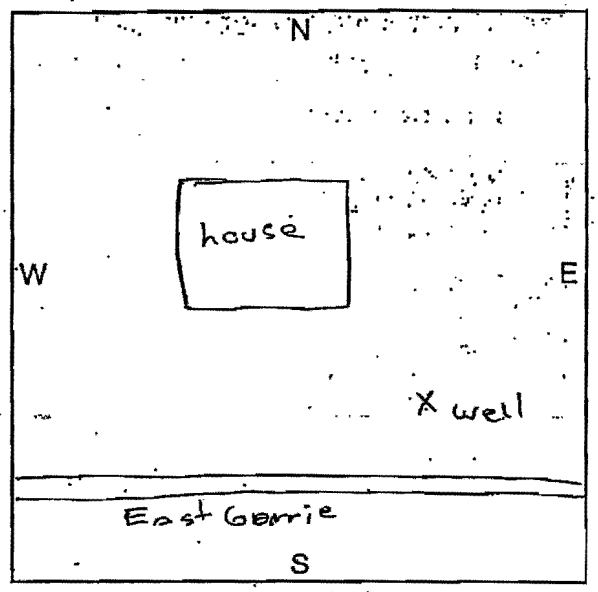
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition ____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0215

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

128

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0216
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Lead Drew McCloud Finnis
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: 850-545-1332

13. WELL ADDRESS (Location): 200 Gunn St

City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brown
AGENCY: _____
DATE: _____ PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29°39'58.06"

GPS LONGITUDE: 84°51'39.10"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

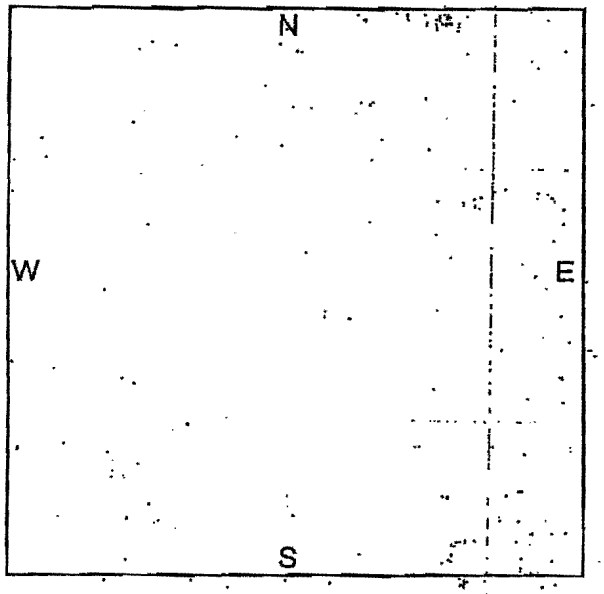
32. Screened Length: _____

33. Screened Intervals: _____

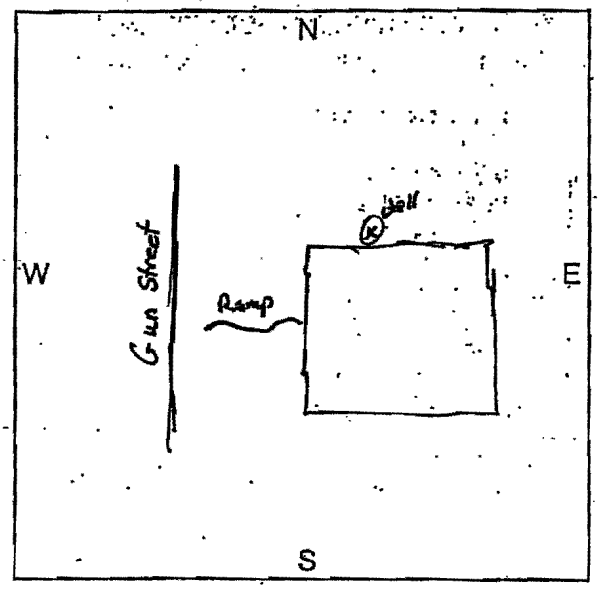
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0216

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

123

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** 144K0217
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** ST. GEO. ISLAND
12. **Mailing Address:** CABLE 251 W. GULF BCH. BLVD.
City: _____
State: _____ **Zip:** _____
County Code: _____ **Phone:** _____
13. **WELL ADDRESS** (location): 251 W. GULF BCH BLVD.
City: _____
Zip: _____
County Code: _____ **Phone:** _____

14 **SCHEDULE FILLED OUT BY:**
NAME: J. E. BRIGHT
AGENCY: _____
DATE: 10/12/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: TONI SHERRILL
AGENCY: _____
DATE: 10/12/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
ESTIMATED ACCURACY: _____ (<1, 1-3, 3-5, > 5 meters)
GPS LATITUDE: 29 39 43.34
GPS LONGITUDE: 84 52 00.96

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery-Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

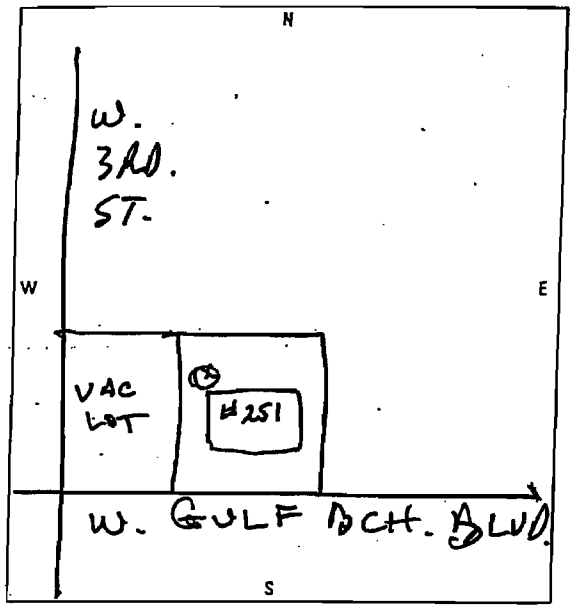
27 Diameter: 1 1/2" 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31 Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

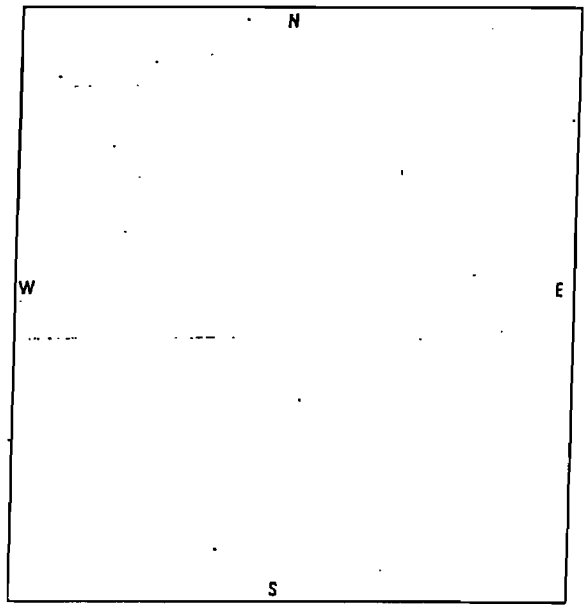
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____

39. Contractor Name _____

40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

_____

_____

_____

_____

_____

FLORIDA
UNIQUE WELL ID
AAK0217

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

124

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0218
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

Love Tide
13. **WELL ADDRESS** (Location): 333 West Gulf Beach Dr.
City: St. George Island
Zip: _____
County: Franklin Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: Tom & Earl
AGENCY: _____
DATE: 10-12-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-12-05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N29° 39 40 84

GPS LONGITUDE: W84° 52 07 87

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

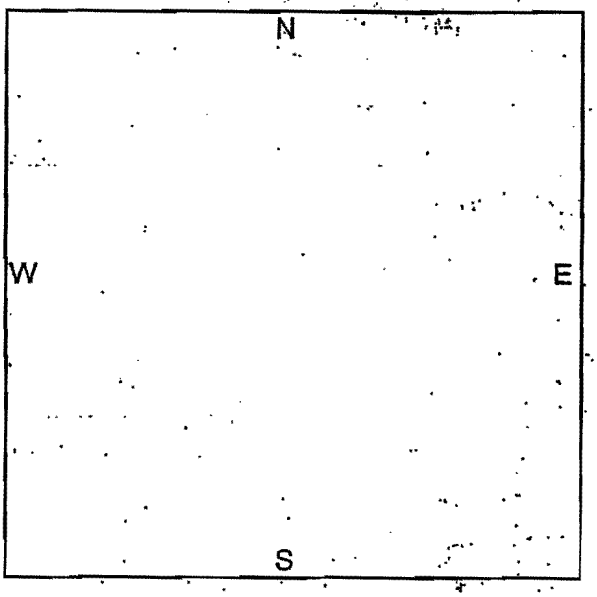
32. Screened Length: _____

33. Screened Intervals: _____

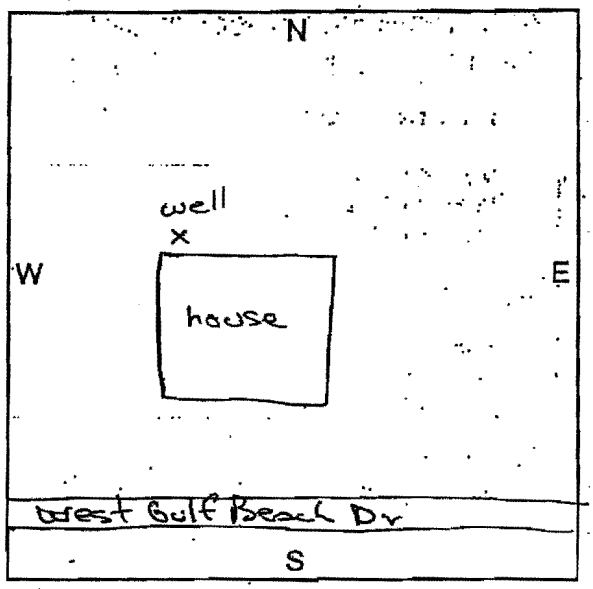
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____
43. Well Seal Condition ok

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0218

125

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** AAK 0219
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** _____
12. **Mailing Address:** 332 W. GORRIE

City: _____
State: _____ **Zip:** _____
County Code: _____ **Phone:** _____

13. **WELL ADDRESS** (location): _____

City: _____
Zip: _____
County Code: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/12/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: TOM SHEPARD
AGENCY: _____
DATE: 10/12/05 PHONE: _____

DATUM: _____ (Default WGS 84)
ESTIMATED ACCURACY: _____ (<1, 1-2, 3-5, >5 meters)
GPS LATITUDE: 29 39 35.96
GPS LONGITUDE: 84 52 04.34

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; U - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 HP 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

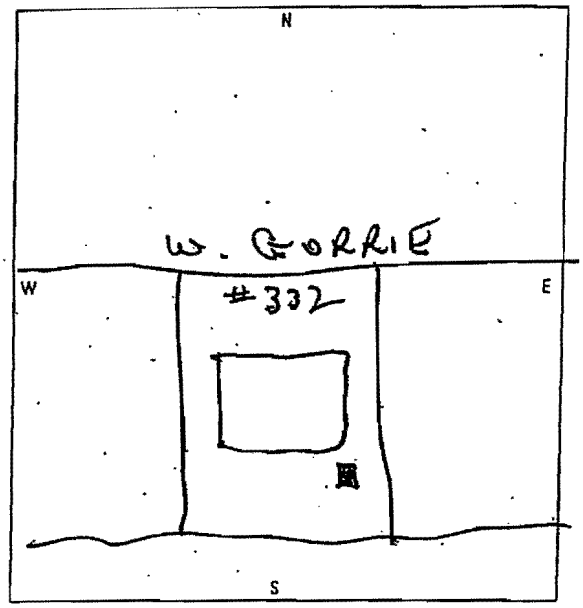
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

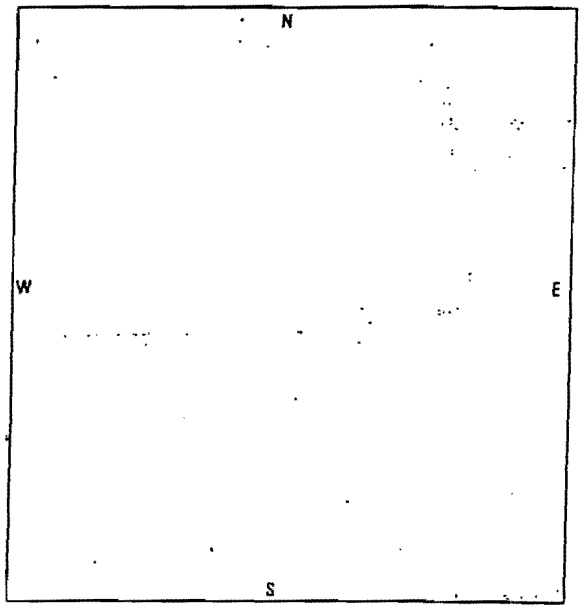
32. Screened Length: V.I
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____
38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____
_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAK0219

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

126

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

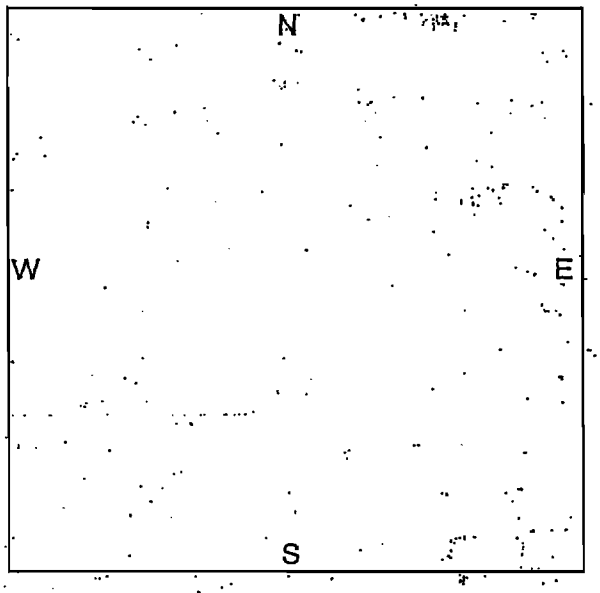
1. **FLORIDA UNIQUE I.D.** AAK0220
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** ?
12. **Mailing Address:** _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS** (Location): 316 ?
    West Gorrie
    City: St. George Island
    Zip: _____
    County: Franklin **Phone:** _____
    Lot next to 332 Gorrie East
14. **SCHEDULE FILLED OUT BY:**
    NAME: Tom St Cyr
    AGENCY: _____
    DATE: 10-12-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10-12-05 **PHONE:** _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 39 36.37
    GPS LONGITUDE: 84 52 03.92

WELL INFORMATION
(Information in this column should be filled out if possible)

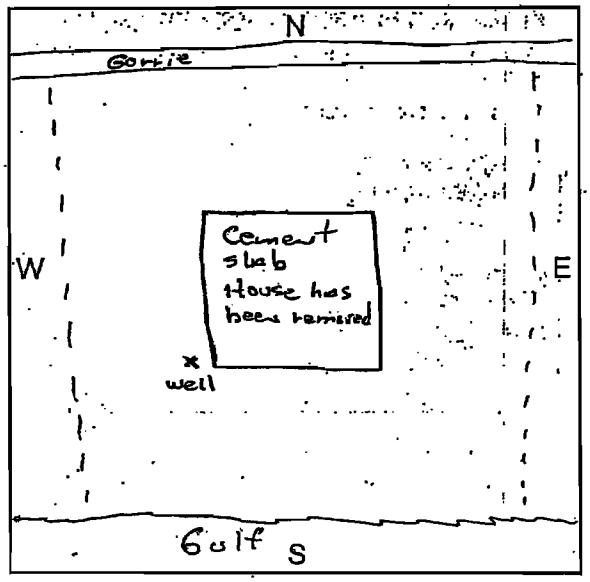
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; (W) - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; (LA) - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; (C) - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; (E) - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    (P) - PVC; (S) - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number ?

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition ok

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
* House no longer on site, well not in use

FLORIDA
UNIQUE WELL ID
AAK0220

127

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

2 wells

1. **FLORIDA UNIQUE I.D:** AnK0222 AnK0221
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** Blue Parrot
12. **Mailing Address:** 608 West Gorrie Dr
City: St. George Island
State: FL **Zip:** _____
County Code: Franklin **Phone:** _____
13. **WELL ADDRESS** (location): Same
City: _____
Zip: _____
County Code: _____ **Phone:** _____

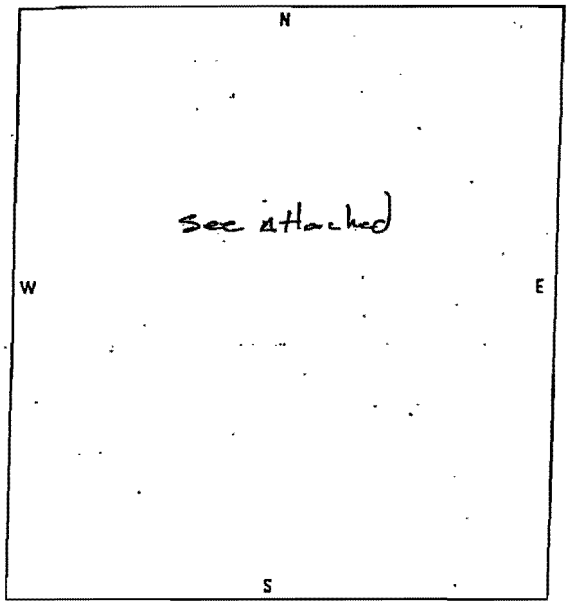
14. **SCHEDULE FILLED OUT BY:**
NAME: Tom & Fran
AGENCY: _____
DATE: 10-11-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10-11-05 **PHONE:** _____
DATUM: _____ [Default WGS 84]
ESTIMATED ACCURACY: _____ [<1, 1-3, 3-5, >5 meters]
GPS LATITUDE: 29 39 42 00
GPS LONGITUDE: 84 51 49 21

WELL INFORMATION
(Information in this column should be filled out if possible)

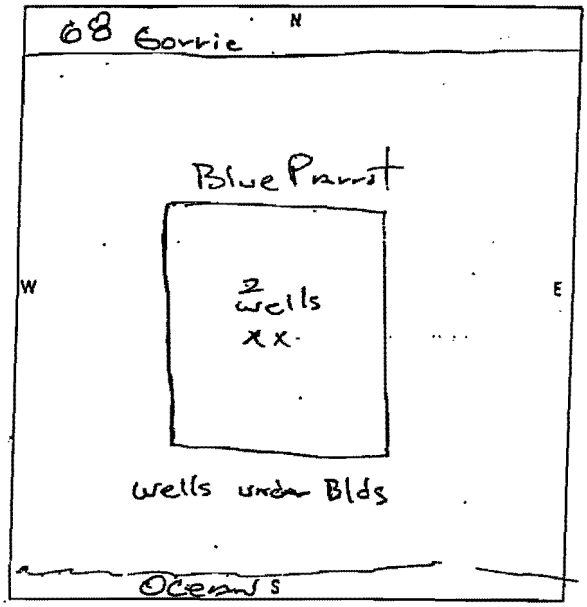
16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LI - Landscape Irrigation; U - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1/2 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27 Diameter: 1 1/4" 28 Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31 Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____
38. INSPECTION NO. 1
39. Contractor Name Unknown
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43 Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA UNIQUE WELL ID AAK0221

FLORIDA UNIQUE WELL ID AAK0222

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

128

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** AAK 0227
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T 9 (N or (S)) R 6 (E or (W))

Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** BJ's PIZZA
12. **Mailing Address:** LT 15 BLK 5 NW CORNER WIST ST & GULF BCH
City: _____
State: _____ Zip: _____
County Code: _____ Phone: _____

13. **WELL ADDRESS** (location): _____
City: _____
Zip: _____
County Code: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/10/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: TOM BROWN
AGENCY: _____
DATE: 10/10/05 PHONE: _____
DATUM: _____ (Default WGS 84)
ESTIMATED ACCURACY: _____ (<1, 1-3, 3-5, > 5 meters)
GPS LATITUDE: 29 39 46.09
GPS LONGITUDE: 84 51 53.79

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery-Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A. Measuring Point Distance from Land Surface _____
B. Water Level below Land Surface _____
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

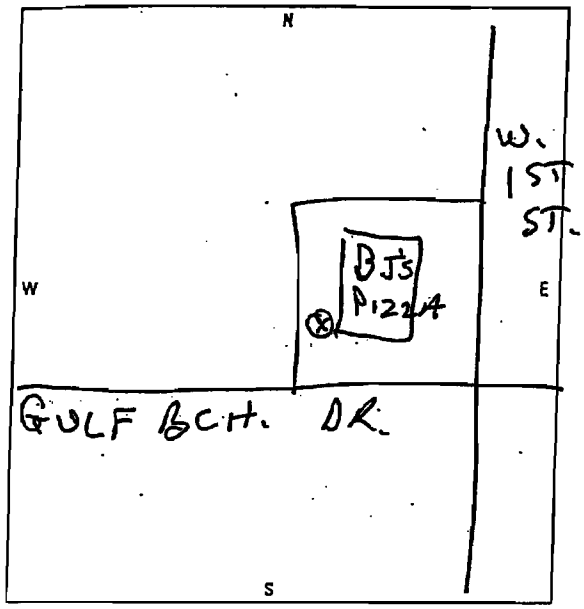
27. Diameter: 1 1/4" 28 Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

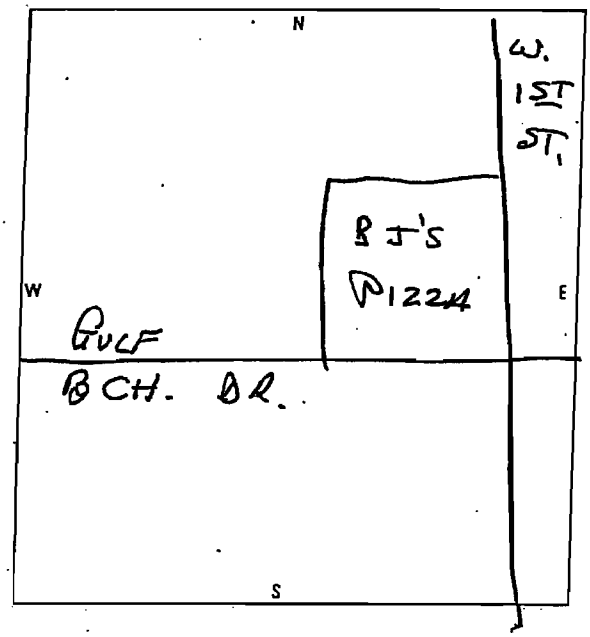
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____
38. INSPECTION NO. _____/_____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43 Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____
_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAK0227

STATE OF FLORIDA

129

WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION

(**Bolded** information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D:** AAK 0228
2. NWFWMD CPS I.D: _____
3. NWFWMD WI I.D: _____
4. NWFWMD WU I.D: _____
5. DEP PWS I.D: _____
6. ALT. DEP I.D: _____
7. HRS I.D: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ___ 1/4 ___ 1/4 ___ 1/4 of Sec ___ T 9S (N or S) R 6W (E or W)

    Altitude _____ 7.5 Minute Quad _____

11. **Owner's Name:** Villas of St George
12. **Mailing Address:** _____

    City: _____
    State: _____ **Zip:** _____
    County Code: _____ **Phone:** _____

13. **WELL ADDRESS** (location): Lot 16, Block 10 Georgie Drive
    City: St George Island
    Zip: _____
    County Code: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
    NAME: Tom Brown
    AGENCY: NWFWMD
    DATE: 10-10-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____

    DATUM: WGS 84 (Default WGS 84)
    ESTIMATED ACCURACY: _____ [<1, 1-3, 3-5, > 5 meters]

    GPS LATITUDE: 293941.03

    GPS LONGITUDE: 845156.00

WELL INFORMATION

(Information in this column should be filled out if possible)

16. Method of Construction: _____
    AR - Air Rotary; AU - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery-Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: J
    A - Air; B - Bucket; C - Centrifugal; J - Jet; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: _____ 22. Pump Intake Depth: _____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
    A. Measuring Point Distance from Land Surface _____
    B. Water Level below Land Surface _____
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

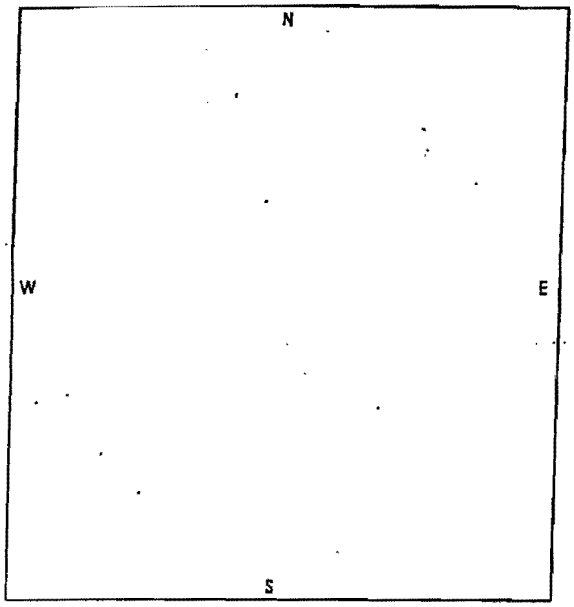
27. Diameter: 2" 28 Well Depth: _____
29. Depth of Casing: ? _____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)

31 Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

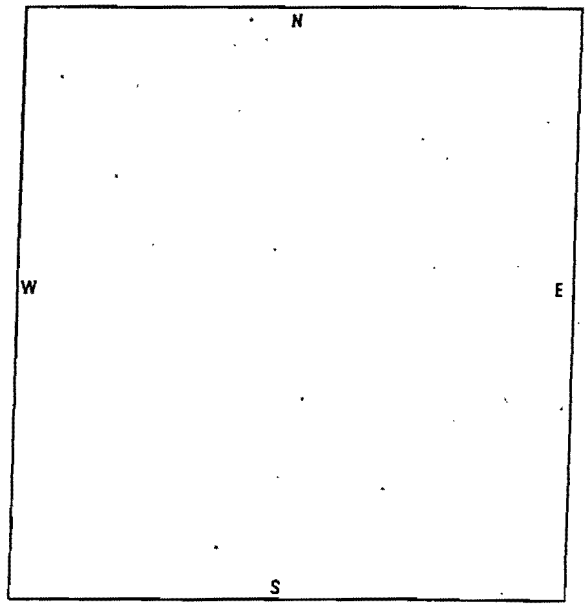
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided)



36. DETAILED SITE MAP LOCATION (Not to Scale)
(This Information Must be Provided)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____

39. Contractor Name _____

40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks From House and/or Septic Tank? YES NO Explain _____

46. Is Well Location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

_____

_____

_____

_____

_____

FLORIDA
UNIQUE WELL ID
AAK0228

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

130

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0229
2. NWFWMD CPS I.D.: No Permit
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude ____ 7.5 Minute Quad ____

11. **OWNER'S NAME:** Gulf State
12. **Mailing Address:** Community Bank Gulf Beach Dr.
City: St. George Island
State: FL Zip:
County: Franklin Phone:

13. **WELL ADDRESS** (Location): Same
City:
Zip:
County: Phone:

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY:
DATE: 10-10-05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: PHONE:

DATUM: (Default WGS 84)
EST. ACCURACY: (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: N 29° 39 47 91

GPS LONGITUDE: W 84° 51 51 11

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: ____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: ____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: ____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 7 22. Pump Intake Depth: ____

23. Normal Yield: ____

24. Method of Measurement: ____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: ____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: ____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information: ____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: ____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

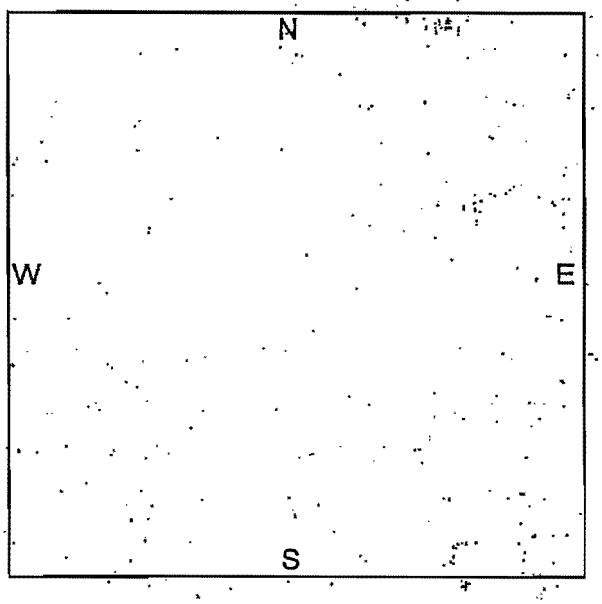
32. Screened Length: ____

33. Screened Intervals: ____

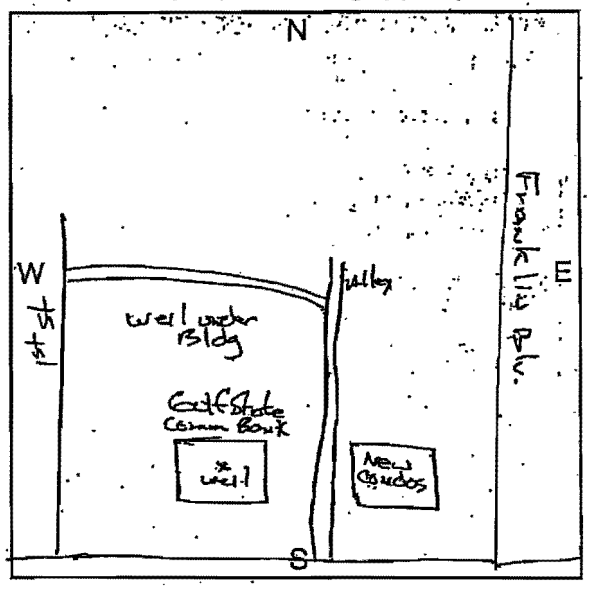
34. Finish: ____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. 1
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition OK

44. Construction Phase: (Completed) Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0229

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE (3)

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0728
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Jim Wojcik
12. Mailing Address: 1419 Evodia Ct
City: St. George Island
State: FL Zip: _____
County: Franklin Phone: _____
13. WELL ADDRESS (Location): _____
City: _____
Zip: _____
County: _____ Phone: _____

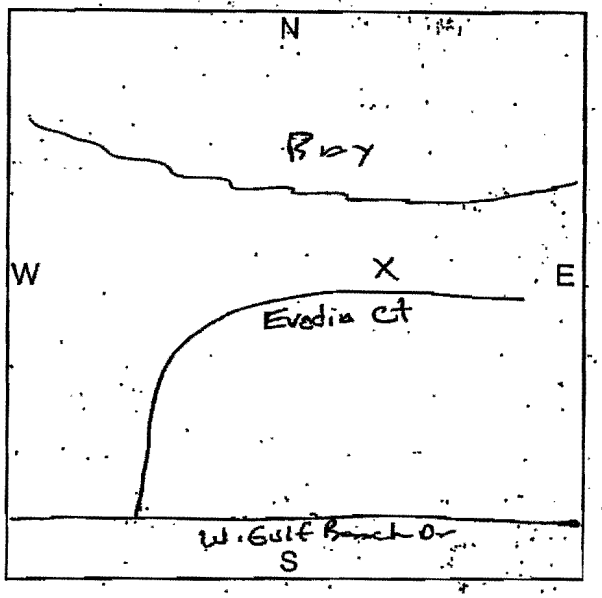
14. SCHEDULE FILLED OUT BY:
NAME: T. Shepard
AGENCY: _____
DATE: 11-09-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: N29°38'49.13
GPS LONGITUDE: W84°54'26.23

WELL INFORMATION
(Information in this column should be filled out if possible)

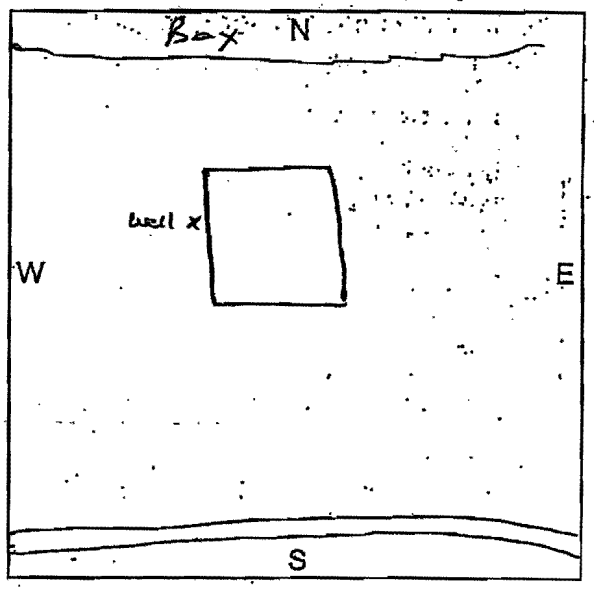
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Propedy Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. 1
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0728

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 132

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0729
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** ?
12. **Mailing Address:** _____
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** Pelican Point Entrance by Lewis Ct
City: St. George Island
Zip: _____
County: Franklin **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Shepard
AGENCY: _____
DATE: 11-08-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 38 39.60

GPS LONGITUDE: 84 54 32 41

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: ? 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: ?
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

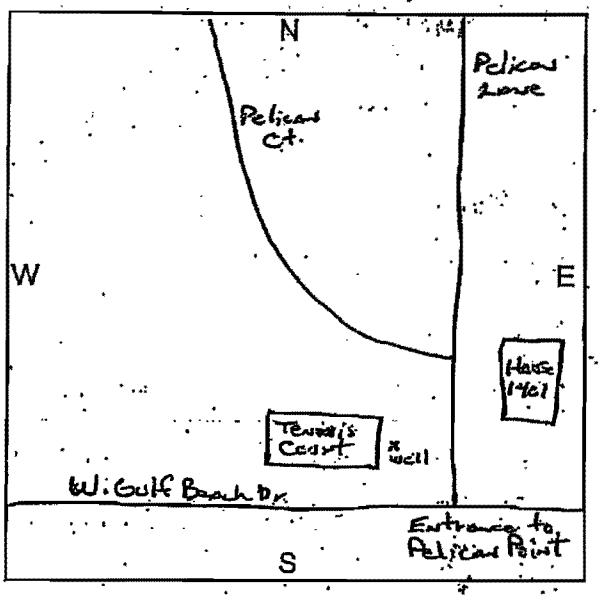
32. Screened Length: _____

33. Screened Intervals: _____

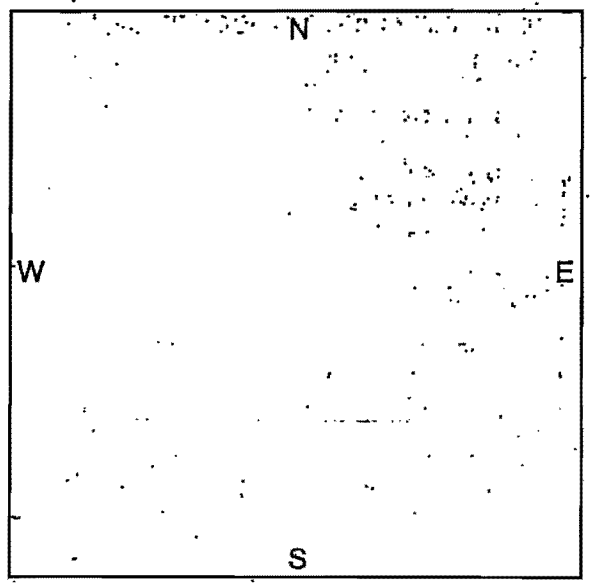
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. /
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAK0729

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 133

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0762
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
T ____ (N or S) R ____ (E or W)
Altitude ____ 7.5 Minute Quad ____

11. OWNER'S NAME:
12. Mailing Address:
City:
State: Zip:
County: Phone:

13. WELL ADDRESS (Location):
649 East Gulf Beach
City: St George Island
Zip:
County: Phone:

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-19-05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:
DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 40 08.25
GPS LONGITUDE: 84 50 55.43

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: ____

24. Method of Measurement: ____
B - Bailer; C - Current Meter; E - Estimated; M - Totalling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: ____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: ____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information: ____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

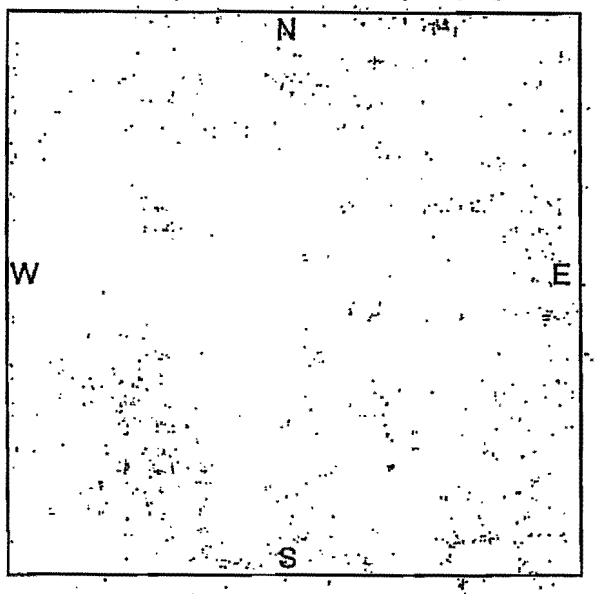
32. Screened Length: ____

33. Screened Intervals: ____

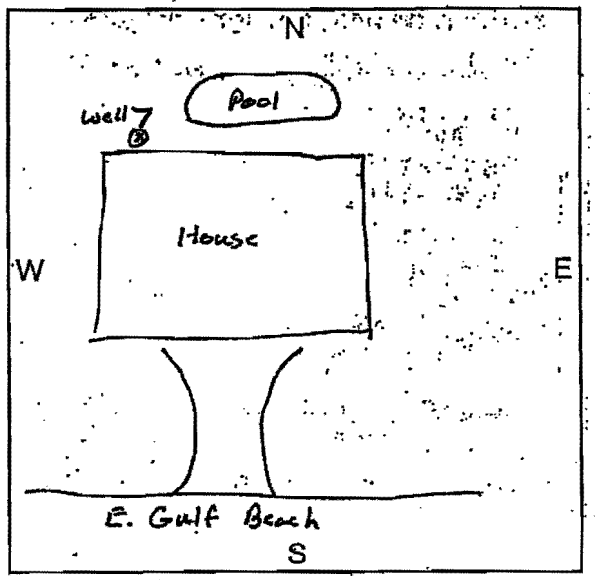
34. Finish: ____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0762

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 134

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

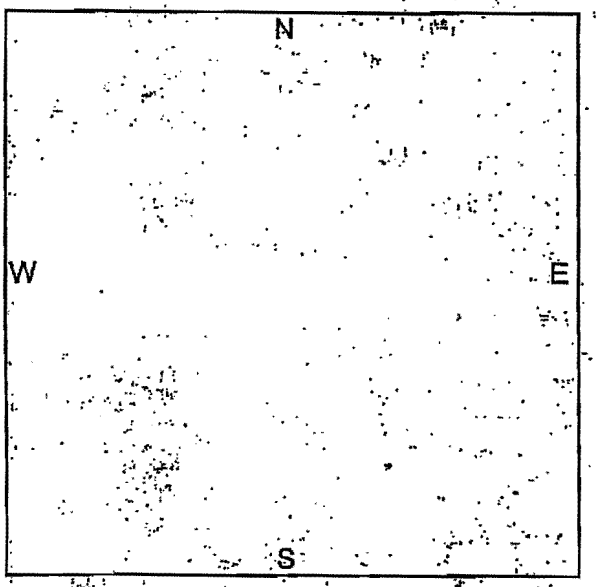
1. FLORIDA UNIQUE I.D. AAK0763
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): _____
    617 East Gorrie
    City: St George Island
    Zip: _____
    County: _____ Phone: _____
14. SCHEDULE FILLED OUT BY:
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-20-05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 294002.26
    GPS LONGITUDE: 845058.32

WELL INFORMATION
(Information in this column should be filled out if possible)

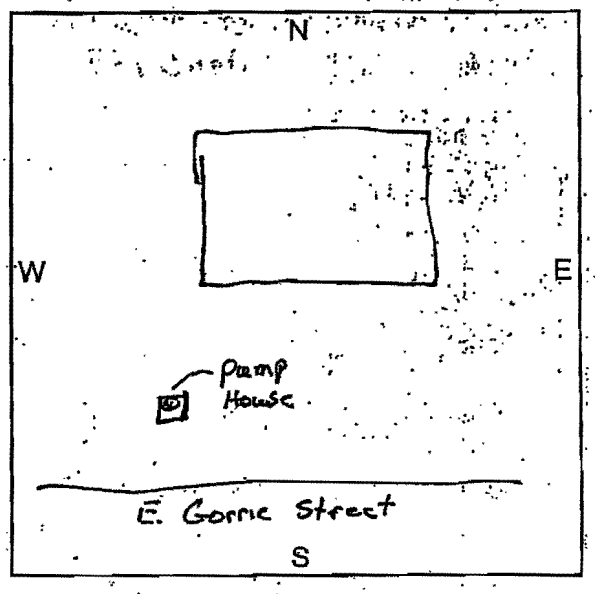
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: U
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totalling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0763

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

135

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0764
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
816 E. Gorrie Drive
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-20-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 08.94

GPS LONGITUDE: 84 50 31.34

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

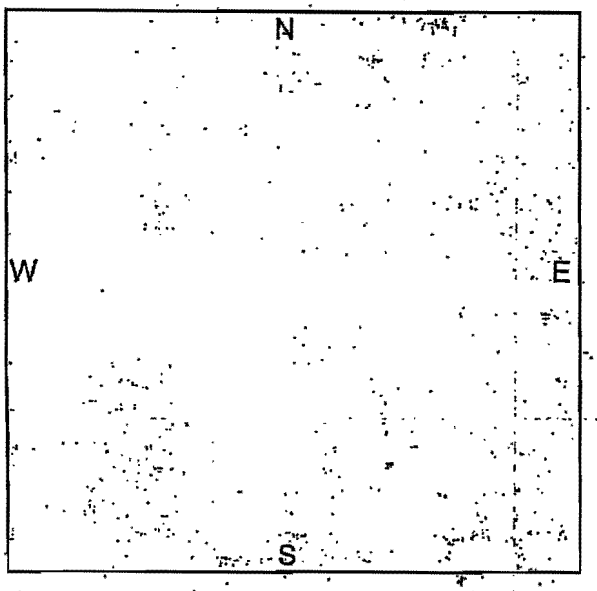
32. Screened Length: _____

33. Screened Intervals: _____

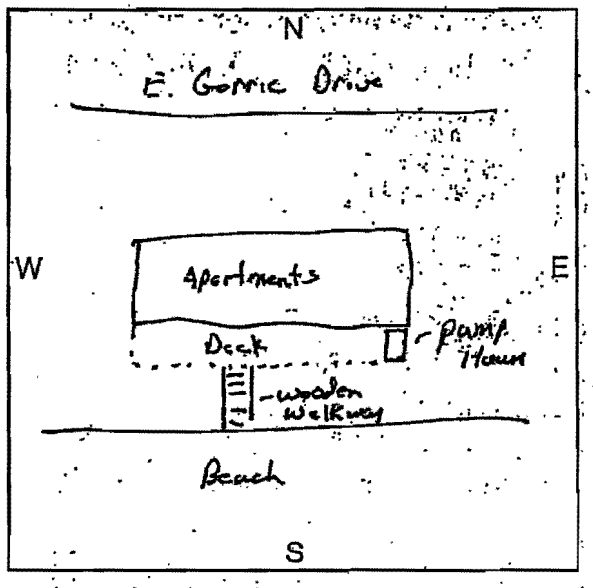
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Pump house full of beach gear - could not access well.

FLORIDA
UNIQUE WELL ID
AAK0764

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

136

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0765
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. WELL ADDRESS (Location): Collins Vacation Rentals Dolphin Dance 848 E. Gorrie Drive
City: St George Island
Zip: _____
County: _____ Phone: 927-2900

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294010.65

GPS LONGITUDE: 845027.02

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary, AB - Augered/Bored, BB - Bail Bucket, CO - Combination, CT - Cable Tool, DR - Driven, DU - Dug, HR - Hydraulic Rotary, JT - Jetted, RR - Reverse Rotary, OT - Other

17. Use of Site: W
A - Properly Abandoned, C - Core, D - Drainage, M - Monitor/Observation, P - Oil/Gas, R - Return, S - Standby, T - Test, U - Unused, W - Withdrawal, X - Waste Disposal/Injection, Z - Destroyed, O - Other

18. Use of Water: LA
AI - Agricultural Irrigation, AQ - Aquaculture, AR - Aquifer Recharge, AS - Aesthetic, CO - Commercial, DI - Diversion/Impoundment, DM - Domestic/Mult. Family, DO - Domestic, DW - Dewatering Wells, ES - Essential Service, FP - Freeze Protection, GI - Golf Course Irrigation, HR - Heat Pump Recharge, HS - Heat Pump Supply, IN - Industrial, LA - Landscape Irrigation, LI - Livestock, LP - Limited Use PS, MI - Mining, MO - Monitor, NA - Navigation, NI - Nursery Irrigation, OO - Other Outside Use, PF - Perishable Food, PP - Power Production, PS - Public Supply, RI - Recreation Irrigation, RW - Restoration Well, SF - Soil Flooding, SN - Sanitation, TE - Test, WR - Water Based Recreation

19. Type of Lift: C
A - Air, B - Bucket, C - Centrifugal, J - Jetted, P - Piston, S - Submersible, T - Turbine, N - No Pump, Z - Other

20. Type of Power: E
D - Diesel, E - Electric, G - Gasoline, H - Hand, Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer, C - Current Meter, E - Estimated, M - Totaling Meter, O - Orifice, R - Reported, T - Trajectory, V - Volumetric, Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated, G - Pressure Gauge, L - Geophysical Log, R - Reported, S - Steel Tape, A - Air Line, T - Electric Tape, Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC, S - Steel, C - Concrete, B - Brick, Z - Other

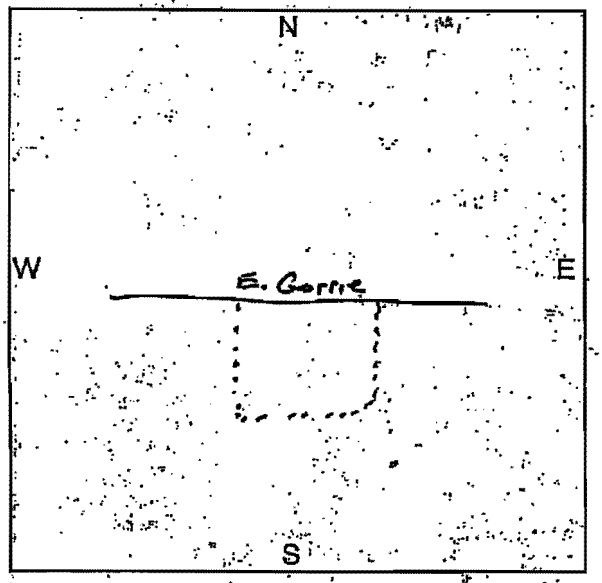
32. Screened Length: P

33. Screened Intervals: _____

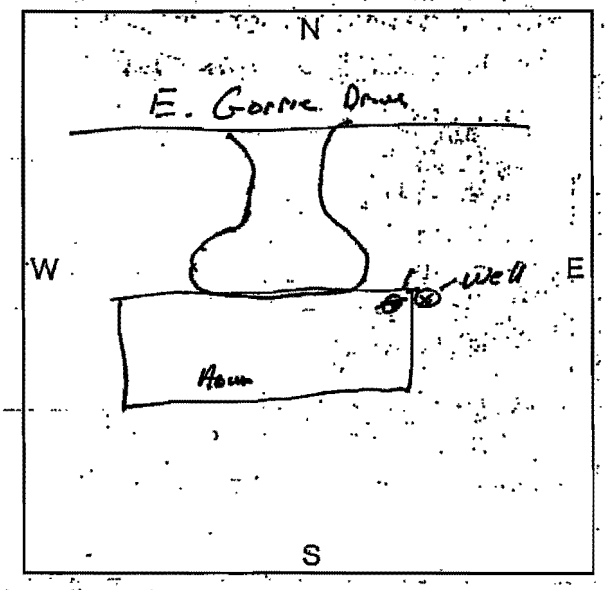
34. Finish: _____
S - Screen, O - Open End, X - Open Hole, Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Well off-site from pool pump and is underground

FLORIDA
UNIQUE WELL ID
AAK0765

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

137

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0766
2. NWFWMD GPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (If any):
9. SYSTEM NAME (If any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME:
12. Mailing Address:

City:
State: Zip:
County: Phone:

13. WELL ADDRESS (Location): 11126 E. Gulf Beach Dr.

City:
Zip:
County: Phone:

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-20-05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 2940 20.73

GPS LONGITUDE: 84 49 53.47

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: ____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: ____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: ____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

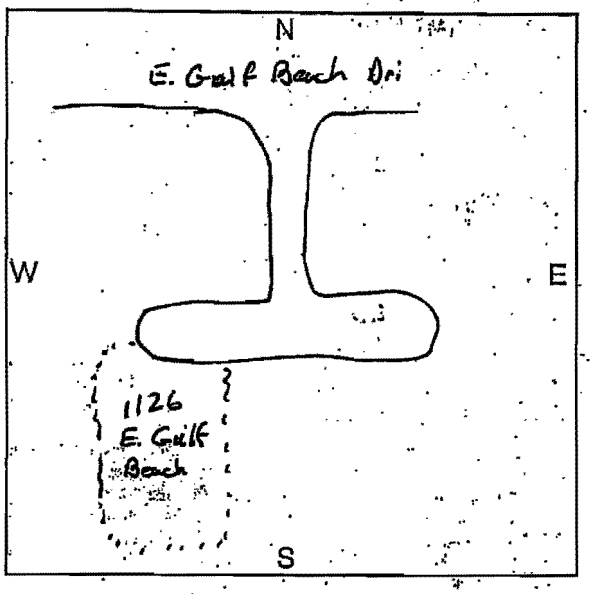
32. Screened Length: ____

33. Screened Intervals: _____

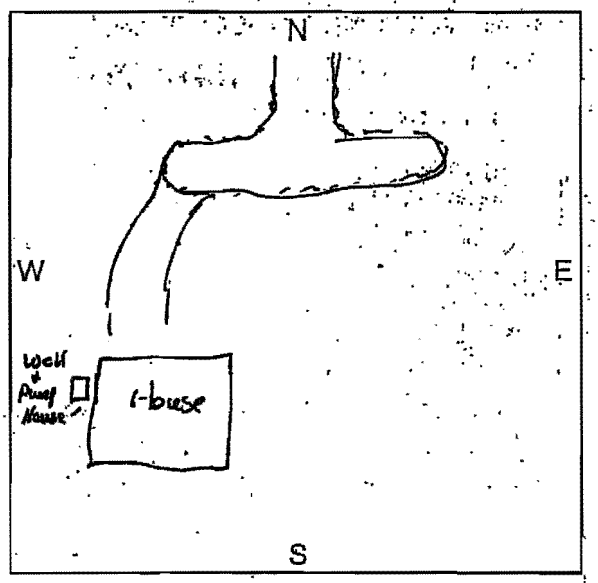
34. Finish: ____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Well installed by Brooks Wade

FLORIDA
UNIQUE WELL ID
AAK0766

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

138

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0767
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME:
12. Mailing Address:

City:
State: Zip:
County: Phone:

13. WELL ADDRESS (Location):
1128 E. Gulf Beach
City: St. George Island
Zip:
County: Phone:

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10.20.05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:

DATUM: (Default WGS 84)
EST. ACCURACY: (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 20.90

GPS LONGITUDE: 84 49 52.19

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction:
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site:
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water:
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth:

23. Normal Yield:

24. Method of Measurement:
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth:

29. Depth of Casing:

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material:
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

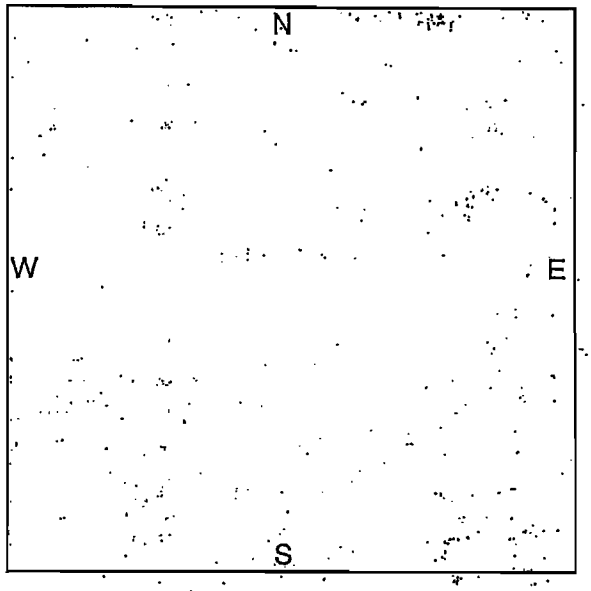
32. Screened Length:

33. Screened Intervals:

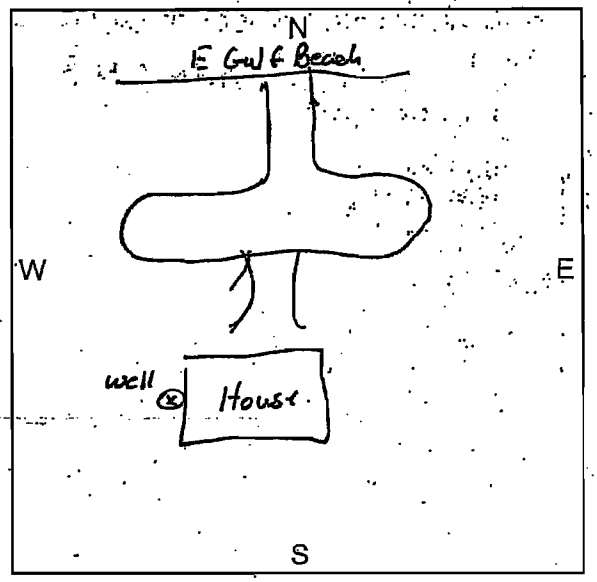
34. Finish:
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Well installed by Brooks Waite

FLORIDA
UNIQUE WELL ID
AAK0767

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

139

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0768
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Jon & Pat Hargas
12. **Mailing Address:** _____
    City: Atlanta
    State: Ga. **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** _____
    E. Gulf Beach Dr.
    City: St. George Island
    Zip: _____
    County: Franklin **Phone:** _____

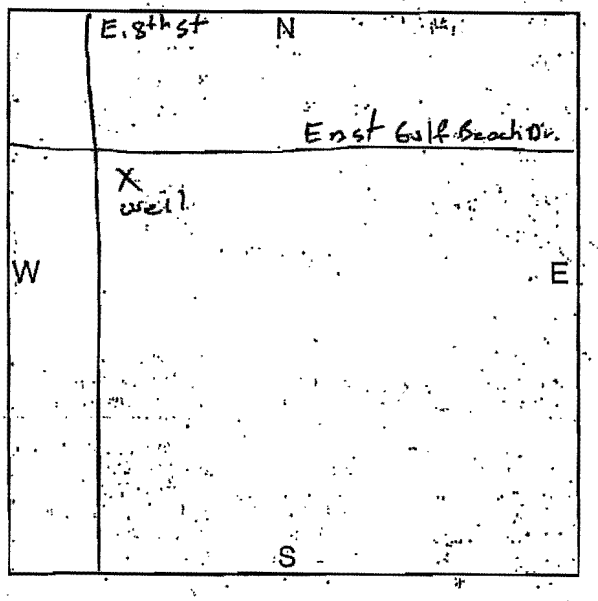
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-19-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10-19-05 **PHONE:** _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: N29° 40 11 41
    GPS LONGITUDE: W84° 50 35 19

WELL INFORMATION
(Information in this column should be filled out if possible)

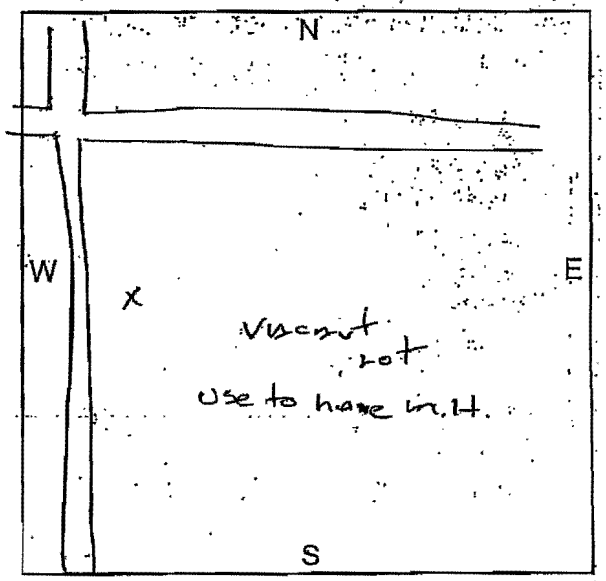
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: ?
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½ or 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: _____
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction ?
38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number

41. Casing Specifications: Standard ____ Substandard ____
If Substandard, Explain ____

42. Properly Grouted? ____ 43. Well Seal Condition OK

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other ____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain ____

46. Is Well location Subject to Flooding? YES NO Explain ____

47. REMARKS/NOTES
M.H. removed by storm.

FLORIDA
UNIQUE WELL ID
AAK0768

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

140

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0770
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Leslie Fennell
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS** (Location): 772 E. Gulf Beach Dr.
    City: St. George Island
    Zip: _____
    County: Franklin Phone: _____

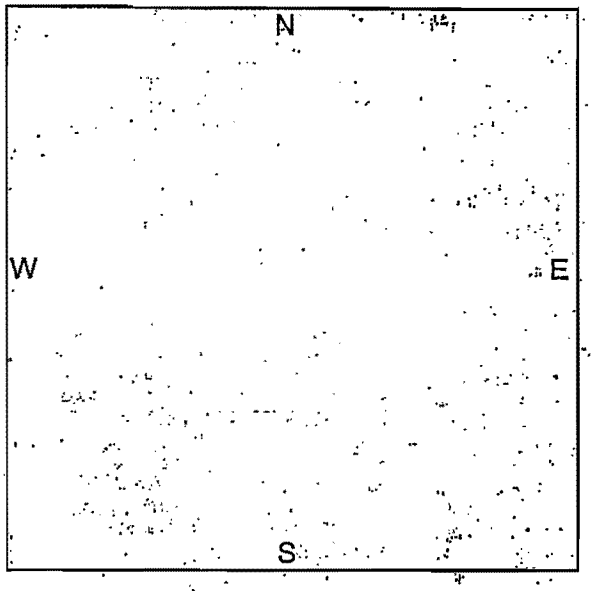
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Shepard
    AGENCY: _____
    DATE: 10-19-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: 10-19-05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: N29° 40 10.94
    GPS LONGITUDE: W84° 50 39.20

WELL INFORMATION
(Information in this column should be filled out if possible)

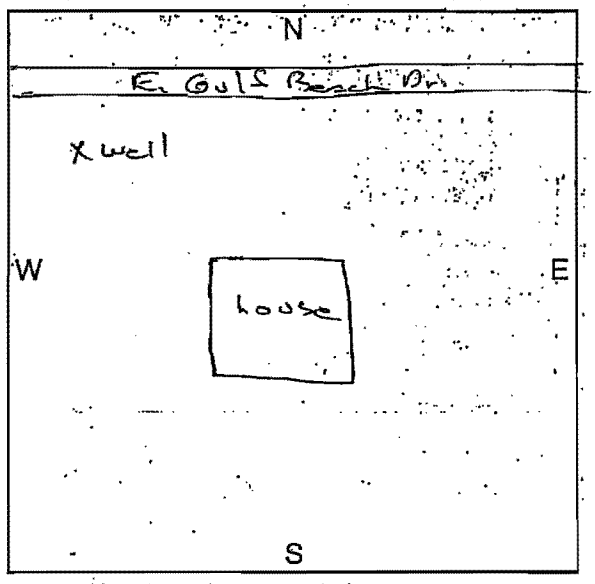
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction 15 years or more 38. INSPECTION NO. 1
39. Contractor Name ?
40. License Number ?

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Well inside well house could not see it.
well not used in 3 years

FLORIDA
UNIQUE WELL ID
AAK0770

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

141

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

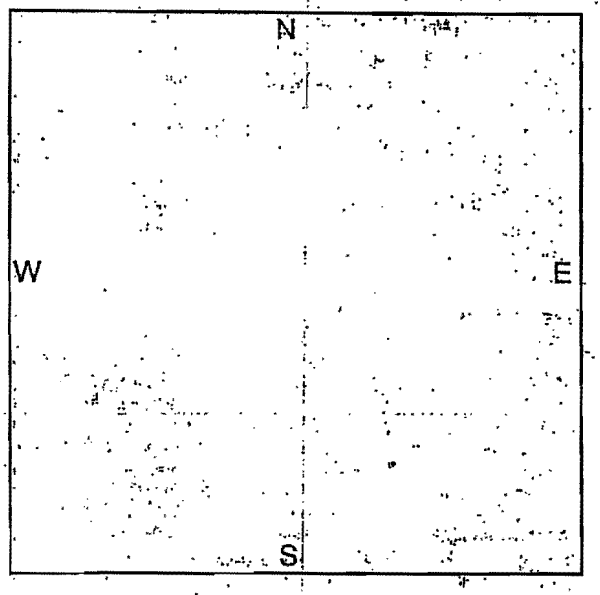
1. FLORIDA UNIQUE I.D. AAK0771
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude ____ 7.5 Minute Quad ____
11. OWNER'S NAME: Leight Atkins
12. Mailing Address:
    City:
    State: Zip:
    County: Phone:
13. WELL ADDRESS (Location):
    673 E. Gulf Beach
    City: St George Island
    Zip:
    County: Phone:
14. SCHEDULE FILLED OUT BY:
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-19-05 PHONE:
15. GPS INFORMATION PROVIDED BY:
    NAME:
    AGENCY:
    DATE: PHONE:
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 294009.25
    GPS LONGITUDE: 845052.23

WELL INFORMATION
(Information in this column should be filled out if possible)

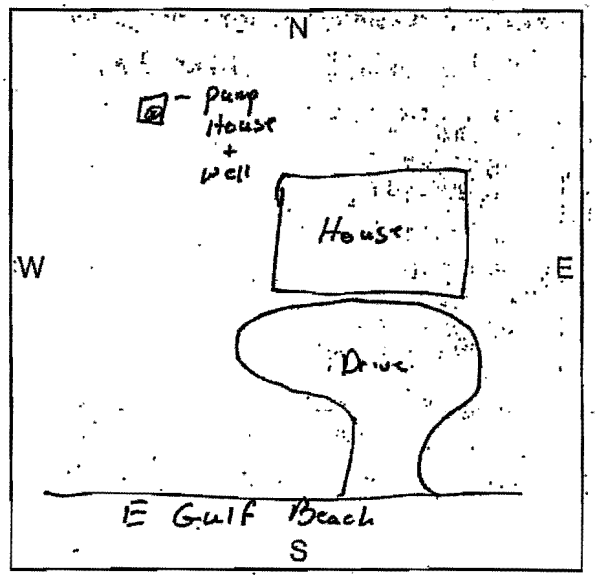
16. Method of Construction:
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth:
23. Normal Yield:
24. Method of Measurement:
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels:
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement:
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth:
29. Depth of Casing:
30. Source of Well Information:
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length:
33. Screened Intervals:
34. Finish:
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAK0771

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

142

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0772
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
Altitude _____ 7.5 Minute Quad: _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): Resort Vacation Prop
665 E Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: 927-2322

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-19-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____
DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 294008.67
GPS LONGITUDE: 845053.11

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

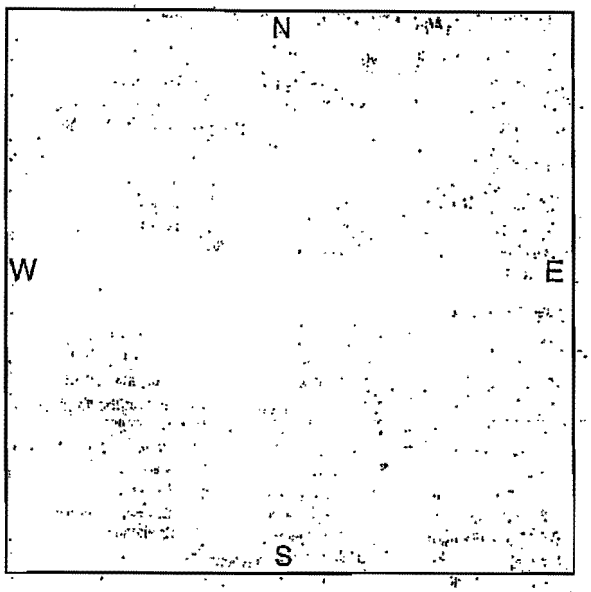
32. Screened Length: _____

33. Screened Intervals: _____

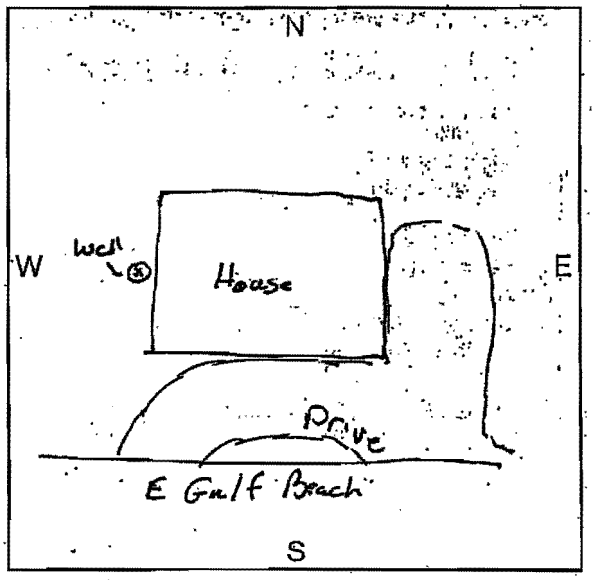
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0772

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 143

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

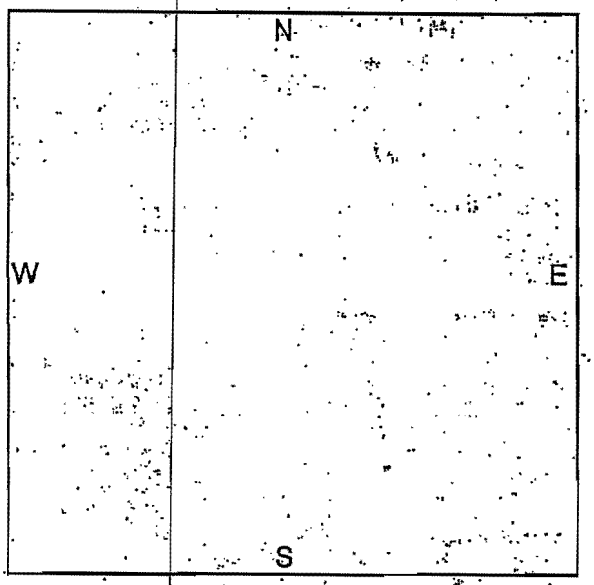
1. **FLORIDA UNIQUE I.D.** AAK0773
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS (Location):** Resort Vectors Properties
    733 ~~775~~ E. Gulf Beach
    City: St George Island
    Zip: _____
    County: _____ Phone: 927-2322
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-19-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 294011.51
    GPS LONGITUDE: 845044.49

WELL INFORMATION
(Information in this column should be filled out if possible)

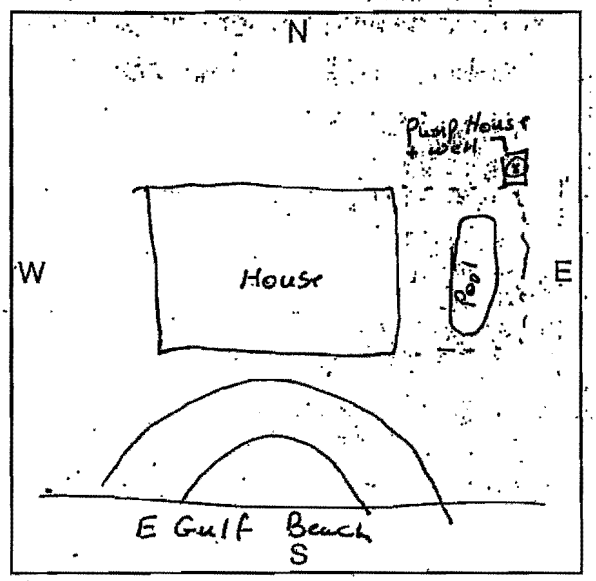
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0773

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

144

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0774
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: James Guernsey
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
765 E. Gulf Beach Drive
City: St George Island
Zip: _____
County: _____ Phone: 850-927-2778

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NW FWMD
DATE: 10-19-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294012.26

GPS LONGITUDE: 8450 40 74

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: U
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totalizing Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

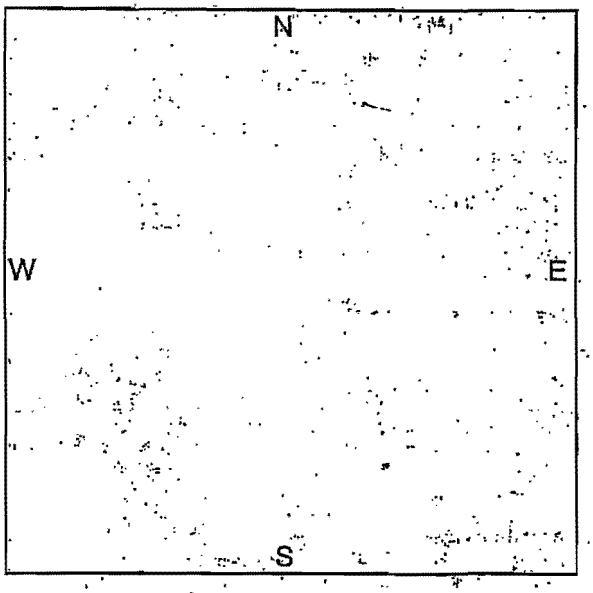
32. Screened Length: _____

33. Screened Intervals: _____

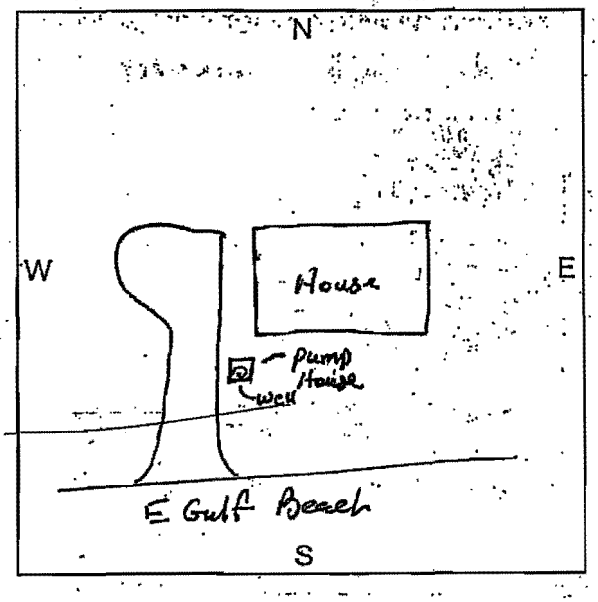
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Pump does not work. Tank has pressure,

FLORIDA
UNIQUE WELL ID
AAK0774

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

145

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0775
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
925 E. Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-19-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294018.91

GPS LONGITUDE: 845020.62

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

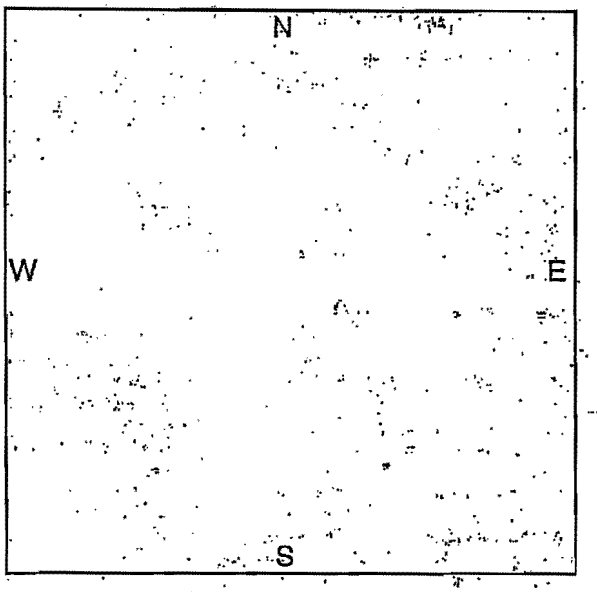
32. Screened Length: _____

33. Screened Intervals: _____

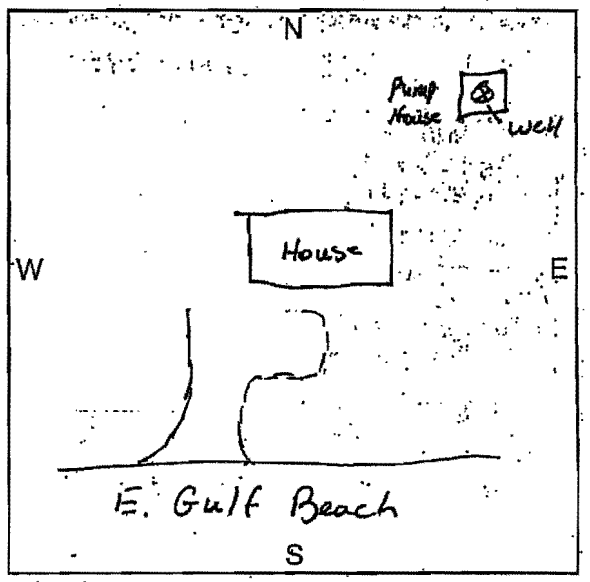
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0775

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

146

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0777
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
941 E Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-19-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 19.67

GPS LONGITUDE: 84 50 18.30

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ / 1½ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

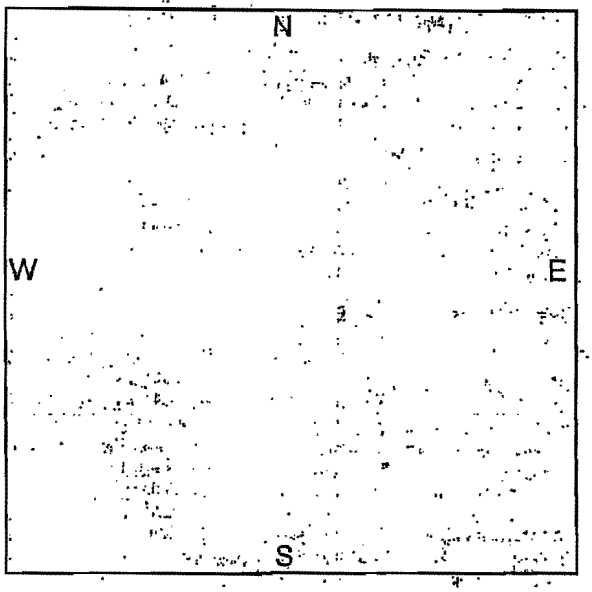
32. Screened Length: _____

33. Screened Intervals: _____

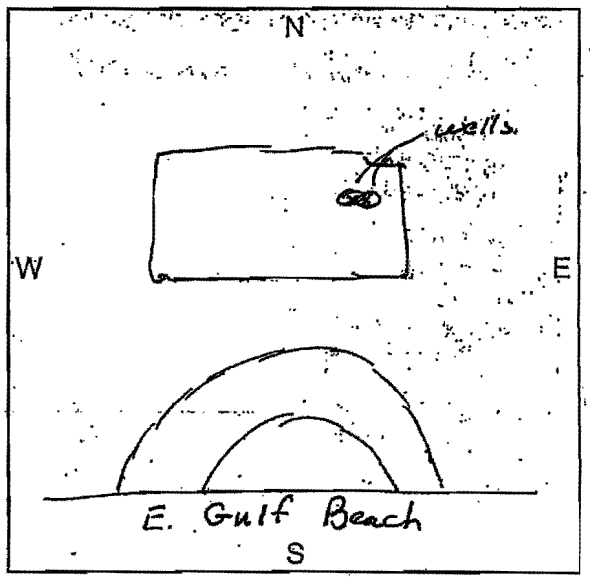
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Two 1½ inch galvan. 2nd wells ≃ 2 feet apart

FLORIDA
UNIQUE WELL ID
AAK0777

147

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0778
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude ____ 7.5 Minute Quad ____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS** (Location): _____
    E. Gulf Beach
    City: St. George Island
    Zip: _____
    County: _____ Phone: _____

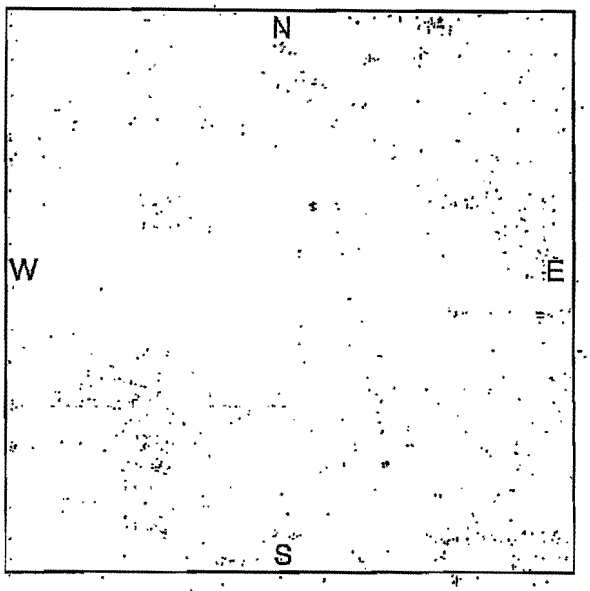
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Brown
    AGENCY: NW FW MD
    DATE: 10-19-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: WGS 85 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29.4020.93
    GPS LONGITUDE: 84502.80

WELL INFORMATION
(Information in this column should be filled out if possible)

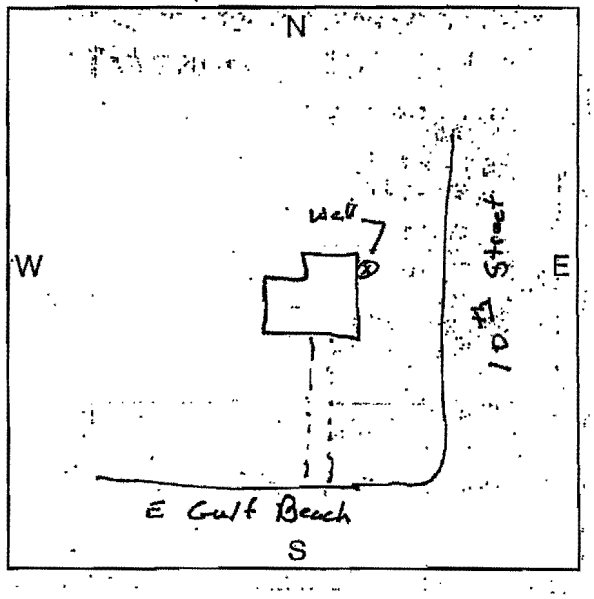
16. Method of Construction: ?
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: U
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: W
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½ 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Well not in use Copper w/ check valve. Sticks up ≈ 2 ft. Located in lot at Corner of 10th & E Gulf Beach.

FLORIDA
UNIQUE WELL ID
AAK0778

148

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0779
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude ____ 7.5 Minute Quad ____

11. **OWNER'S NAME:** Collins Vacation Rentals (owner rep)
12. **Mailing Address:** _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** 927-3900
13. **WELL ADDRESS (Location):** Bali House
    Gulf Beach
    City: St George Island
    Zip: _____
    County: _____ **Phone:** _____

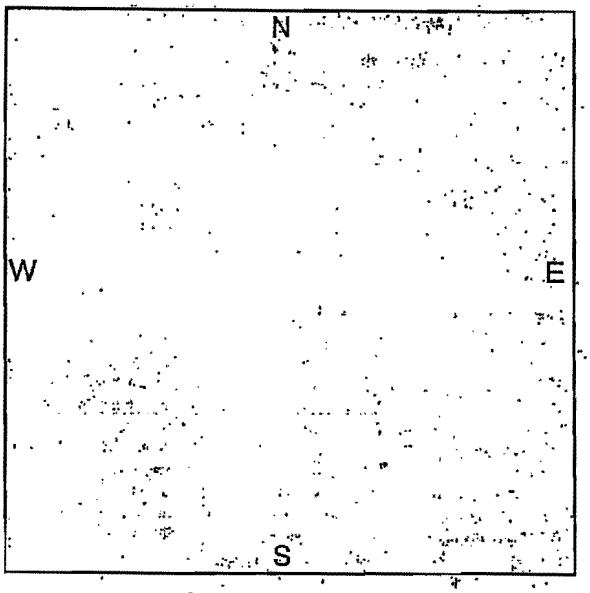
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-19-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ **PHONE:** _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 18.30
    GPS LONGITUDE: 84 50 12.53

WELL INFORMATION
(Information in this column should be filled out if possible)

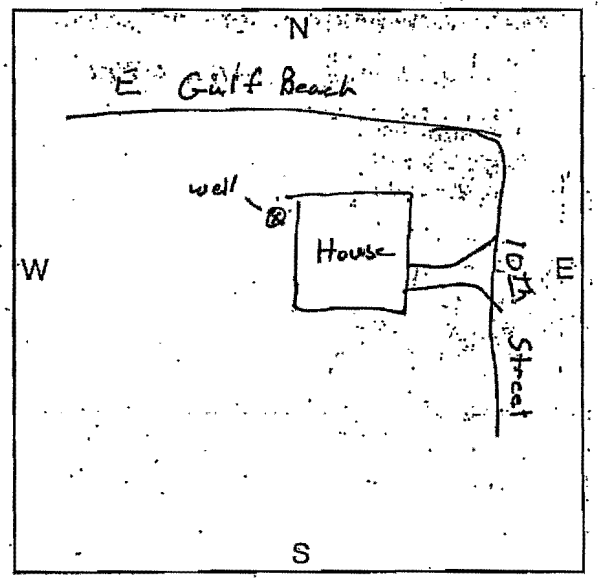
16. Method of Construction: ?
    AU - Air Rotary; AB - Angered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0779

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

149

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0780/AAK0781
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** _____
    E Gulf Beach
    City: St George Island
    Zip: _____
    County: _____ **Phone:** _____

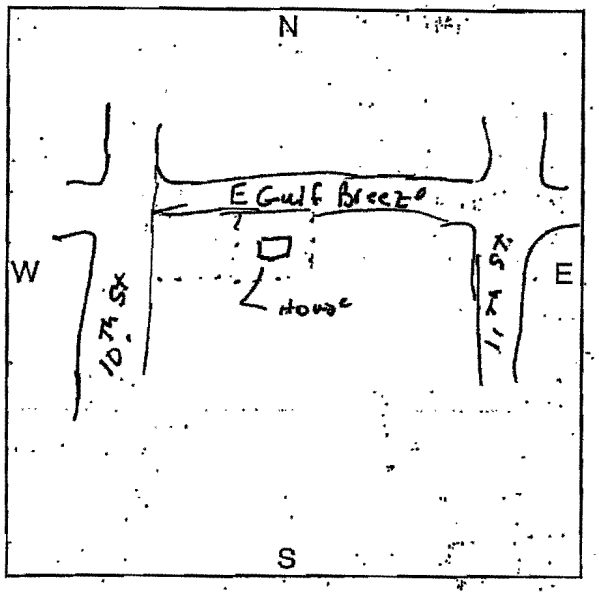
14. **SCHEDULE FILLED OUT BY:**
    NAME: I. Brown
    AGENCY: NWFWMD
    DATE: 10-13-05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ **PHONE:** _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 294019.19
    GPS LONGITUDE: 845009.23

WELL INFORMATION
(Information in this column should be filled out if possible)

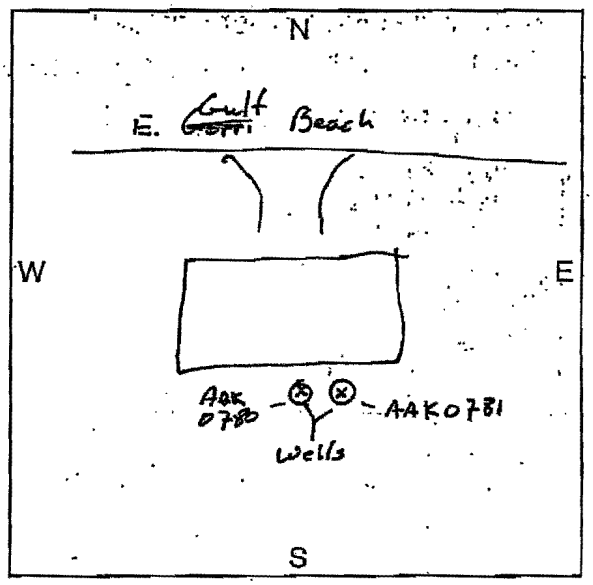
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: U
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: _____
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½/1½ 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0780

FLORIDA
UNIQUE WELL ID
AAK0781

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

150

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded Information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0782
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Robert Gardner
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
1009 E. Gulf Beach Drive
City: St George Drive
Zip: _____
County: _____ Phone: 927-2306

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-18-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294021.81

GPS LONGITUDE: 845010.28

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: JT
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼/1¼/1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

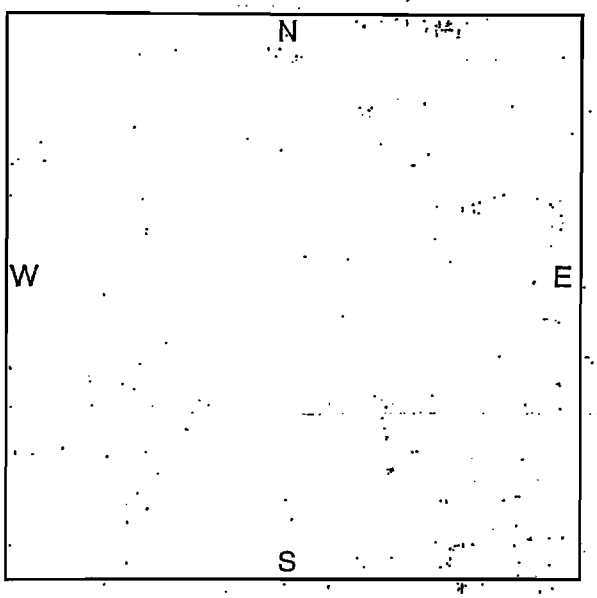
32. Screened Length: _____

33. Screened Intervals: _____

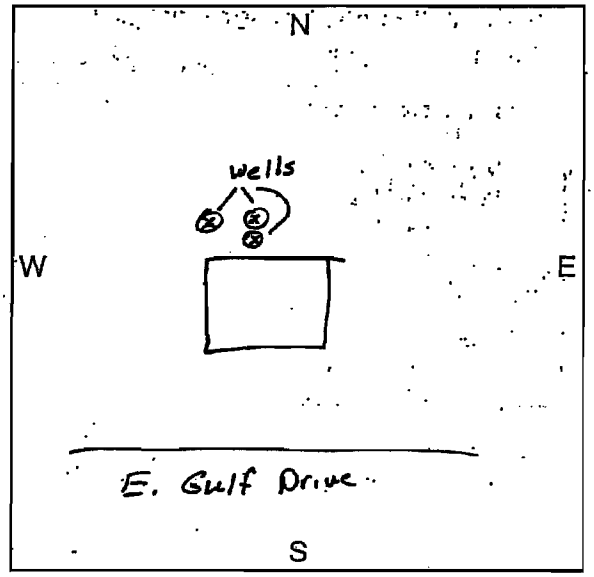
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
3 wells spaced about 5 feet Apart
Wells installed by owner

FLORIDA
UNIQUE WELL ID
AAK0782

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

151

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0783/AAK 0784
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Suncoast Realty
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS (Location):** Tide water
    E Pine Street
    City: St George Island
    Zip: _____
    County: _____ Phone: 927-2282

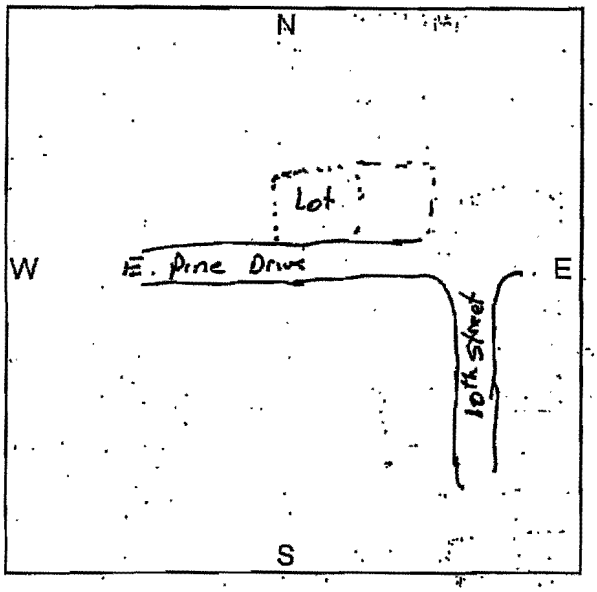
14. **SCHEDULE FILLED OUT BY:**
    NAME: T. Brown
    AGENCY: NWFWMD
    DATE: 10-18-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 294023.64
    GPS LONGITUDE: 84 50 15.63

WELL INFORMATION
(Information in this column should be filled out if possible)

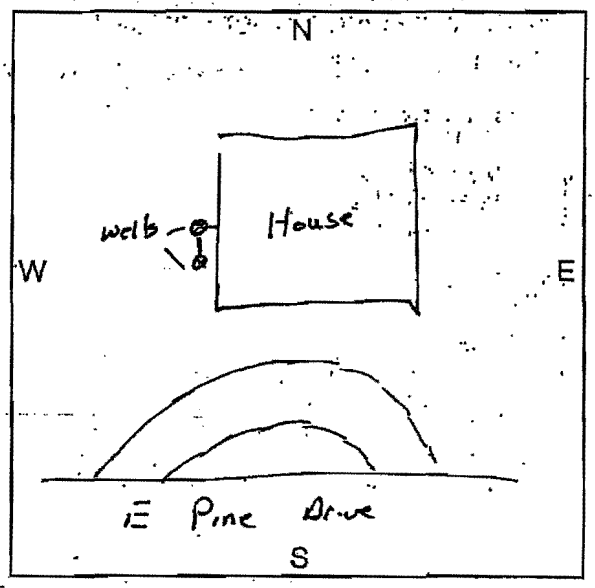
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1¼/1¼ 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P/P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Tandem wells - 2 1¼ in PVC wells

FLORIDA UNIQUE WELL ID
AAK0783

FLORIDA UNIQUE WELL ID
AAK0784

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

151

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 0785
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): Vacant Lot E. Bayshore Drive
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T Brown
AGENCY: NWFWMD
DATE: 10-18-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 14.05

GPS LONGITUDE: 84 50 53.35

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: U
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

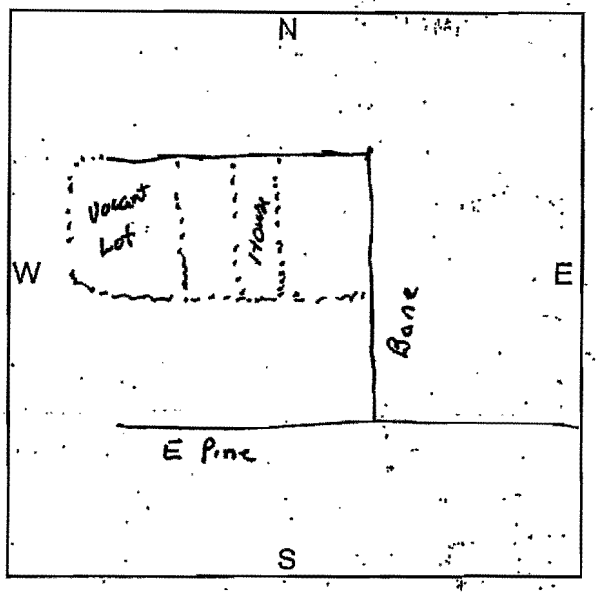
32. Screened Length: _____

33. Screened Intervals: _____

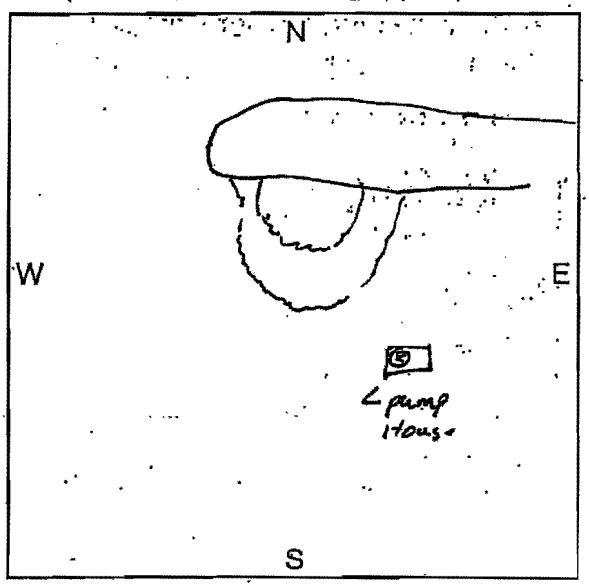
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Well in pump house located on East end of Palms on vacant lot. Lot at end of East Bayshore Drive

FLORIDA
UNIQUE WELL ID
AAK0785

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

153

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0786
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
849 East Pine St
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10.16.05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294018.95

GPS LONGITUDE: 845044.20

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

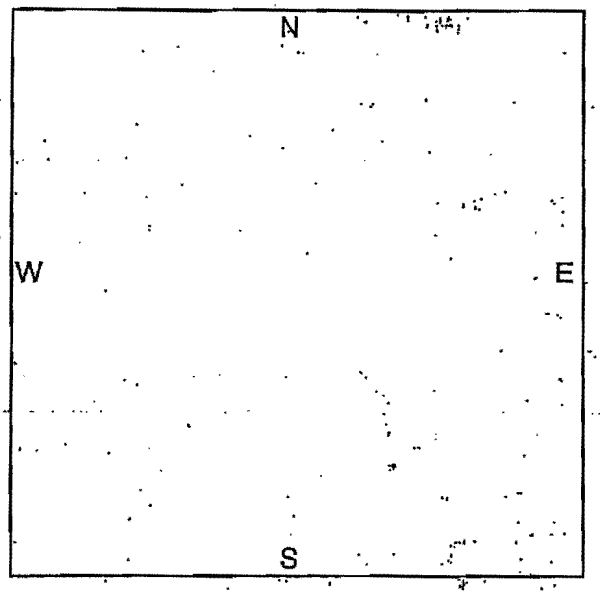
32. Screened Length: _____

33. Screened Intervals: _____

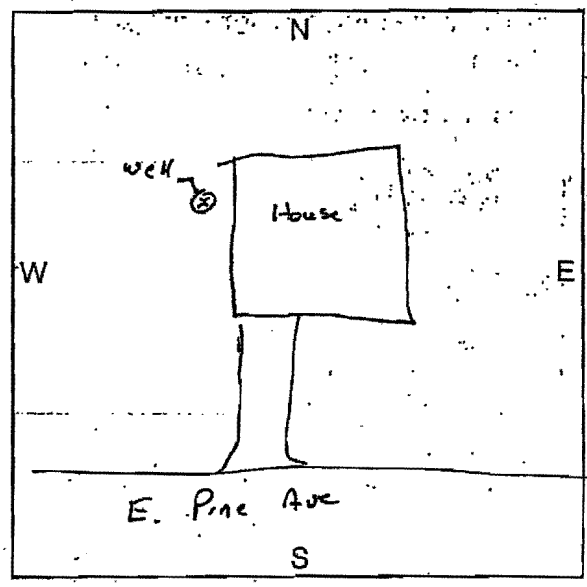
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

GPS reading taken at SW Corner of house

FLORIDA
UNIQUE WELL ID
AAK0786

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

154

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK0788
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
640 E Pine Street
City: St George Island
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: _____ **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ **PHONE:** _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 09.03

GPS LONGITUDE: 84 50 58.04

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 ¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

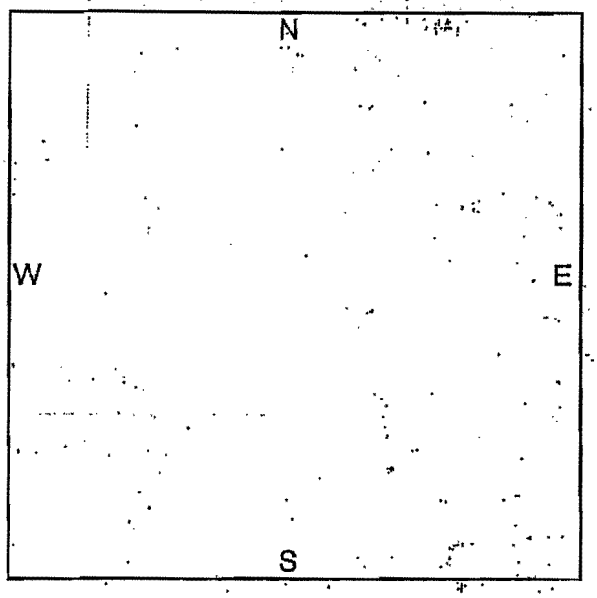
32. Screened Length: _____

33. Screened Intervals: _____

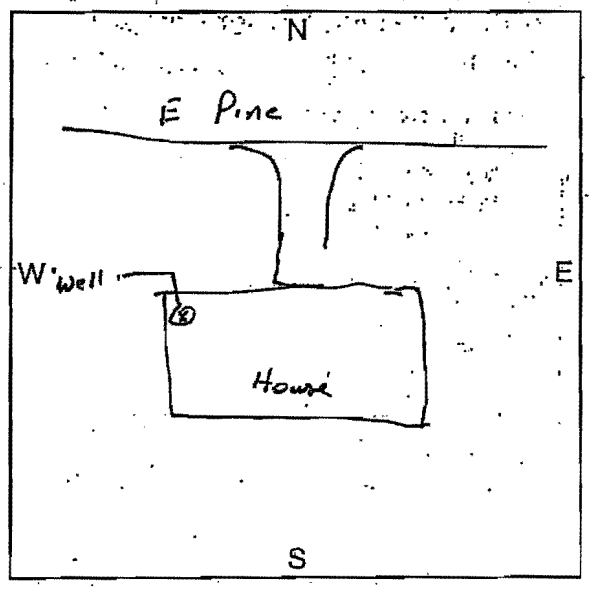
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

Well underneath raised house at NW corner of House

FLORIDA
UNIQUE WELL ID
AAK0788

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

155

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0789
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. **WELL ADDRESS (Location):** _____
608 E. Pine
City: St George Island
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-18-05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 03.63

GPS LONGITUDE: 84 51 12.35

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

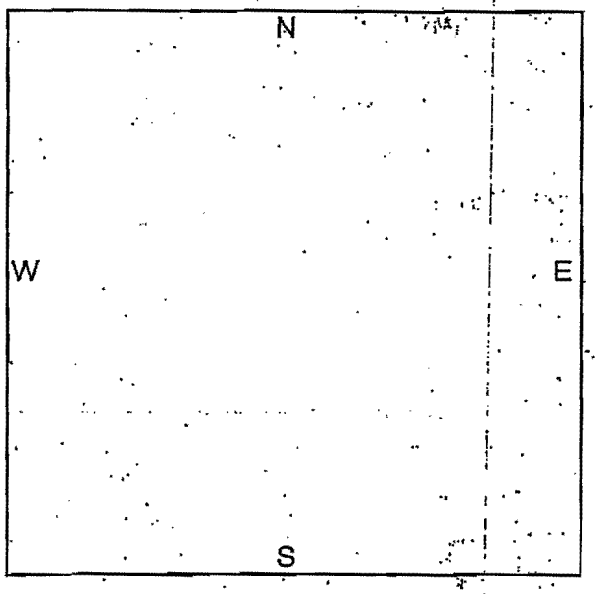
32. Screened Length: _____

33. Screened Intervals: _____

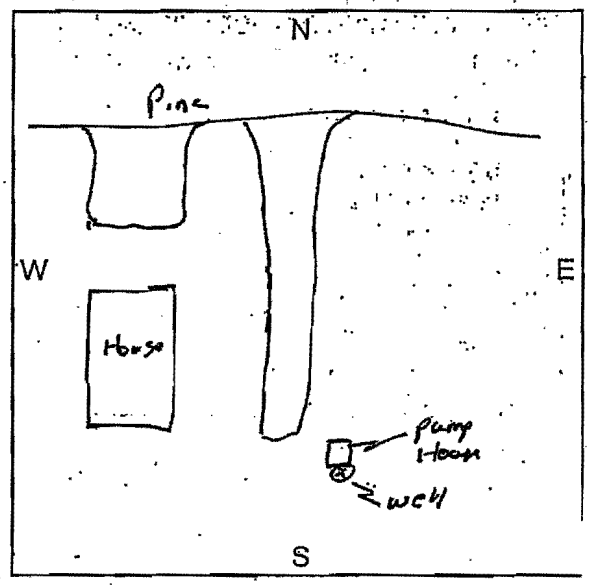
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0789

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

156

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

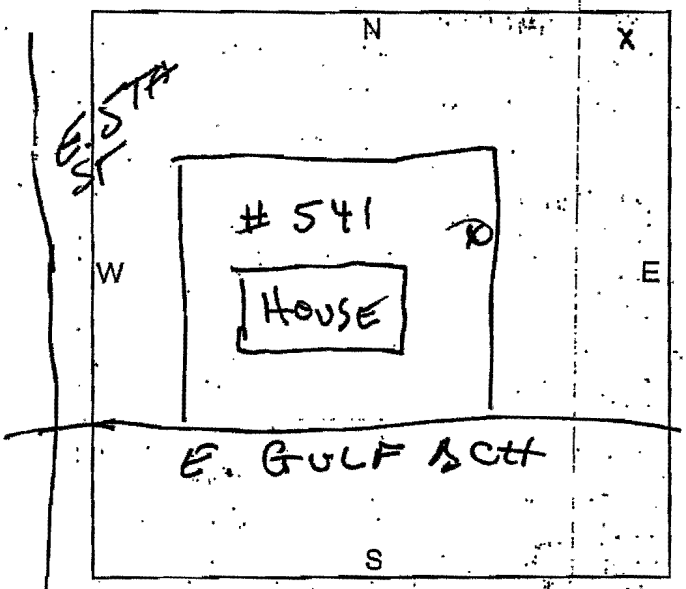
1. FLORIDA UNIQUE I.D. AAK 0790
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. OWNER'S NAME: _____
12. Mailing Address: _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): 541 E. GULF BCH
    City: _____
    Zip: _____
    County: _____ Phone: _____
14. SCHEDULE FILLED OUT BY:
    NAME: JEB
    AGENCY: _____
    DATE: _____ PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: JEB
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 04.31
    GPS LONGITUDE: 84 51 07.62

WELL INFORMATION
(Information in this column should be filled out if possible)

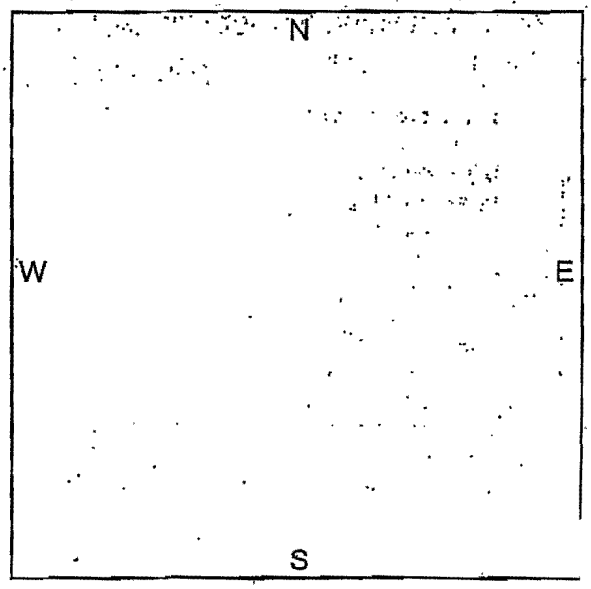
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 HP 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: _____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0790

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

157

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0791
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** J. J. REEDER
12. **Mailing Address:** _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
449 E. GULF BCH
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: GAB
AGENCY: _____
DATE: _____ PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: GAB
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 59.63
GPS LONGITUDE: 84 51 18.90

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: GS
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

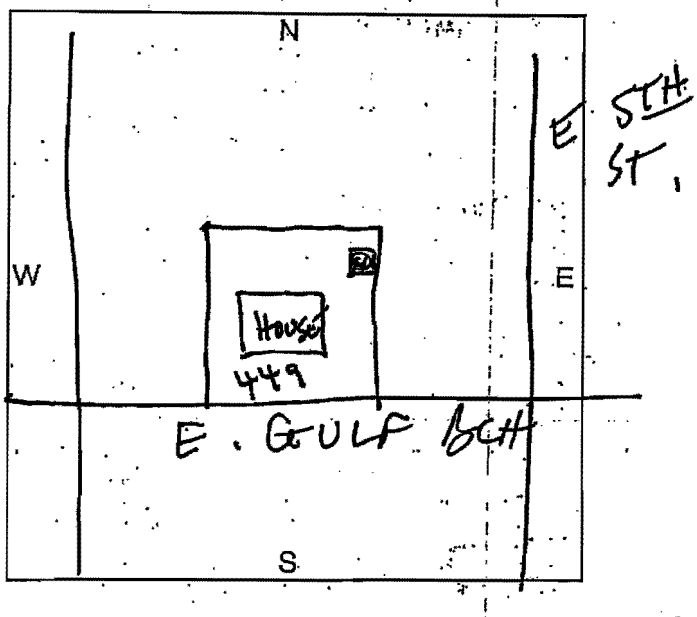
32. Screened Length: _____

33. Screened Intervals: _____

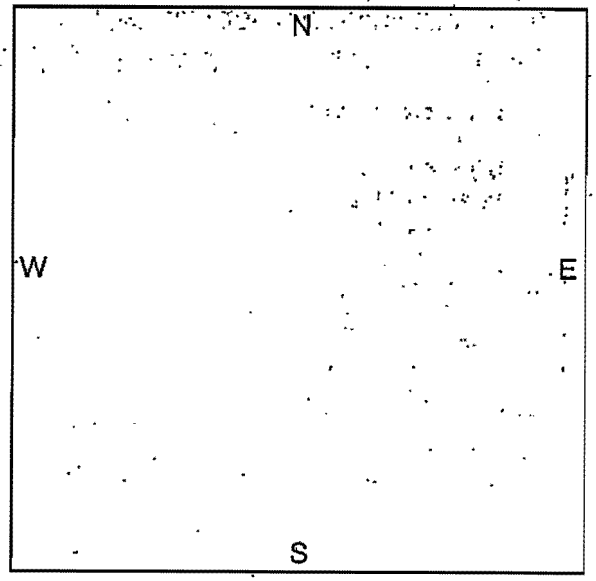
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0791

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 158

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAK 0792
2. NWFWMD GPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)
    Altitude ____ 7.5 Minute Quad ____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    E Gulf & Beach Street
    City: St George Island
    State: _____ Zip: _____
    County: _____ Phone: _____
13. **WELL ADDRESS (Location):** Gillins Anchor
    E Gulf & Beach Street
    City: St George Island
    Zip: _____
    County: _____ Phone: 927-2900

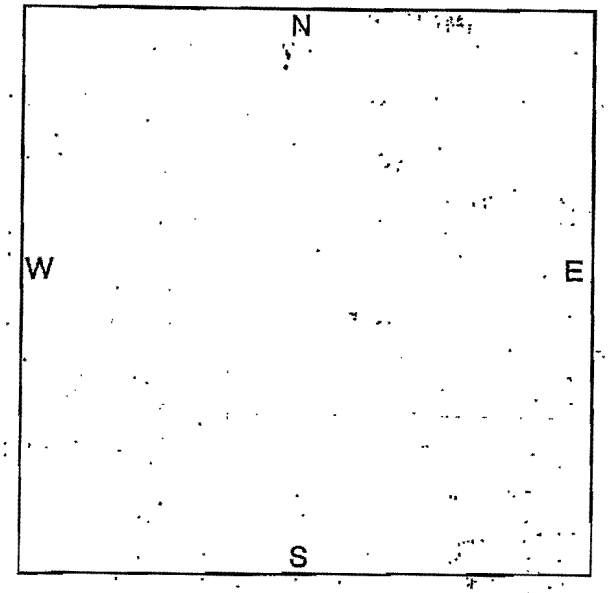
14. **SCHEDULE FILLED OUT BY:**
    NAME: Tom Brow
    AGENCY: NWFWMD
    DATE: 10-17-05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: _____
    AGENCY: _____
    DATE: _____ PHONE: _____
    DATUM: WGS 84 (Default WGS 84)
    EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 294004.28
    LONGITUDE: 845106.58

WELL INFORMATION
(Information in this column should be filled out if possible)

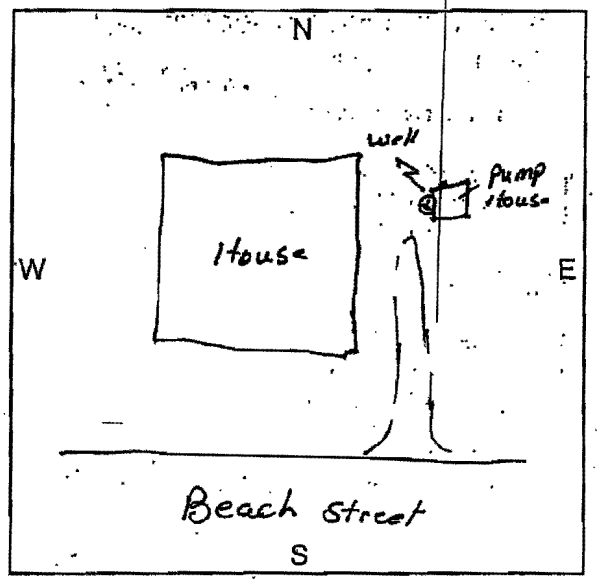
16. Method of Construction: ?
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½ ? 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: S
    S - Screen; O - Open End; X - Open Hole; Z - Other

return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAK0792

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

159

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0793
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
6th Street
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brown
AGENCY: NWFWMD
DATE: 10-17-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294002.70

GPS LONGITUDE: 845103.35

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

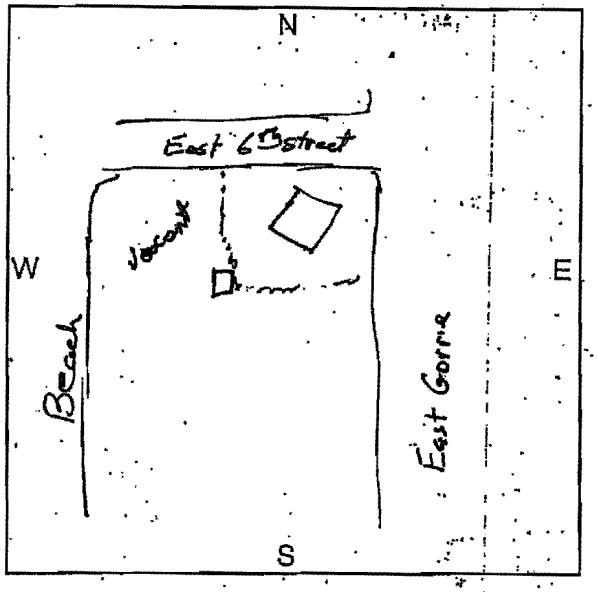
32. Screened Length: _____

33. Screened Intervals: _____

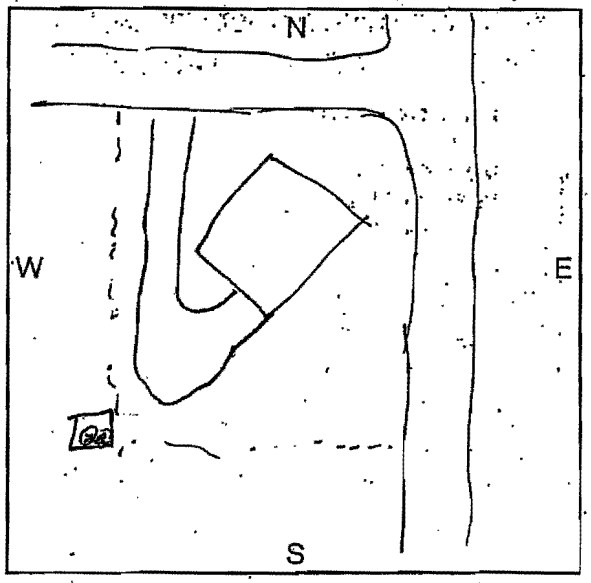
34. Finish: S
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

Two 1¼ Galvanized wells ≃ 8" apart - Single Tag

FLORIDA
UNIQUE WELL ID
AAK0793

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

160

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0794
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (If any):
9. SYSTEM NAME (If any):
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** Fredrick McKerman
12. **Mailing Address:**

City:
State: Zip:
County: Phone:

13. **WELL ADDRESS (Location):** Seahaze 556 E. Gorrie
City: East St George Island
Zip:
County: Phone:

14. **SCHEDULE FILLED OUT BY:**
NAME: Tom Brown
AGENCY: NWFWMD
DATE: 10-17-05 PHONE:

15. **GPS INFORMATION PROVIDED BY:**
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS-84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294000.04

GPS LONGITUDE: 845102.61

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

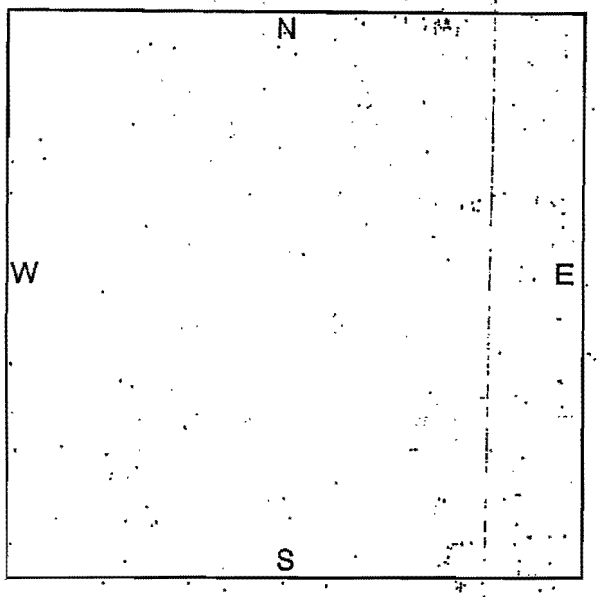
32. Screened Length: _____

33. Screened Intervals: _____

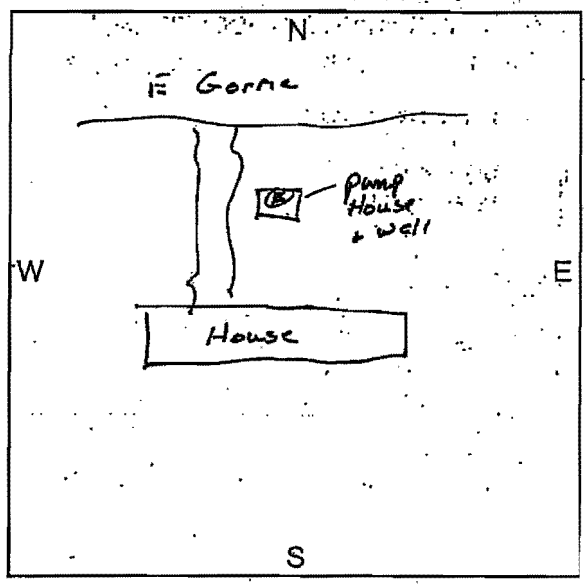
34. Finish: S
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Property Managed by Collins Vacation Rentals
850-927-2900

FLORIDA
UNIQUE WELL ID
AAK0794

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

161

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D.: AAK 0795
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
408 E. Gorrie Street
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brow
AGENCY: NWFWMD
DATE: 10-17-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: Tom Brow
AGENCY: NWFWMD
DATE: 10-17-05 PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293953.80

GPS LONGITUDE: 845121.38

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ? 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: ? 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: ?
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

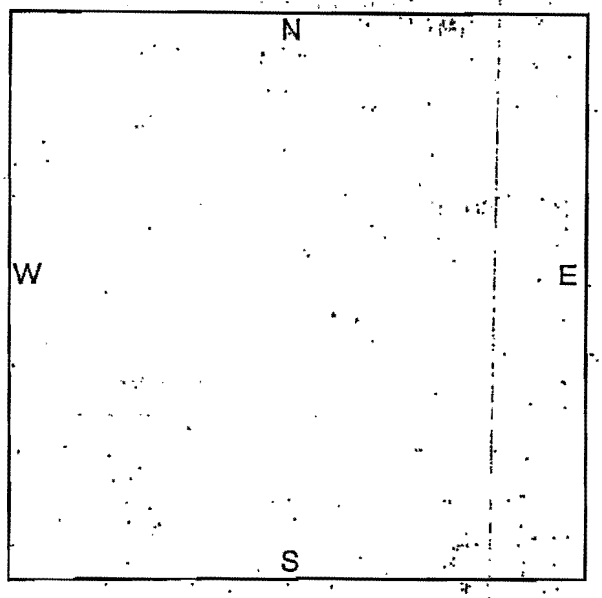
32. Screened Length: _____

33. Screened Intervals: _____

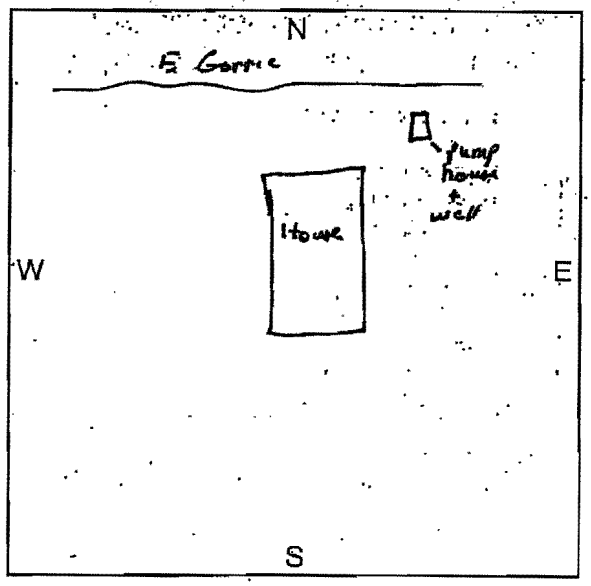
34. Finish: S
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Well inside dog house w/ no door. Did not access well

FLORIDA
UNIQUE WELL ID
AAK0795

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

1602

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0796
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Bassetts
12. Mailing Address:

City:
State: Zip:
County: Phone:

13. WELL ADDRESS (Location):
424 E. Gorrie
City: St. George Island
Zip:
County: Phone:

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brown
AGENCY: NWFWMD
DATE: 10-17-05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 293954.35

GPS LONGITUDE: 8451 19.16

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield:

24. Method of Measurement:
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: BS
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

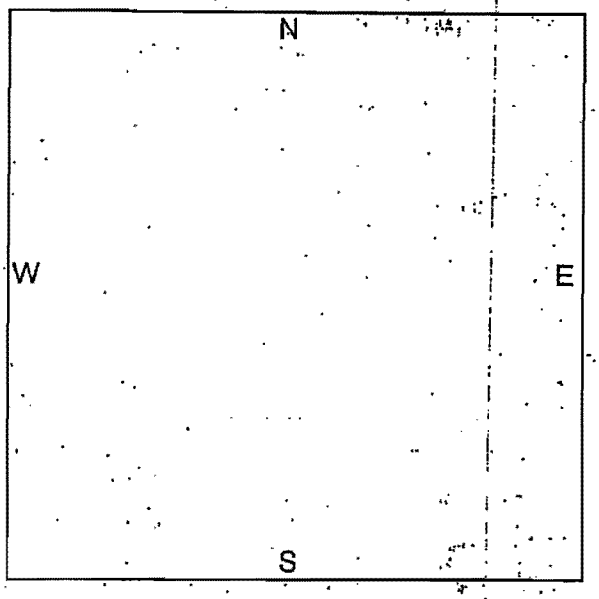
32. Screened Length:

33. Screened Intervals:

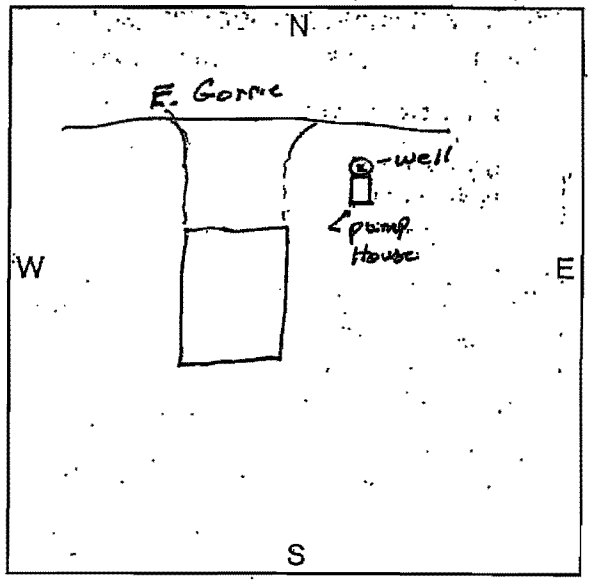
34. Finish: S
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

Well Insulated - diameter not Certain

FLORIDA
UNIQUE WELL ID
AAK0796

163

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0797
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: George + Madell Kirvin
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
332 E Gorrie Street
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brown
AGENCY: NWFWMD
DATE: _____ PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 39 51.69
GPS LONGITUDE: 84 51 24.26

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1.5 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

32. Screened Length: _____

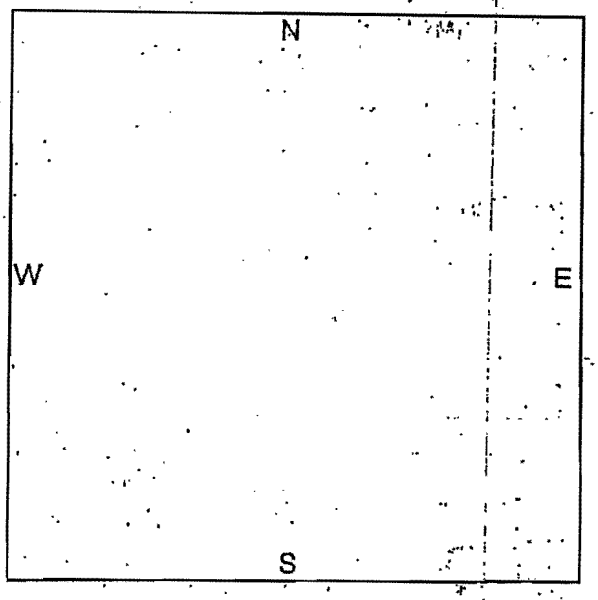
33. Screened Intervals: _____

34. Finish: S
S - Screen; O - Open End; X - Open Hole; Z - Other

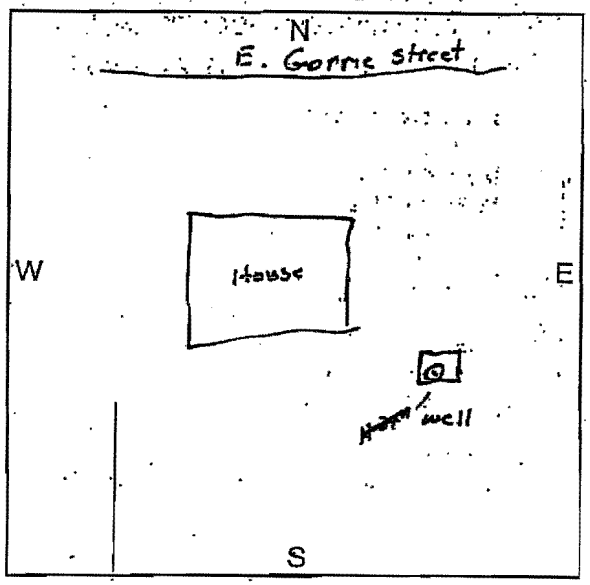
Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

see 072282 - Suncoast Rentals - request domestic excess - OK Kaveal

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
2 wells in pump house - 2nd well is 1¼" PVC

FLORIDA
UNIQUE WELL ID
AAK0797

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK0798
2. NWFWMD CPS I.D.: ~~AAK~~
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude ____ 7.5 Minute Quad ____

11. OWNER'S NAME: George + Modell Kirwin
12. Mailing Address:

City:
State: Zip:
County: Phone:

13. WELL ADDRESS (Location):
332 Gorrie Street
City: St George Island
Zip:
County: Phone:

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brow
AGENCY: NWFWMD
DATE: 10-17-05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 51.69

GPS LONGITUDE: 84 51 24. 26

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monito/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1/2 22. Pump Intake Depth: ____

23. Normal Yield:

24. Method of Measurement:
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth:

29. Depth of Casing:

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

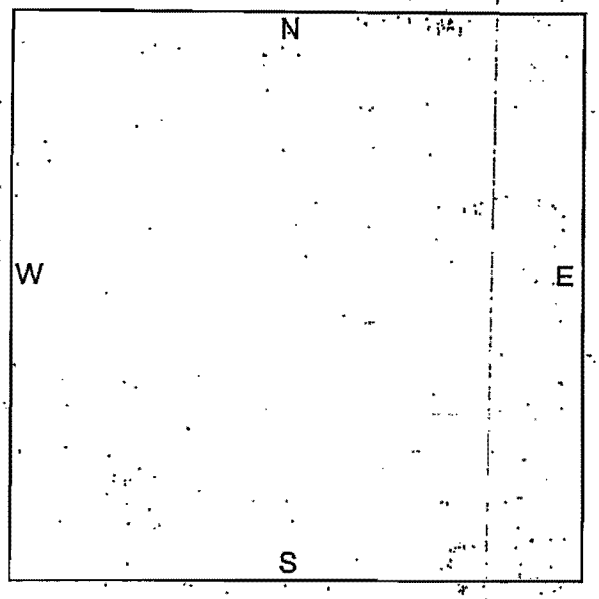
32. Screened Length:

33. Screened Intervals:

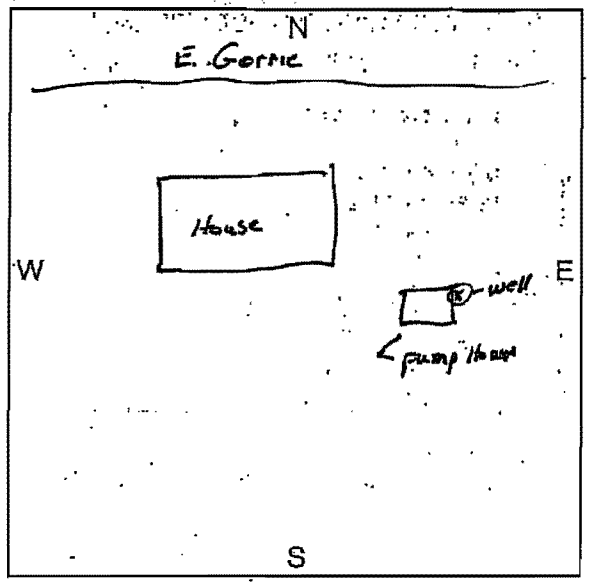
34. Finish: S
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

PVC well Well is in use a second well is inside Pump house Second well is 1½ inch Galvanized not in use

FLORIDA
UNIQUE WELL ID
AAK0798

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

164

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAK 0799
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
300 E. Gorrie Street
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brown
AGENCY: NWFWMD
DATE: 10-17-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 50.20

GPS LONGITUDE: 84 51 28.96

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: ?
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: ? 28. Well Depth: _____

29. Depth of Casing: _____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: ?
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

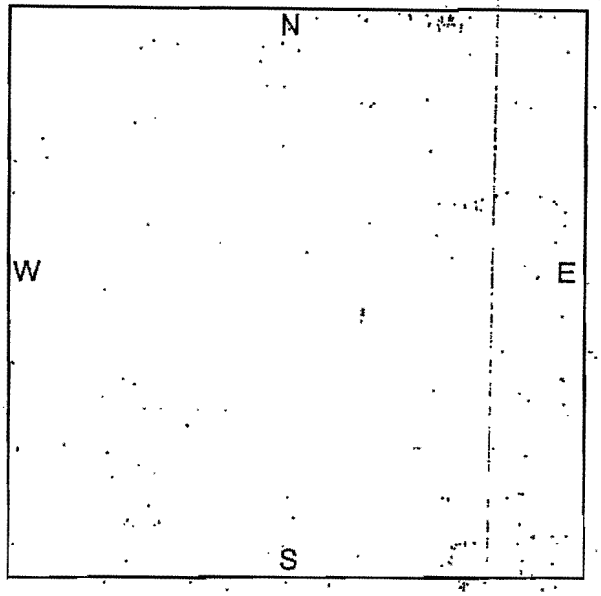
32. Screened Length: _____

33. Screened Intervals: _____

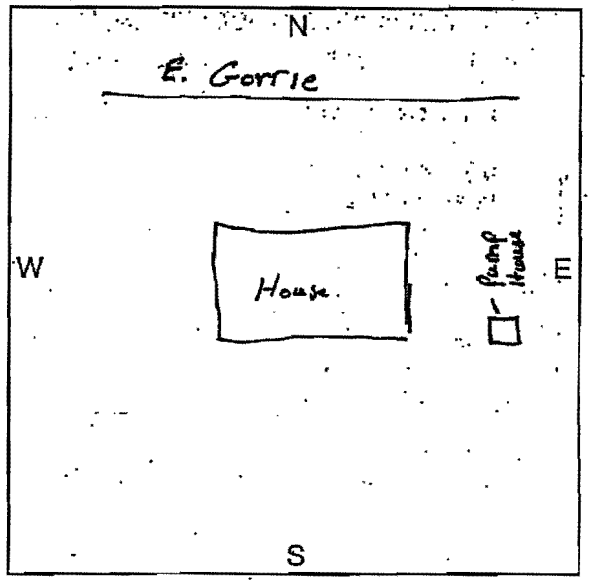
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Tag placed on door of pump house. Did not have owner permission to access well

FLORIDA
UNIQUE WELL ID
AAK0799

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

165

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA3688
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
1205 E. Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-20-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294028.10

GPS LONGITUDE: 844942.92

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: _____ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

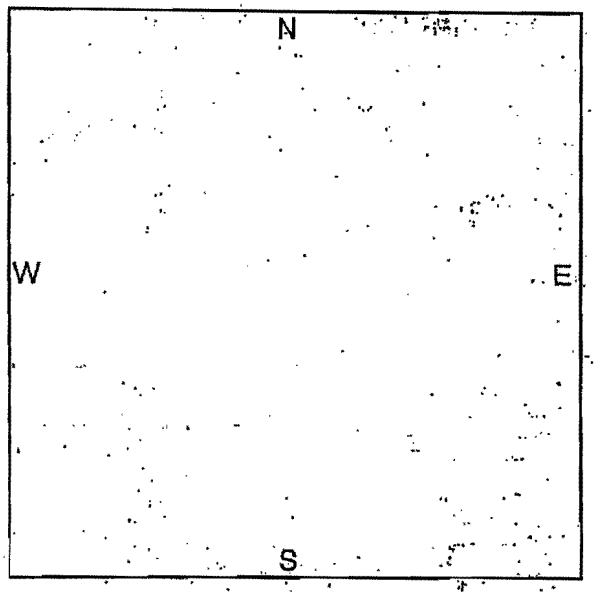
32. Screened Length: _____

33. Screened Intervals: _____

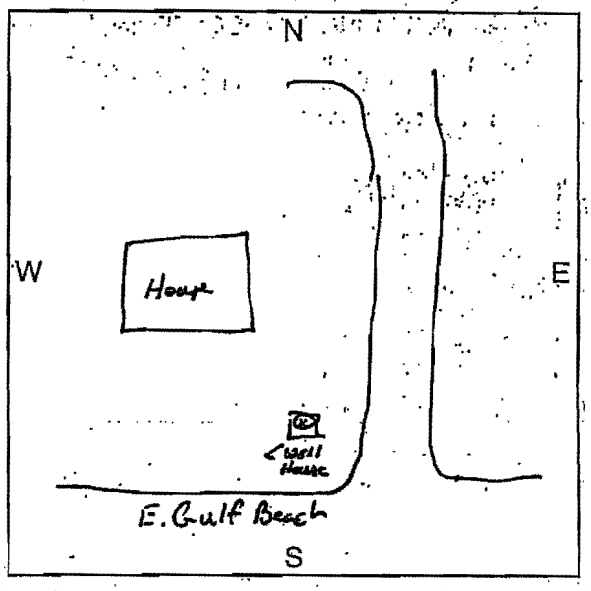
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
Pump House does not have door - could not access well.

FLORIDA
UNIQUE WELL ID
AAA3688

STATE OF FLORIDA

WELL INVENTORY AND INSPECTION SCHEDULE

166

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAA 3691
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
1105 E. Gulf Beach
City: St George Island
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-20-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294025.04

GPS LONGITUDE: 8449 57 03

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

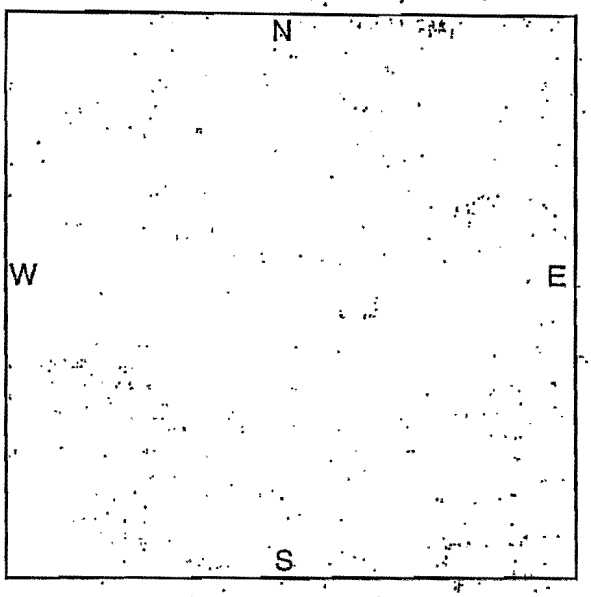
32. Screened Length: _____

33. Screened Intervals: _____

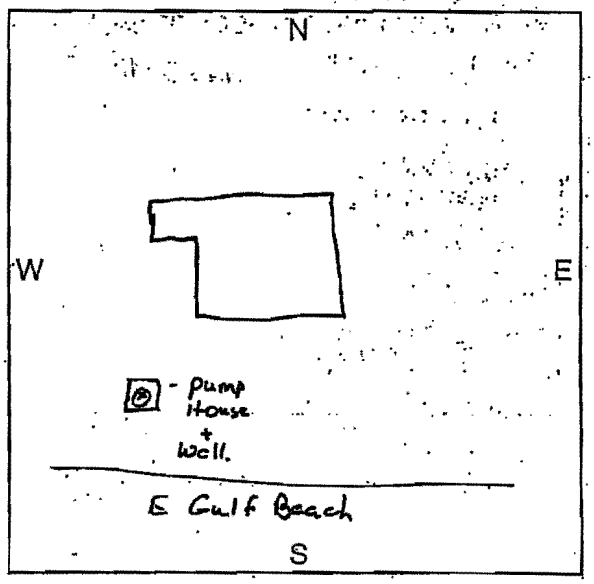
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAA3691

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

167

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4746
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** ____ (N or S) **R** ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

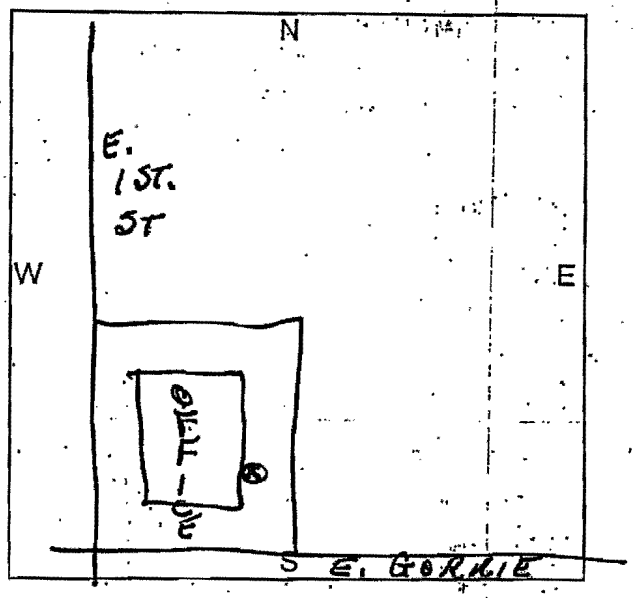
11. **OWNER'S NAME:** PRUDENTIAL
12. **Mailing Address:** REALTY 45 E. 1ST ST.
City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** 45 E. 1ST ST.
City: _____
Zip: _____
County: _____ **Phone:** _____
14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 10/13/05 **PHONE:** _____
15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/13/05 **PHONE:** _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 39 49.17
GPS LONGITUDE: 84 51 39.63

WELL INFORMATION
(Information in this column should be filled out if possible)

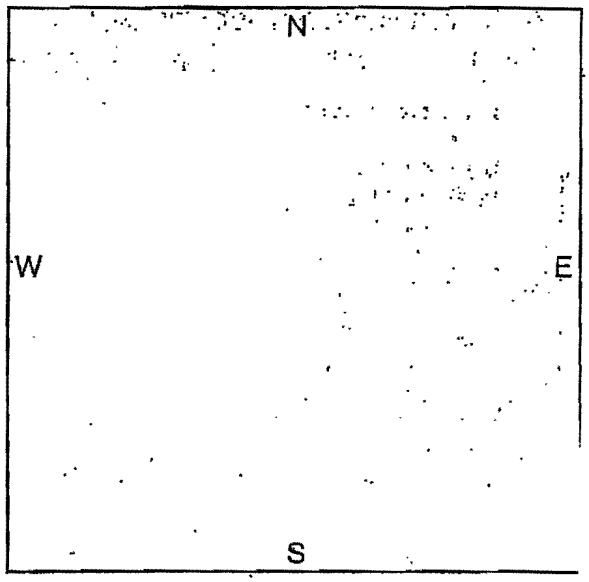
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4746

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

168

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAS 4747
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** WILLIAM SHORT
12. **Mailing Address:** 160 E. PINE AVE
THE ISLAND EMPORIUM
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** _____
SAME
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/13/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/13/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 54.07

GPS LONGITUDE: 84 51 38.85

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: _____
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

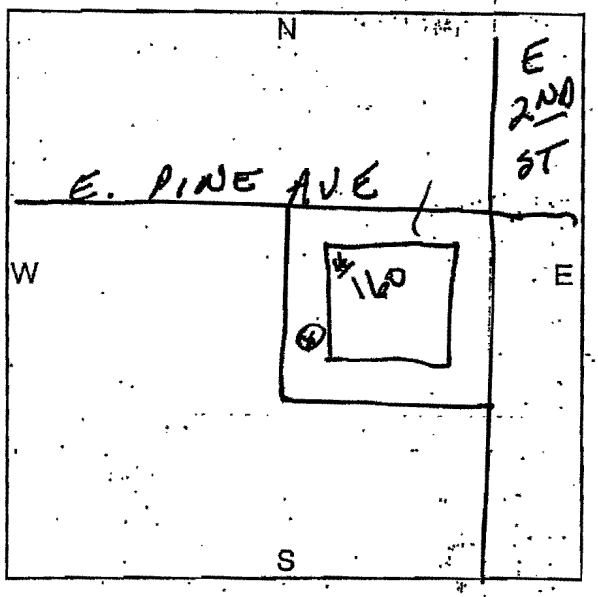
32. Screened Length: _____

33. Screened Intervals: _____

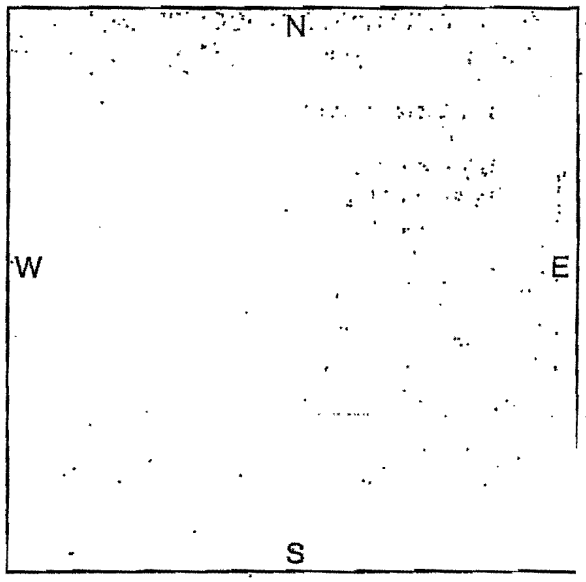
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4747

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

169

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ4749
2. NWFWMD CPS I.D.: ____
3. NWFWMD WI I.D.: ____
4. NWFWMD WU I.D.: ____
5. DEP PWS I.D.: ____
6. ALT. DEP I.D.: ____
7. HRS I.D.: ____
8. WELL NAME (if any): ____
9. SYSTEM NAME (if any): ____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude ____ 7.5 Minute Quad ____

11. OWNER'S NAME: Anchor Realty Brent Banks
12. Mailing Address: ____
City: ____
State: ____ Zip: ____
County: ____ Phone: ____
13. WELL ADDRESS (Location): ____
119 Franklin
City: St George Island
Zip: ____
County: ____ Phone: 850-927-2625 927-2625

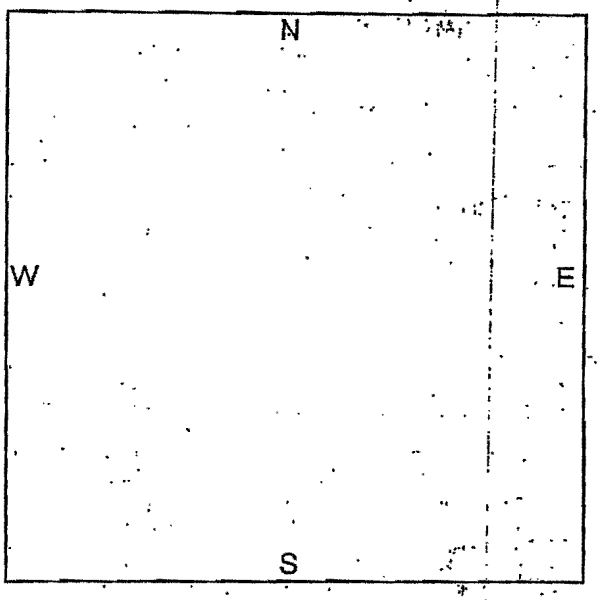
14. SCHEDULE FILLED OUT BY:
NAME: Tom Blow
AGENCY: ____
DATE: ____ PHONE: ____
15. GPS INFORMATION PROVIDED BY:
NAME: ____
AGENCY: ____
DATE: ____ PHONE: ____
DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29°39'50.09"
GPS LONGITUDE: 84°51'45.00"

WELL INFORMATION
(Information in this column should be filled out if possible)

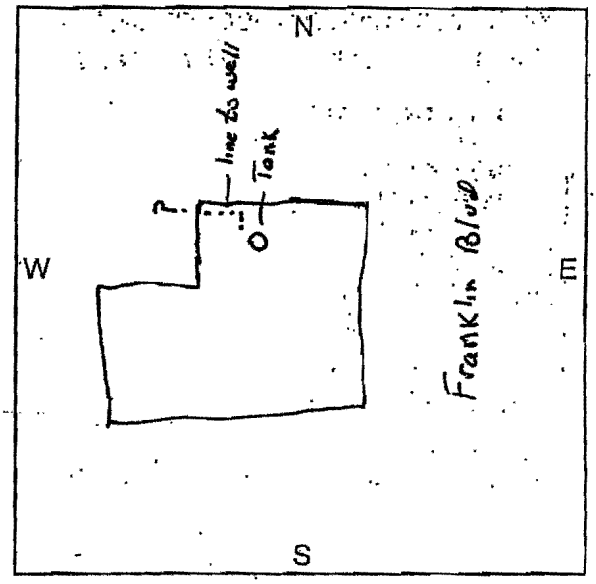
16. Method of Construction: ____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: ____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: ____
24. Method of Measurement: ____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: ____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: ____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: ____
29. Depth of Casing: ____
30. Source of Well Information: ____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: ____
33. Screened Intervals: ____
34. Finish: ____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4749

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

170

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4750
2. NWFWMD CPS I.D.:
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: ~~Starfish Apts~~ Sarah Rodrigue
12. Mailing Address: 151 East Gorrie Corner
916 East Park Ave
City: ~~St George Island~~ Tallahassee
State: _____ Zip: _____
County: _____ Phone: 850-222-1396
13. WELL ADDRESS (Location): 151 East Gorrie
City: St George Island
Zip:
County: Franklin Phone:

14. SCHEDULE FILLED OUT BY:
NAME: Tom Brown
AGENCY: NWFWMD
DATE: 10-13-05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME:
AGENCY:
DATE: PHONE:

DATUM: WGS84 (Default WGS 84)
EST. ACCURACY: 5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29°39'50.46"

GPS LONGITUDE: 84°51'36.82"

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: ?
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; (W) - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: ~~PS~~ LP
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power:
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield:

24. Method of Measurement:
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: ____ 28. Well Depth: ____

29. Depth of Casing: ____

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

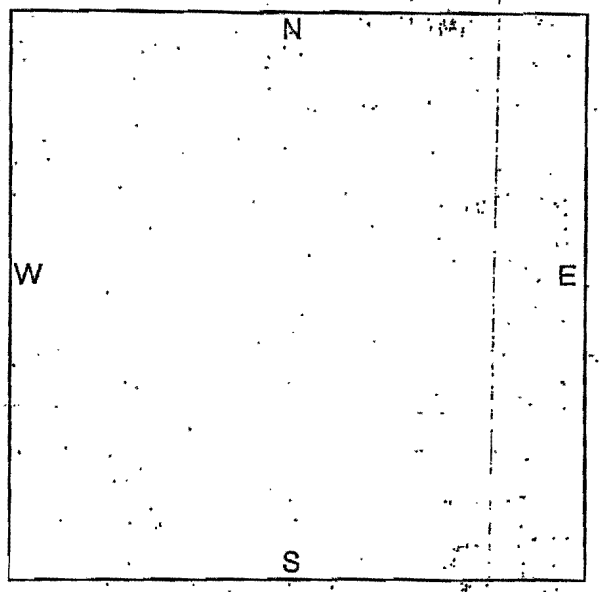
32. Screened Length:

33. Screened Intervals:

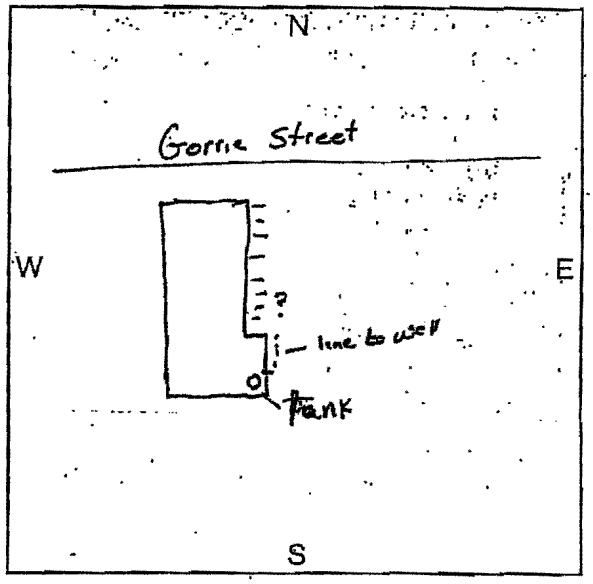
34. Finish:
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
Well off-Set and below grade exact location of well not known

FLORIDA
UNIQUE WELL ID
AAJ4750

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 171

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAJ 4751
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

RESORT VAC. PROPERTIES
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** SHADIPER COTTAGE # NOT FOUND
City: CORNER E. 5TH & E. GORRIE
Zip: _____
County: FRANKLIN Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/17/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: J.E. BRIGHT
AGENCY: _____
DATE: 10/17/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 39 58.95

GPS LONGITUDE: 84 51 11.83

WELL INFORMATION
(Information in this column should be filled out if possible)

16. **Method of Construction:** _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. **Use of Site:** _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. **Use of Water:** _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. **Type of Lift:** C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. **Type of Power:** E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. **Horse Power:** 1 22. **Pump Intake Depth:** ____

23. **Normal Yield:** _____

24. **Method of Measurement:** _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. **Water Levels:** _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. **Method of Measurement:** _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. **Diameter:** 2" 28. **Well Depth:** _____

29. **Depth of Casing:** ____

30. **Source of Well Information:** _____
(Field Measurement, Logging Equipment, Permit, Other)

31. **Casing Material:** P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

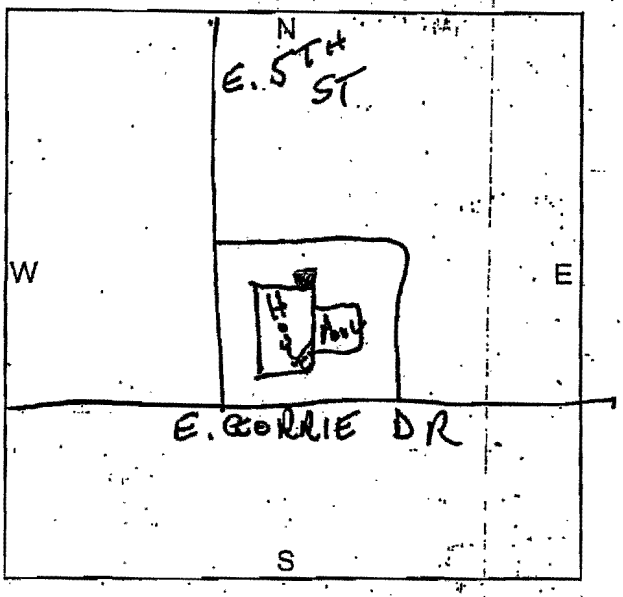
32. **Screened Length:** _____

33. **Screened Intervals:** _____

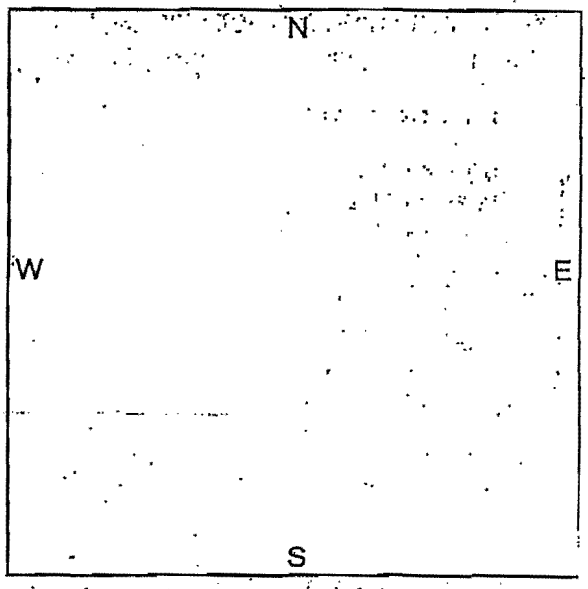
34. **Finish:** _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4751

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

172

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4752
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

RESORT VACATION PROP.

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____
13. WELL ADDRESS (Location): 517 E. GORRIE
City: _____
Zip: _____
County: _____ Phone: _____

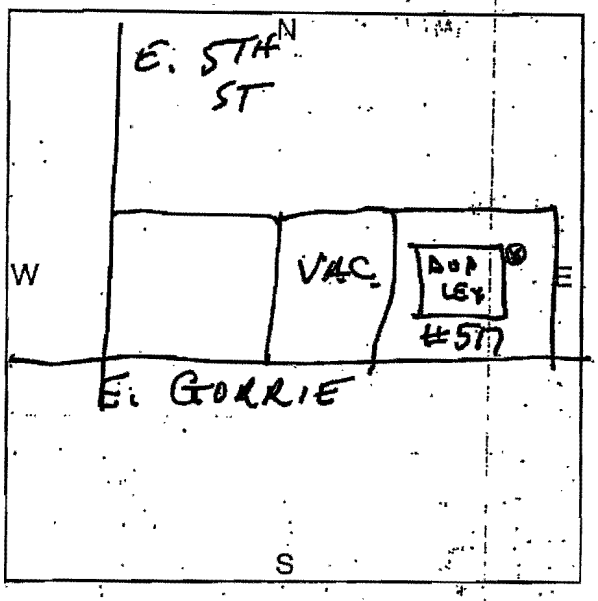
14. SCHEDULE FILLED OUT BY:
NAME: G.E. B
AGENCY: _____
DATE: 10/17/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
NAME: G.E. B
AGENCY: _____
DATE: 10/17/05 PHONE: _____
DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
GPS LATITUDE: 29 39 59.68
GPS LONGITUDE: 84 51 09.27

WELL INFORMATION
(Information in this column should be filled out if possible)

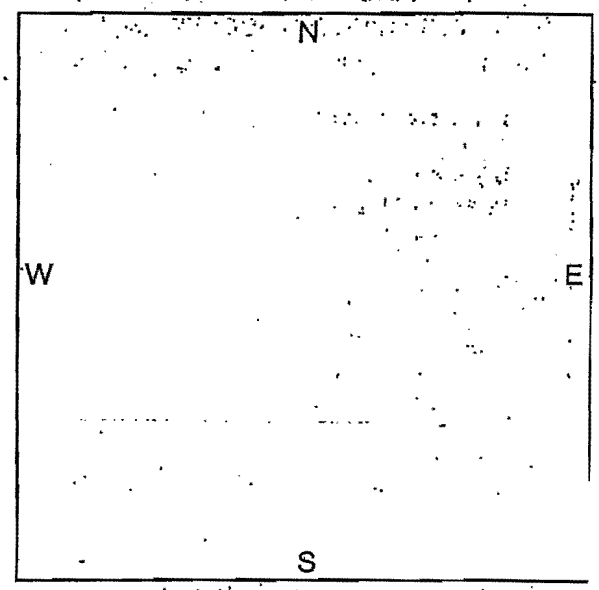
16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: 1 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4752

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

173

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4753
2. NWFWMD CPS I.D.: AAJ 4754
3. NWFWMD WI I.D.:
4. NWFWMD WU I.D.:
5. DEP PWS I.D.:
6. ALT. DEP I.D.:
7. HRS I.D.:
8. WELL NAME (if any):
9. SYSTEM NAME (if any):
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME:
12. Mailing Address:

City:
State: Zip:
County: Phone:

13. WELL ADDRESS (Location): 549 E. GORRIE
City:
Zip:
County: Phone:

14. SCHEDULE FILLED OUT BY:
NAME: GSL
AGENCY:
DATE: 10/17/05 PHONE:

15. GPS INFORMATION PROVIDED BY:
NAME: GSL
AGENCY:
DATE: 10/17/05 PHONE:

DATUM: (Default WGS 84)
EST. ACCURACY: (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 01.03
GPS LONGITUDE: 84 51 05.10

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction:
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: U
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water:
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power:
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield:

24. Method of Measurement:
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels:
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement:
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth:

29. Depth of Casing:

30. Source of Well Information:
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

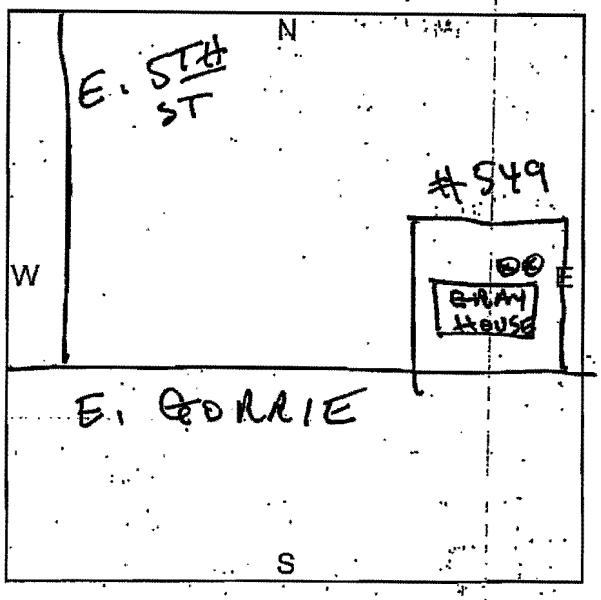
32. Screened Length:

33. Screened Intervals:

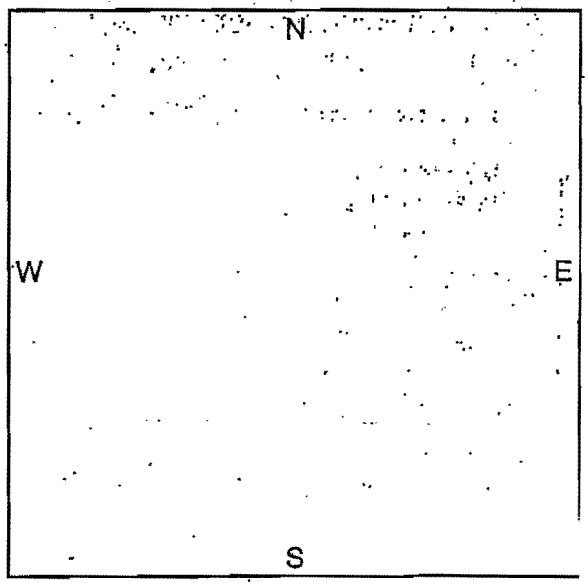
34. Finish:
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Ex

46. Is Well location Subject to Flooding? YES NO Explain_____

FLORIDA
UNIQUE WELL ID
AAJ4753

47. REMARKS/NOTES
2 1¼ GALV. WELLS ON THIS PROPERTY NEITHER WELL HAS A PUMP ON IT NOR HAS EITHER BEEN PLUGGED

FLORIDA
UNIQUE WELL ID ?
AAJ4754
He:

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4755
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
T ____ (N or S) R ____ (E or W)
Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 616 E. GORRIE
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: [signature]
AGENCY: _____
DATE: 10/17/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: [signature]
AGENCY: _____
DATE: 10/17/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 01.67

GPS LONGITUDE: 84 50 57.22

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary, AB - Augered/Bored, BB - Bail Bucket, CO - Combination, CT - Cable Tool, DR - Driven, DU - Dug, HR - Hydraulic Rotary, JT - Jetted, RR - Reverse Rotary, OT - Other

17. Use of Site: _____
A - Properly Abandoned, C - Core, D - Drainage, M - Monitor/Observation, P - Oil/Gas, R - Return, S - Standby, T - Test, U - Unused, W - Withdrawal, X - Waste Disposal/Injection, Z - Destroyed, O - Other

18. Use of Water: _____
AI - Agricultural Irrigation, AQ - Aquaculture, AR - Aquifer Recharge, AS - Aesthetic, CO - Commercial, DI - Diversion/Impoundment, DM - Domestic/Mult. Family, DO - Domestic, DW - Dewatering Wells, ES - Essential Service, FP - Freeze Protection, GI - Golf Course Irrigation, HR - Heat Pump Recharge, HS - Heat Pump Supply, IN - Industrial, LA - Landscape Irrigation, LI - Livestock, LP - Limited Use PS, MI - Mining, MO - Monitor, NA - Navigation, NI - Nursery Irrigation, OO - Other Outside Use, PF - Perishable Food, PP - Power Production, PS - Public Supply, RI - Recreation Irrigation, RW - Restoration Well, SF - Soil Flooding, SN - Sanitation, TE - Test, WR - Water Based Recreation

19. Type of Lift: C
A - Air, B - Bucket, C - Centrifugal, J - Jetted, P - Piston, S - Submersible, T - Turbine, N - No Pump, Z - Other

20. Type of Power: E
D - Diesel, E - Electric, G - Gasoline, H - Hand, Z - Other

21. Horse Power: 1 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer, C - Current Meter, E - Estimated, M - Totaling Meter, O - Orifice, R - Reported, T - Trajectory, V - Volumetric, Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated, G - Pressure Gauge, L - Geophysical Log, R - Reported, S - Steel Tape, A - Air Line, T - Electric Tape, Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC, S - Steel, C - Concrete, B - Brick, Z - Other

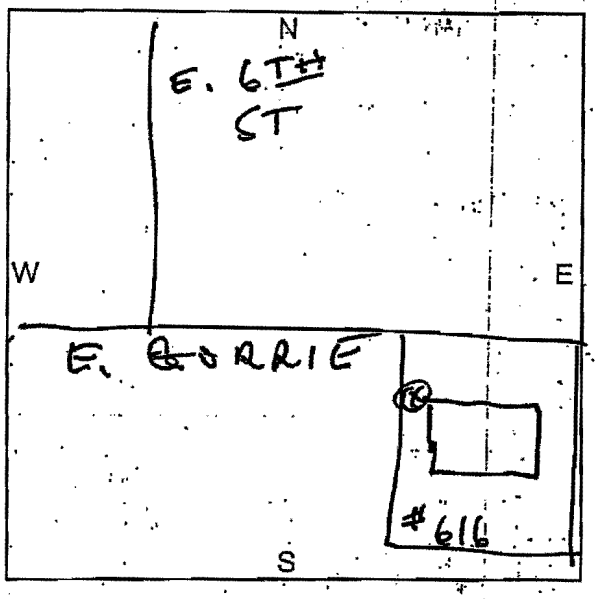
32. Screened Length: _____

33. Screened Intervals: _____

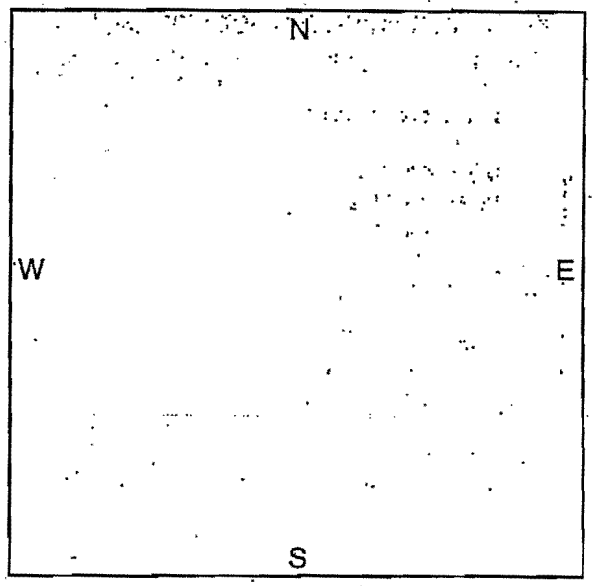
34. Finish: _____
S - Screen, O - Open End, X - Open Hole, Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4755

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

195

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAS 4756
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (If any): _____
9. SYSTEM NAME (If any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of **Sec** ____ **T** _____ (N or S) **R** _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** ROBERT DAY
12. **Mailing Address:** _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. **WELL ADDRESS (Location):** 523 E. GULF BEACH
City: _____
Zip: _____
County: _____ Phone: _____

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/17/05 PHONE: _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/17/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 05.21
GPS LONGITUDE: 84 51 07.87

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

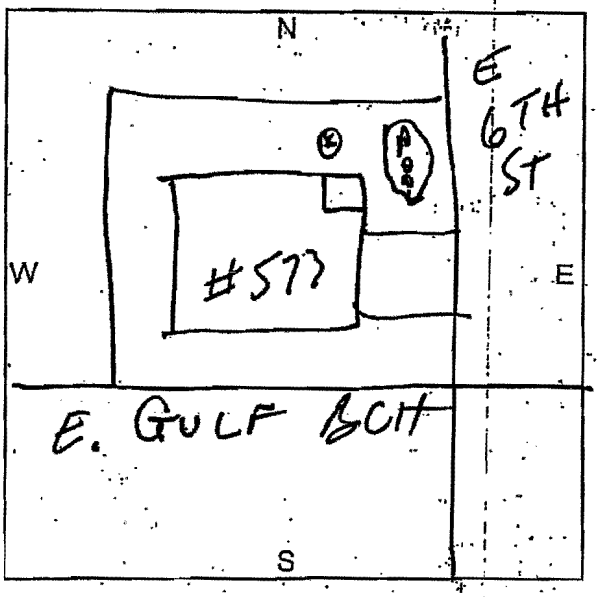
32. Screened Length: _____

33. Screened Intervals: _____

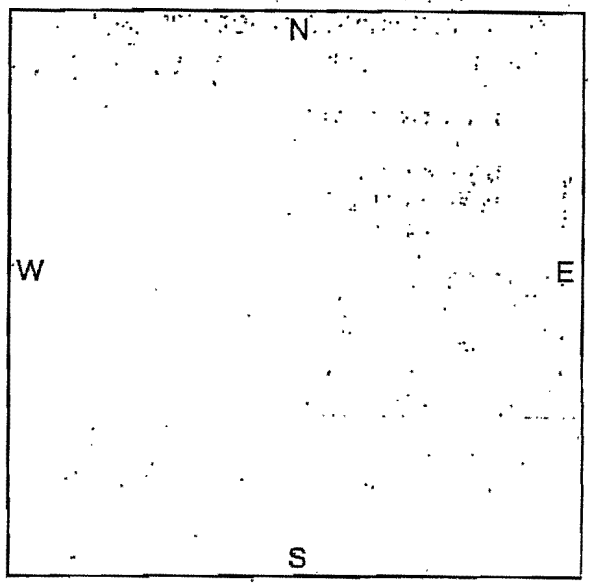
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO._____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4756

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

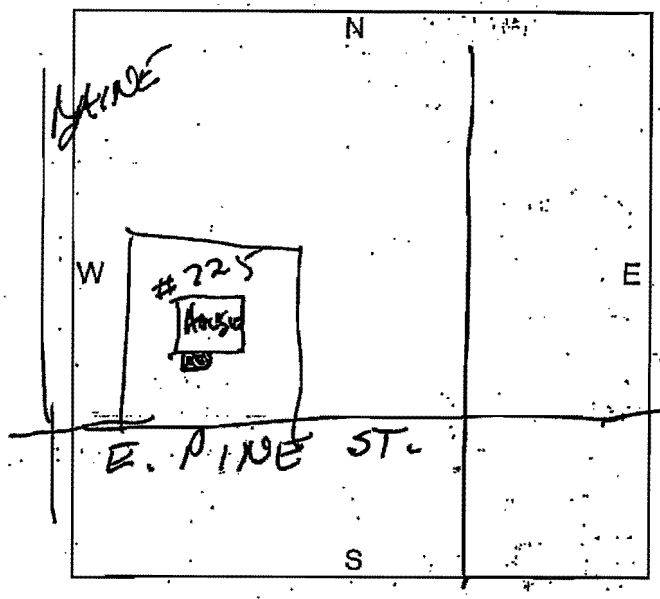
1. FLORIDA UNIQUE I.D. AAJ4757
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____
11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** 220 E. 6TH ST
    City: _____
    Zip: _____
    County: _____ **Phone:** _____
14. **SCHEDULE FILLED OUT BY:**
    NAME: CJE
    AGENCY: _____
    DATE: 10/18/05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: JEA
    AGENCY: _____
    DATE: 10/18/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 08.28
    GPS LONGITUDE: 84 51 04.92

WELL INFORMATION
(Information in this column should be filled out if possible)

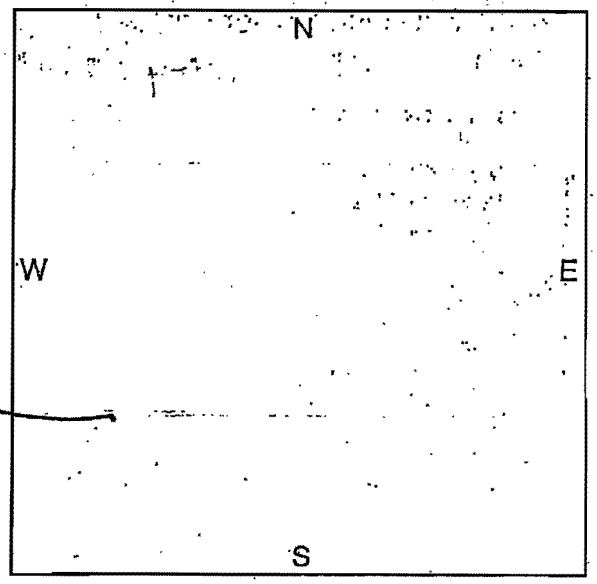
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface; B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1 1/4" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4758

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4759
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____
    T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ **Zip:** _____
    County: _____ **Phone:** _____
13. **WELL ADDRESS (Location):** 125 E. PINE ST.
    City: _____
    Zip: _____
    County: _____ **Phone:** _____

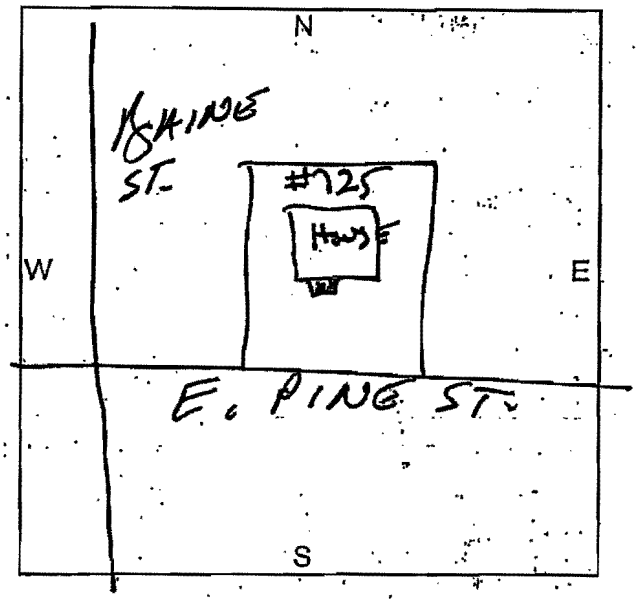
14. **SCHEDULE FILLED OUT BY:**
    NAME: [illegible]
    AGENCY: _____
    DATE: 10/18/05 PHONE: _____
15. **GPS INFORMATION PROVIDED BY:**
    NAME: [illegible]
    AGENCY: _____
    DATE: 10/18/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: _____
    GPS LONGITUDE: _____

WELL INFORMATION
(Information in this column should be filled out if possible)

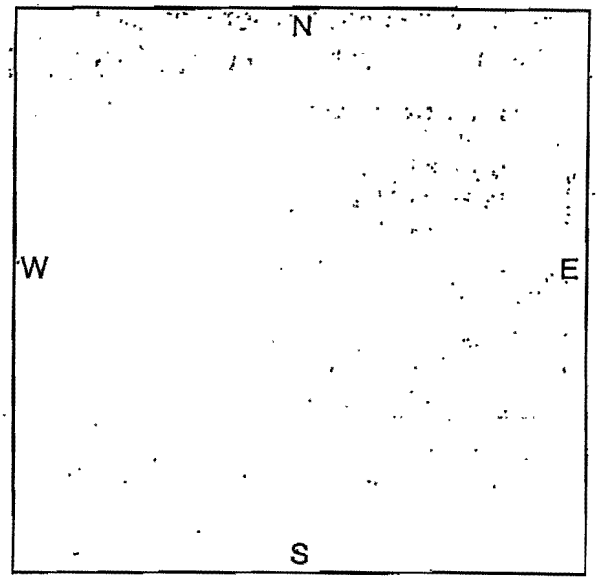
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: C
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: E
    D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ½ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 1½" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4759

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAT 4759
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** _____
325 E. PINE ST.
City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: _____
AGENCY: _____
DATE: 10/18/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: _____
AGENCY: _____
DATE: 10/18/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: _____

GPS LONGITUDE: _____

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ½ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1½" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

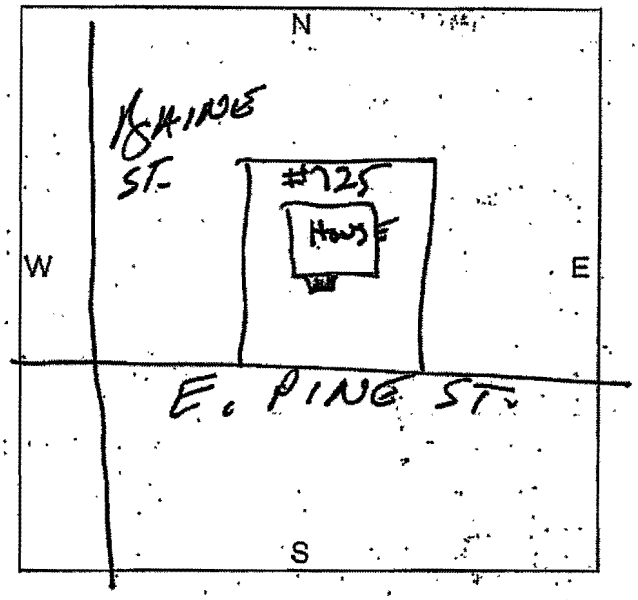
32. Screened Length: _____

33. Screened Intervals: _____

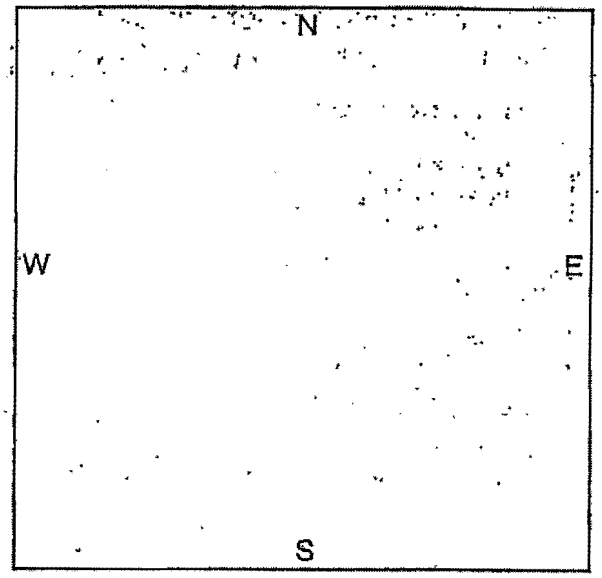
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. **GENERAL MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



36. **DETAILED MAP LOCATION** (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name_____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4759

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

179

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. **FLORIDA UNIQUE I.D.** AAJ 4260
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)
    Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____
    City: _____
    State: _____ Zip: _____
    County: _____ Phone: _____
13. WELL ADDRESS (Location): No # on House 2ND House W. of E 9th St
    City: NEXT DOOR TO 889 E. Pine
    Zip: _____ on N. side Ave
    County: _____ Phone: _____

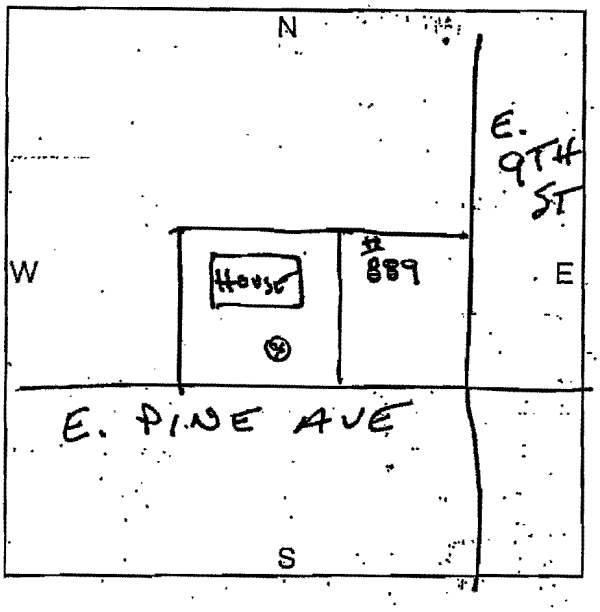
14. SCHEDULE FILLED OUT BY:
    NAME: M. E. H
    AGENCY: _____
    DATE: 10/18/05 PHONE: _____
15. GPS INFORMATION PROVIDED BY:
    NAME: _____
    AGENCY: _____
    DATE: 10/18/05 PHONE: _____
    DATUM: _____ (Default WGS 84)
    EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)
    GPS LATITUDE: 29 40 19.52
    GPS LONGITUDE: 84 50 22.69

WELL INFORMATION
(Information in this column should be filled out if possible)

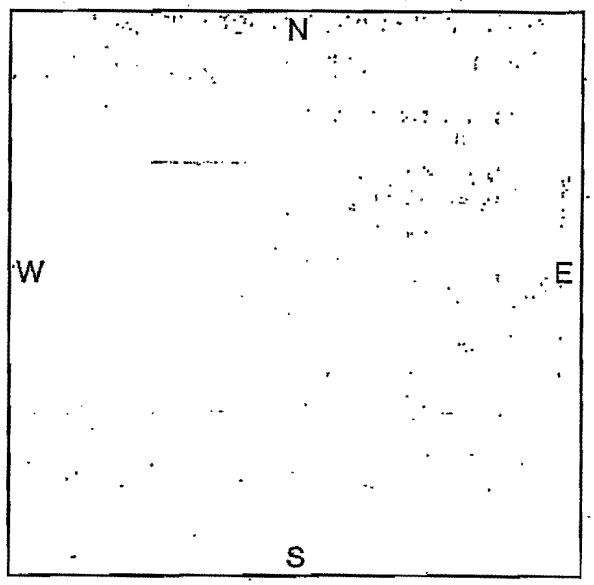
16. Method of Construction: _____
    AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other
17. Use of Site: _____
    A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Ugused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; Q - Other
18. Use of Water: _____
    AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation
19. Type of Lift: N
    A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other
20. Type of Power: _____
    D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other
21. Horse Power: ____ 22. Pump Intake Depth: ____
23. Normal Yield: _____
24. Method of Measurement: _____
    B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other
25. Water Levels: _____
    A - Measuring Point Distance from Land Surface
    B - Water Level below Land Surface
26. Method of Measurement: _____
    E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other
27. Diameter: 2" 28. Well Depth: _____
29. Depth of Casing: ____
30. Source of Well Information: _____
    (Field Measurement, Logging Equipment, Permit, Other)
31. Casing Material: P
    P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other
32. Screened Length: _____
33. Screened Intervals: _____
34. Finish: _____
    S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

_____

FLORIDA
UNIQUE WELL ID
AAJ4760

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

180

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAI 4761
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): 889 E. PINE AVE

City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: U.E.A.
AGENCY: _____
DATE: 10/18/06 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: OEA
AGENCY: _____
DATE: 10/18/06 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 20.17

GPS LONGITUDE: 84 50 26.80

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: G
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: 3/4 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

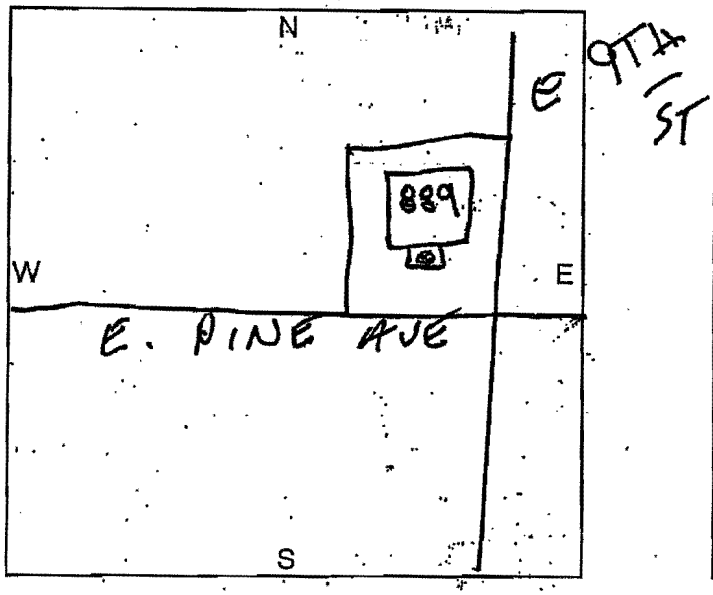
32. Screened Length: _____

33. Screened Intervals: _____

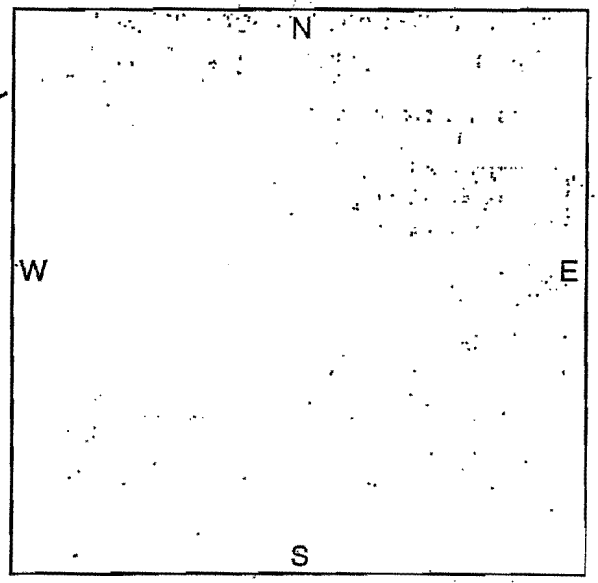
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4761

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

181

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4762
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: _____
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): N/O # CORNER OF E 10TH ST & E. PINE AVE
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: J. REED
AGENCY: _____
DATE: 10/18/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: J. REED
AGENCY: _____
DATE: 10/18/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 22.64
GPS LONGITUDE: 84 50 12.68

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 4/4 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

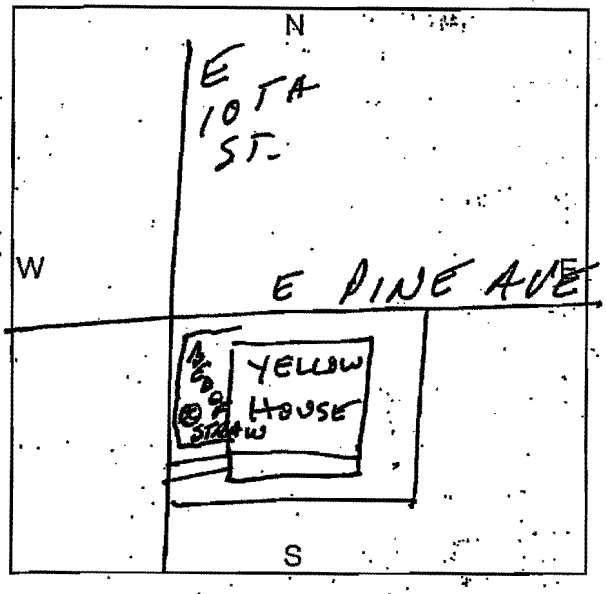
32. Screened Length: _____

33. Screened Intervals: _____

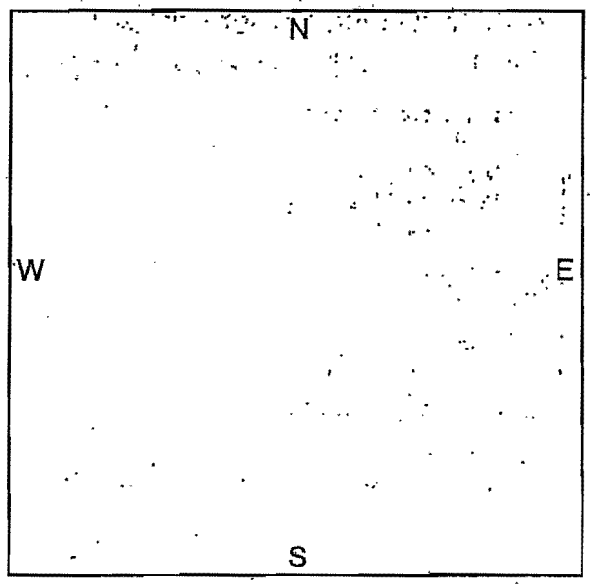
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES

_____
_____
_____
_____
_____

FLORIDA
UNIQUE WELL ID
AAJ4762

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

182

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4763
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

SUN COAST REALTY
11. OWNER'S NAME: _____
12. Mailing Address: _____
City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): NO # CORNER E. PINE & E. 11TH ST.
City: _____
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: _____
AGENCY: _____
DATE: 10/18/05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: 10/18/05 PHONE: _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 25.25

GPS LONGITUDE: 84 50 00.60

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Ball Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: N
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesal; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1 1/4" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: S
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

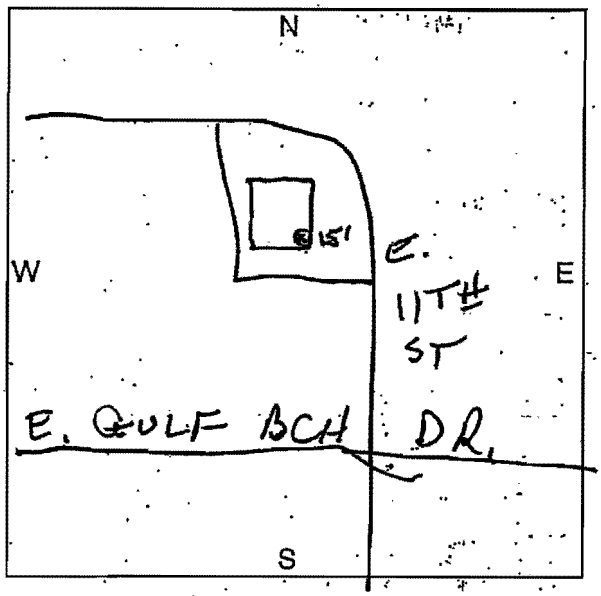
32. Screened Length: _____

33. Screened Intervals: _____

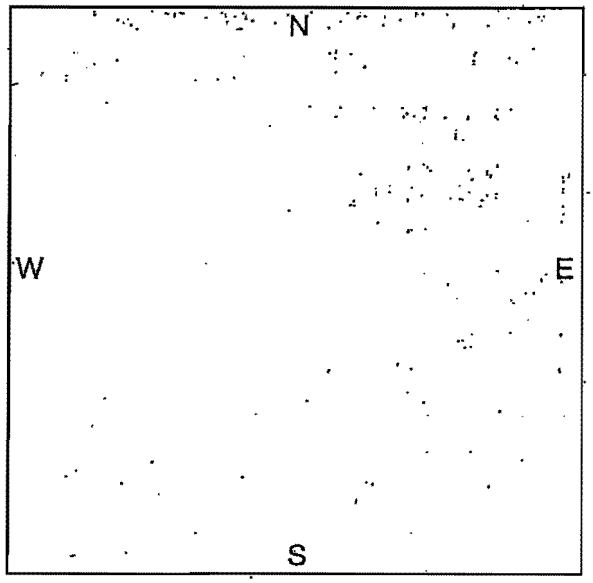
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number_____

41. Casing Specifications: Standard_____ Substandard_____
If Substandard, Explain_____

42. Properly Grouted?_____ 43. Well Seal Condition_____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other_____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain_____

46. Is Well location Subject to Flooding? YES NO Explain_____

47. REMARKS/NOTES
LAT & LONG READING TAKEN 15' EAST OF S/E CORNER OF HOUSE WHERE WELL IS LOCATED.

FLORIDA
UNIQUE WELL ID
AAJ4763

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE 183

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4764
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. **Land Net** ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T _____ (N or S) R _____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. **OWNER'S NAME:** _____
12. **Mailing Address:** _____

City: _____
State: _____ **Zip:** _____
County: _____ **Phone:** _____

13. **WELL ADDRESS (Location):** 1060 E. GULF BCH DR.

City: _____
Zip: _____
County: _____ **Phone:** _____

14. **SCHEDULE FILLED OUT BY:**
NAME: JEB
AGENCY: _____
DATE: 10/18/05 **PHONE:** _____

15. **GPS INFORMATION PROVIDED BY:**
NAME: JEB
AGENCY: _____
DATE: 10/18/05 **PHONE:** _____

DATUM: _____ (Default WGS 84)
EST. ACCURACY: _____ (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 29 40 18.93

GPS LONGITUDE: 84 50 10.38

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: _____
A - Property Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: _____
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: ?
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: _____
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Bailer; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 2" 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: P
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

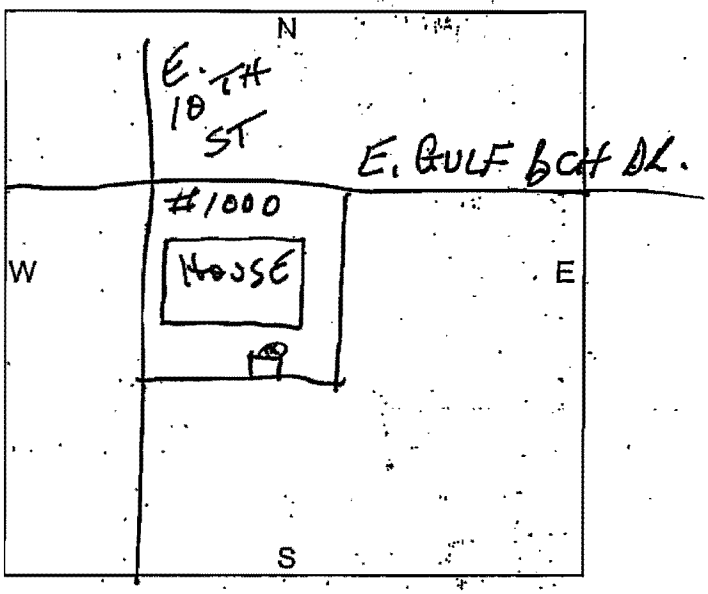
32. Screened Length: _____

33. Screened Intervals: _____

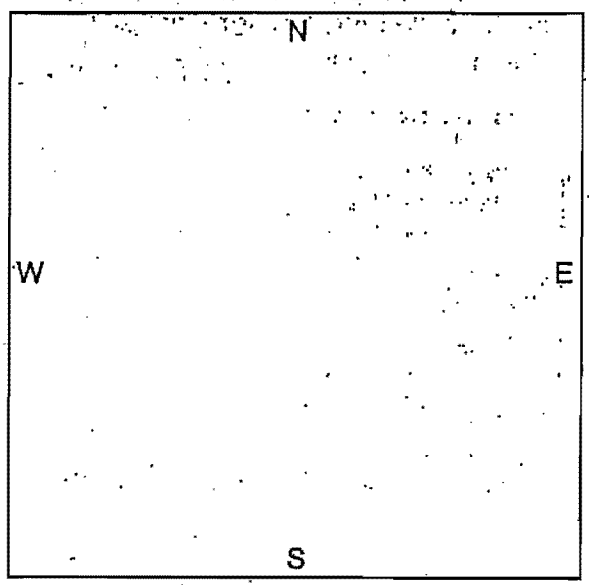
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction_____ 38. INSPECTION NO. _____
39. Contractor Name _____
40. License Number _____

41. Casing Specifications: Standard _____ Substandard _____
If Substandard, Explain _____

42. Properly Grouted? _____ 43. Well Seal Condition _____

44. Construction Phase: Completed Casing Set Grouting Pump Test Just Started
Other _____

45. Adequate Setbacks from House and/or Septic System? YES NO Explain _____

46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES
2" WELL STILL IN USE
1 4" PVC CAPPED

FLORIDA
UNIQUE WELL ID
AAJ4764

STATE OF FLORIDA
WELL INVENTORY AND INSPECTION SCHEDULE

184

PERMIT NUMBER/SITE IDENTIFICATION
(Bolded information in this column must be filled out completely)

1. FLORIDA UNIQUE I.D. AAJ 4786
2. NWFWMD CPS I.D.: _____
3. NWFWMD WI I.D.: _____
4. NWFWMD WU I.D.: _____
5. DEP PWS I.D.: _____
6. ALT. DEP I.D.: _____
7. HRS I.D.: _____
8. WELL NAME (if any): _____
9. SYSTEM NAME (if any): _____
10. Land Net ____ 1/4 ____ 1/4 ____ 1/4 of Sec ____ T ____ (N or S) R ____ (E or W)

Altitude _____ 7.5 Minute Quad _____

11. OWNER'S NAME: Robert Bogusky
12. Mailing Address: _____

City: _____
State: _____ Zip: _____
County: _____ Phone: _____

13. WELL ADDRESS (Location): _____
(St George Island)
City: 1153 E. Gulf Beach
Zip: _____
County: _____ Phone: _____

14. SCHEDULE FILLED OUT BY:
NAME: T. Brown
AGENCY: NWFWMD
DATE: 10-20-05 PHONE: _____

15. GPS INFORMATION PROVIDED BY:
NAME: _____
AGENCY: _____
DATE: _____ PHONE: _____

DATUM: WGS 84 (Default WGS 84)
EST. ACCURACY: 3-5 (<1, 1-3, 3-5, > 5 Meters)

GPS LATITUDE: 294027.91

GPS LONGITUDE: 84 4949.05

WELL INFORMATION
(Information in this column should be filled out if possible)

16. Method of Construction: _____
AU - Air Rotary; AB - Augered/Bored; BB - Bail Bucket; CO - Combination; CT - Cable Tool; DR - Driven; DU - Dug; HR - Hydraulic Rotary; JT - Jetted; RR - Reverse Rotary; OT - Other

17. Use of Site: W
A - Properly Abandoned; C - Core; D - Drainage; M - Monitor/Observation; P - Oil/Gas; R - Return; S - Standby; T - Test; U - Unused; W - Withdrawal; X - Waste Disposal/Injection; Z - Destroyed; O - Other

18. Use of Water: LA
AI - Agricultural Irrigation; AQ - Aquaculture; AR - Aquifer Recharge; AS - Aesthetic; CO - Commercial; DI - Diversion/Impoundment; DM - Domestic/Mult. Family; DO - Domestic; DW - Dewatering Wells; ES - Essential Service; FP - Freeze Protection; GI - Golf Course Irrigation; HR - Heat Pump Recharge; HS - Heat Pump Supply; IN - Industrial; LA - Landscape Irrigation; LI - Livestock; LP - Limited Use PS; MI - Mining; MO - Monitor; NA - Navigation; NI - Nursery Irrigation; OO - Other Outside Use; PF - Perishable Food; PP - Power Production; PS - Public Supply; RI - Recreation Irrigation; RW - Restoration Well; SF - Soil Flooding; SN - Sanitation; TE - Test; WR - Water Based Recreation

19. Type of Lift: C
A - Air; B - Bucket; C - Centrifugal; J - Jetted; P - Piston; S - Submersible; T - Turbine; N - No Pump; Z - Other

20. Type of Power: E
D - Diesel; E - Electric; G - Gasoline; H - Hand; Z - Other

21. Horse Power: ____ 22. Pump Intake Depth: ____

23. Normal Yield: _____

24. Method of Measurement: _____
B - Baller; C - Current Meter; E - Estimated; M - Totaling Meter; O - Orifice; R - Reported; T - Trajectory; V - Volumetric; Z - Other

25. Water Levels: _____
A - Measuring Point Distance from Land Surface
B - Water Level below Land Surface

26. Method of Measurement: _____
E - Estimated; G - Pressure Gauge; L - Geophysical Log; R - Reported; S - Steel Tape; A - Air Line; T - Electric Tape; Z - Other

27. Diameter: 1¼ 28. Well Depth: _____

29. Depth of Casing: ____

30. Source of Well Information: _____
(Field Measurement, Logging Equipment, Permit, Other)

31. Casing Material: _____
P - PVC; S - Steel; C - Concrete; B - Brick; Z - Other

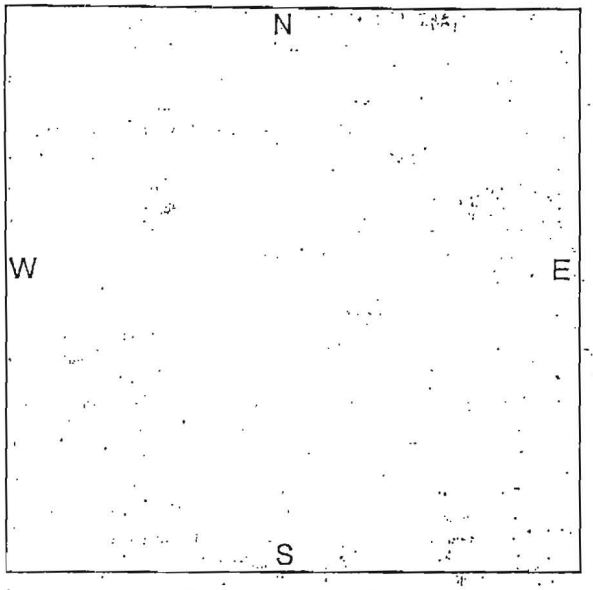
32. Screened Length: _____

33. Screened Intervals: _____

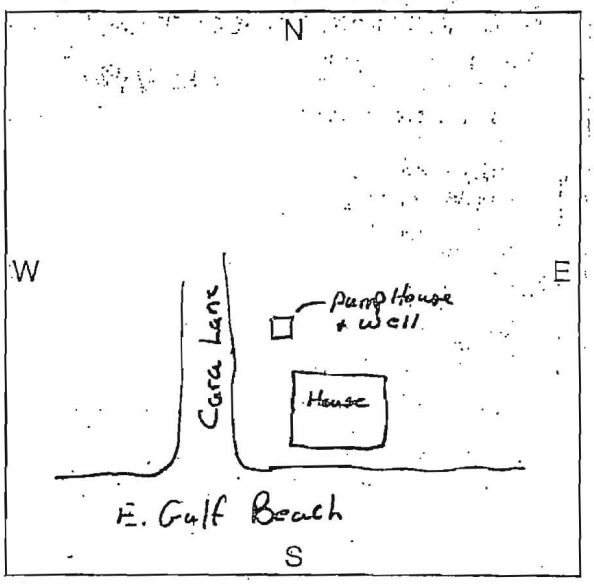
34. Finish: _____
S - Screen; O - Open End; X - Open Hole; Z - Other

Please return to: Northwest Florida Water Management District, Division of Resource Regulation
152 Water Management Drive, Havana, FL 32333

35. GENERAL MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



36. DETAILED MAP LOCATION (Not to Scale)
(This Information Must be Provided.)



FOR WATER MANAGEMENT DISTRICT USE ONLY

37. Date of Well Construction _____ 38. INSPECTION NO. _____
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Other _____

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46. Is Well location Subject to Flooding? YES NO Explain _____

47. REMARKS/NOTES

FLORIDA
UNIQUE WELL ID
AAJ4786

STATE OF FLORIDA
NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT

LEISURE PROPERTIES, LTD., and
WATER MANAGEMENT SERVICES, INC.,

Petitioners,

v. CASE NO.

NORTHWEST FLORIDA WATER
MANAGEMENT DISTRICT

Respondent.
_____/

FILED
NWFWMD - AGENCY CLERK
APR 11 ...
AM PM
7-8-9-10-11-12-1-2-3-4-5-6

PETITION FOR ADMINISTRATIVE HEARING

Comes now, Leisure Properties, Ltd., a Florida Limited Partnership (hereinafter "Leisure") and Water Management Services, Inc., a Florida Corporation, (hereinafter "WMSI"), pursuant to Section 120.57(2), F.S., and petitions for an administrative hearing regarding the following:

1. Petitioner, Leisure Properties, Ltd., has a business address of 250 John Knox Road, No. 4, Tallahassee, Florida 32303. Leisure is the developer of the St. George's Plantation (hereinafter "Plantation"). The Plantation is a Development of Regional Impact located on the West end of St. George Island, Franklin County, Florida. Development activities within the Plantation are governed by the St. George Island Development Order, recorded at O.R. Book 143, Page 635 et seq., Franklin County, Florida and all subsequent amendments. A copy of the Development Order and Fourth Amendment are attached as Composite Exhibit "A."

2. Petitioner, Water Management Services, Inc. has a business address of 250 John Knox Road, No. 4, Tallahassee, Florida 32303. WMSI is the owner and operator of a water utility located on and serving St. George Island, Florida. WMSI is certificated and regulated by the Florida Public Service Commission ("FPSC"). WMSI is in the business of providing water service to residents of the Plantation under the terms of service and at the rates approved by the FPSC.

3. On September 20, 1977, Franklin County approved the St. George Island Development Order ("SGI DO"). The SGI DO approved a Development of Regional Impact ("DRI") called St. George's Plantation. The terms, conditions and restrictions contained in the SGI DO apply to Leisure and any successor in title who purchased property within the Plantation. See, Paragraph 10 of the SGI DO. The SGI DO is recorded in the Public Records of Franklin County, Florida and runs with the land.

4. The original SGI DO prohibited the construction of fresh water wells of any type on any building site in the Plantation. See, Paragraph 8 of the SGI DO.

5. In 1993 this portion of the SGI DO was amended. The Fourth Amendment to the SGI DO provided for a maximum of thirty (30) temporary fresh water wells to be installed under the terms and conditions set forth in the amendment. These terms and conditions include as a condition precedent application to WMSI for water service and denial of the same.

6. The Amendment was necessitated by a temporary lack of capacity experienced by WMSI in the 1993 time frame. No fresh water wells were applied for or permitted pursuant to the amendment in the Plantation. WMSI has since resolved any

capacity issues, and water service is available to all locations in the Plantation. See, the August 19, 2005 letter from Franklin County to WMSI attached as Exhibit "B."

7. On March 27, 2008 Notice of Application for Water Use Permit was published in the Carrabelle and Apalachicola Times. The Notice referenced Application Number(s) 06944 (Dan Katz); 06946 (Jocelyn Harrison); and 06947 (Robin Olin), collectively referred to as the applicants. Each applicant is requesting permission from the District to construct a landscape irrigation well for the purpose of withdrawing a maximum of 6,958 gallons per day from the Surficial Aquifer System. All of the irrigation wells proposed by the applicants are located in the Plantation.

8. The substantial interests of Leisure shall be adversely affected in the event the Northwest Florida Water Management District ("District") approves any of the applications listed above. Leisure is subject to the terms, conditions and restrictions of the SGI DO. As the Developer, Leisure is charged with ensuring compliance with the terms, conditions and restrictions of the SGI DO pursuant to Chapter 380, F.S. The express terms of the SGI DO as amended prohibit the construction of the fresh water landscape/irrigation wells sought by the applicants. This prohibition of fresh water wells in the Plantation recognizes the fragile nature of the water table and the adverse effects on groundwater resources caused by permitting such wells.

9. The substantial interests of WMSI shall be adversely affected in the event the District approves any of the applications listed above. WMSI currently provides water service to the applicants' property located in the Plantation. WMSI has permitted and constructed an extensive distribution system at significant cost to provide water

service, both potable and irrigation to the applicants service location. The rates and charges of WMSI have been approved by the FPSC. If permitted by the District the irrigation wells will dramatically reduce the amount of water WMSI would otherwise provide to each of the applicants service locations, all of which are existing customers of WMSI. This reduction will result in a loss of revenue to WMSI.

10. The applications for water use permits referenced herein should be denied by the District based upon the fact that the SGI DO as amended prohibits the construction of such wells. Further, that the applications should be denied because WMSI is ready, willing and able to provide the irrigation water sought by the applicants and is in fact already providing water service to the each of the applicants. The construction of irrigation wells in the Plantation on St. George Island will adversely affect groundwater resources on the island.

11. The applications for water use permits should be denied based upon the following Statutory and Rule provisions:

a. Section 373.044, F.S.

b. Section 373.185, F.S.

c. Section 373.306, F.S.

d. Section 380.0555, F.S.

e. Section 380.06, F.S.

f. Rule 40A-3.301, F.A.C.

g. Rule 40A-3.341, F.A.C.

h. Rule 40A-3.342, F.A.C.

12. The Petitioners request that the District deny Application Number(s) 06944 (Dan Katz); 06946 (Jocelyn Harrison); and 06947 (Robin Olin) for water use permits.

13. At this time the record does not reflect any disputed issues of material fact.

14. The published Notice provides that requests for hearing be received by the District on or before 5:00 p.m. (EST), April 11, 2008. Thus, this Petition is timely.

WHEREFORE, the Petitioner respectfully requests that this Petition be forwarded to a hearing officer of the Division of Administrative Hearings and that a hearing be conducted pursuant to Section 120.57(2), Florida Statutes, to resolve these questions.

Petitioner seeks an order from the Northwest Florida Water Management District denying the applications for water use permits referenced herein.

Respectfully submitted,

Hartman Curtin, LLC.
207 West Park Avenue, Suite A
Tallahassee, FL 32301
Phone 850-386-4242
Facsimile 850-386-4241

Daniel W. Hartman
Florida Bar No.: 070068
Attorney for the Petitioners

I HEREBY CERTIFY that copies of the foregoing have been furnished by U.S. mail to **Dan Katz**, 505 Montrose Lane, Atlanta, GA 30328, **Jocelyn Harrison**, 5635 Lake Island Dr., Atlanta, GA 30328 and **Robin Olin**, Tuxedo Terrace, Atlanta, GA 30328 this 11th day of April, 2008.

Daniel W. Hartman

Northwest Florida Water Management District

152 Water Management Drive, Havana, Florida 32333-4712
(U.S. Highway 90, 10 miles west of Tallahassee)

(850) 539-5999 • (Fax) 539-2777

Douglas E. Barr
Executive Director

December 30, 2009

Ms. Vicky L. Baker
Program Director
Small Business Regulatory Advisory Committee
401 East Chase Street
Pensacola, FL 32502

RE: Proposed Rule 40A-2.051 et al

Dear Ms. Baker:

Thank you for your letter dated December 15, 2009 regarding the proposed rule changes. A statement of estimated regulatory costs (SERC) was prepared in conjunction with this rule development. The notice in the Florida Administrative Weekly is incorrect in that section. I have attached a copy of the SERC concluding that no negative impact is anticipated. As no negative impact is anticipated, rule adoption will proceed as outlined in the notice.

I am available to meet with you and go over the packet and rule change in detail. If you want to set up a meeting or have any further questions, please contact me at (850) 539-5999.

Sincerely,

Angela Chelette, P.G.
Chief, Bureau of Groundwater Regulation

Encl: SERC

GEORGE ROBERTS
Chair
Panama City

PHILIP K. McMILLAN
Vice Chair
Blountstown

STEVE GHAZVINI
Secretary/Treasurer
Tallahassee

PETER ANTONACCI
Tallahassee

STEPHANIE BLOYD
Panama City Beach

JOYCE ESTES
Eastpoint

TIM NORRIS
Santa Rosa Beach

JERRY PATE
Pensacola

RAPLH RISH
Port St.Joe

Statement of Estimated Regulatory Costs Associated with Revision to 40A-2.051 Exemptions Northwest Florida Water Management District

1.0 Summary of Proposed Rule

The proposed rule adds Franklin and Gulf counties to the list of counties in paragraph (6) of 40A-2.051 Exemptions as follows.

(6) An Individual Water Use Permit shall not be required for non-public supply shallow wells four (4) inches or smaller in diameter, withdrawing an annual daily average of 15,000 gallons or less of water from the shallow sand aquifer in the portion of Permit Area A found in the counties of Bay, Franklin, Gulf, Okaloosa, and Walton, and which do not penetrate any competent and continuous confining formation.

2.0 Number of Individuals and Entities Required to comply

The addition of Franklin and Gulf counties to paragraph (6) means that those individuals and entities located in Permit Area A of these two counties who comply with the requirements of paragraph (6), above, will not need to obtain or renew an Individual Water Use Permit. Thus, pursuant to District rule, these individuals and entities will not need to apply for an Individual Water Use Permit. Their water use will be authorized under a General Water Use Permit issued by rule. However, they will still need to apply for and obtain a well construction permit from the District as required under current rule (Chapter 40A-3, F.A.C.).

Currently, there are 10 Individual Water Use Permittees in Permit Area A of Franklin and Gulf counties who will no longer be required to renew their Individual Water use Permit. Of these permittees, nine are permitted for landscape irrigation and one is permitted to supply water to a heat pump.

Individuals and entities in Franklin and Gulf counties who wish to withdraw ground water in the future and who comply with the requirements of paragraph (6) above will not be required to apply for an Individual Water Use Permit.

3.0 Costs to the District and Any Other State and Local Government Entity

The District is expected to save about $2,900 per Individual Water Use Permit application that would have been submitted under current rule but is not required to be submitted under the proposed rule. This cost is the average cost of processing Individual Water Use Permit applications throughout the District in fiscal year 2007/2008. Over the past five years, the average cost per permit has ranged from $1,929 to $2,888, depending on the year.

Other State and local government entities are not expected to incur any costs associated with the proposed rule.

4.0 Transactional Costs

No transactional costs are expected to be incurred as a result of the proposed rule. The individuals and entities described in Section 2.0 will save $100 in permit application cost and will not have to wait for the application to be processed. The average number of days from permit application to the granting of the permit was 50 days in fiscal year 2007/2008.

5.0 Impacts to Small Businesses, Small Cities and Small Counties

In accordance with Section 120.54(3)(b)2.a, Fla. Stat., the District is required to consider the impact of its rules on small businesses, small cities, and small counties. Small business is defined in Section 288.703(1), Fla. Stat., as "an independently owned and operated business concern employing 200 or fewer permanent full-time employees and that, together with its affiliates, has a net worth of not more than $5 million or any firm based in this state which has a Small Business Administration (SBA) 8(a) certification". Small City is defined in Section 120.52(18), Fla. Stat., as "any municipality that has an unincarcerated population of 10,000 or less according to the most recent decennial census". A small county is defined in Section 120.52(19), Fla. Stat., as "any county that has an unincarcerated population of 75,000 or less according to the most recent decennial census".

The proposed rule will not incur transactional costs and will eliminate the permit application fee for those individuals and entities in Franklin and Gulf counties who satisfy the requirements of paragraph (6) of 40A-2.051 Exemptions. This is because they will no longer be required to obtain an Individual Water Use Permit under the proposed rule.

GeoTrans, Inc.
A TETRA TECH COMPANY

1080 Holcomb Bridge Road
Building 100, Suite 190
Roswell, GA 30076

www.geotransinc.com

770-642-1000 FAX 770-642-8808

TECHNICAL MEMORANDUM

From:	Peter F. Andersen and Lisa M. Grogin, GeoTrans Inc.
To:	Chris Richards, Northwest Florida Water Management District
Date:	September 30, 2009
Subject:	Numerical Modeling Analysis of Potential Groundwater Development on St George Island, Florida
Project:	Northwest Florida Water Management District, St. George Island

Professional Engineer:
Peter F. Andersen
License No. 62133
Date: September 30, 2009

SEAL



Introduction

This technical memorandum briefly describes groundwater flow modeling of the surficial aquifer, on St George Island, Franklin County, Florida. The purpose of the modeling is to assess the potential for development of local water supplies on the island for irrigation purposes to supplement the potable water supply, all of which is transported to the island from mainland Franklin County. Data from a literature review and a 72 hr aquifer performance test (APT) were used to formulate a conceptual model of the hydrogeologic system underlying the island. A MODFLOW-based numerical model was constructed based on the conceptual model and various assumptions regarding uncertain hydrologic factors. The model was calibrated to available data, including data from the APT. Predictions were made regarding the likely effects of withdrawals of an estimated quantity of water from small, areally distributed landscape irrigation wells. An estimate of the potential for saltwater intrusion from this additional pumping was also made using an analytical model.

This memorandum is organized as follows. The hydrogeologic conceptual model (HCM), including a review of the literature and a summary of the APT is presented first. The HCM forms the basis for the numerical flow modeling, which is presented in the next major section. Construction, calibration, and predictions are described in that section. The results of the flow model are used to estimate the potential for saltwater upconing, which is described next. Conclusions are recommendations are then provided.

Hydrogeologic Conceptual Model

St. George Island is a barrier island located in the Gulf of Mexico south of Apalachicola, Florida. The island measures approximately 30 miles in length by 0.3 miles in width (Corbett et al., 2000). Figure 1 shows the location of the study area, which encompasses the central part of the island, from Government Cut (the channel that divides the island into Little St George Island on the western side) approximately to the Bryant Patton (Hwy 300) Bridge that connects the island to the mainland. Although the developed part of the island extends further east than the Bryant Patton Bridge, the specified study area is considered representative of the developed part of the island. The portion of St George Island that is included in the study area is about 3 mi^2, which represents approximately 33% of the island. Figure 2 shows a conceptual hydrogeologic cross section of the study area. The section is relatively shallow, as the vertical area of interest is primarily the freshwater portion, which extends only to a depth of approximately 40 ft. Data sources for the hydrogeology of the island are sparse. However, two independent studies have contributed to the conceptual understanding of the hydrogeology of the island: 1) a series of studies on barrier island hydrogeology conducted by University of South Florida that involved field work on St George Island, and 2) a drilling program and APT funded by NWFWMD and conducted by Stidham and Associates (2009). These and other studies are reviewed below.

Corbett, et al (2000) conducted a field study on St George Island with the objective of determining the quantity of submarine discharge of fresh groundwater. Tracer tests were conducted at multiple sites using sulfur hexafluoride and flourescein dye. Estimates of hydraulic conductivity from this test ranged between 9.8 and 590 ft/d, with an average value of 118 ft/d. Two methods, hydraulic gradient and water balance, were used to estimate flux to Apalachicola Bay. The results of the analyses using the two methods were comparable.

A series of papers by Schneider and Kruse of the University of South Florida analyze the shape of freshwater lenses on barrier islands and use St George and Dog Islands as examples. Schneider and Kruse (2001) cite hydrologic distinctions between Dog and St George Islands. They used geophysical techniques to locate the saltwater interface and then applied the SEAWAT (Guo and Langevin, 1998) model to explain the non-symmetrical shape of the freshwater lens. Schneider and Kruse (2001) attribute the shape to spatial variations in recharge, where recharge is highest in the central part of island on the gulf side. The authors surmise that the recent imbalance of additional water from septic on St George Island may influence the hydrologic system significantly. A follow-up paper Schneider and Kruse (2003) is similar, initially focusing on the differences in freshwater lens shape between silicalstic and carbonate aquifers. They continue to discuss the relation of recharge variation on the shape of the freshwater lens and note that recharge variation is related to slope, vegetation, and terrain. The final paper in the series, Schneider and Kruse (2005), expands further on their prior work. Important conclusions are: 1) the seasonal variability of the lens in insignificant, 2) artificial recharge (from septic) may represent 7-25% of natural recharge, 3) development has thinned the central part of the lens, 4) the freshwater lens is not in a state of equilibrium and is eroding, 5) short-term (intra-year) variations of boundary conditions do not change the shape or position of the freshwater lens.

Dulaiova and Bennett (2007) is primarily a study of flushing rates of Apalachicola Bay and does not have much significance to the current study. However, data from a series of seepage meters is presented that provide an estimate of flow rates from barrier islands as contributing factors to the flushing of the bay. The seepage study is located on the bay side of St George Island.

Li, et al (2008) attempt to determine if submarine groundwater discharge is primarily related to tidal recirculation or land based hydraulic gradients. A 2-dimensional SEAWAT (Langevin et al, 2003) model is used for sensitivity analyses of various parameters and boundary conditions. The study concludes that the fresh or new component of SGD is 4 to 50%. Simulations of spring and summer conditions gave ratios of 9 and 15%.

An APT was conducted by Stidham and Associates (2009) on behalf of the NWFWMD. The APT took place at Leisure Lane and Kumquat Court, centrally located on the island in the Plantation subdivision. The APT involved pumping 65 gpm of water from a well screened between a depth of 12 and 22 ft. Water level response was noted in two monitoring wells close to the pumping well (20 ft) and one more distant well (70 ft). The APT pumped water from storage and water levels attained equilibrium, after approximately 1 day. Stidham and Associates (2009) used curve-matching techniques to derive values for transmissivity, delayed yield factor, specific yield, and storage coefficient. The curve matching was somewhat problematic in that a consistent set of values could not be obtained for the wells close to the production well (OB-2 and OB-3) and the more distant well (OB-1). Stidham and Associates (2009) contemplated that heterogeneity could be the cause of the inconsistency. Values obtained from the test are shown in Table 1.

Table 1. Parameter values obtained from APT.

Parameter	Average value	Minimum value	Maximum value	Notes
Transmissivity (ft^2/d)	3881	2089 (OB-1)	7029 (OB-3)	Average of 5, excluding half distance analysis
Specific Yield	0.10	0.03 (OB-3)	0.13 (OB-1)	Average of 5, excluding half distance analysis
Storage Coefficient	0.0034	0.0007 (OB-1)	0.005 (OB-1 and -2)	Average of 5, excluding half distance analysis

The references described above each contain data that may be used to formulate the conceptual model of groundwater flow on St George Island. These data are summarized in Table 2.

Table 2. Hydrogeologic data that forms the HCM of St George Island.

Parameter	Value	Notes	Reference
Structural			
Topography	-3 to 22 ft	Lidar map	NWFWMD
SAS bottom elevation	-39 to -49 ft		Schneider and Kruse (2001)
Holocene thickness	16 to 33 ft		Schneider and Kruse (2001)
	25 to 30 ft		Corbett, et al (2000)
	26 ft	Used in calculations	Corbett, et al (2000)
	22 ft		Stidham and Associates (2009)
Pleistocene thickness	16 to 20 ft		Schneider and Kruse (2001)
Saltwater lens thickness	16 to 98 ft		Schneider and Kruse (2001)
Groundwater Flow			
Horizontal Hydraulic conductivity	16 ft/d		Schneider and Kruse (2001)
	10 to 43 ft/d		
	157 ft/d		Schneider and Kruse (2005)
	66 to 591 ft/d	Computed from tidal	Corbett, et al (2000)

Parameter	Value	Notes	Reference
		fluctuations	
	14.8 to 246 ft/d	Dye tracer study at SP site	Corbett, et al (2000)
	9 to 23 ft/d	Dye tracer study at JA site	Corbett, et al (2000)
	95 to 161 ft/d	APT conversion from Transmissivity	Stidham and Associates (2009)
Vertical hydraulic conductivity	1.6 ft/d	10:1 anisotropy	Schneider and Kruse (2001)
	0.95 to 1.61 ft/d	100:1 anisotropy	Stidham and Associates (2009)
Effective porosity	0.25		Schneider and Kruse (2001)
	0.35		Schneider and Kruse (2005)
	0.3 to 0.35	Gravimetric measurements	Corbett, et al (2000)
Specific Storage	0.0066 / ft		Li, et al (2008) from model calibration
Boundaries			
Precipitation	40.9 in/yr	1993-2000 average	Schneider and Kruse (2001)
Net recharge	-5 to 14 in/yr	Maximum = 1/3 precipitation	Schneider and Kruse (2001)
	-4 to 18 in/yr		Li, et al (2008)
Evapotranspiration	80% of rainfall	NWFWMD from AFSIRS	Corbett, et al (2000)
	50-90% of rainfall	Used in analysis	Corbett, et al (2000)
Septic inflow (from imported water)	2.8 in/yr	For developed part of island	Schneider and Kruse (2001)
Submarine discharge rates	2 to15 m^3/s	Bay side of SGI	Dulaiova and Burnett (2007)
	1 to 9 x 10^6 m^3/yr	Bay side of SGI	Corbett, et al (2000)
Saltwater transport			
Dispersivity	3.3 and 0.3 ft		Schneider and Kruse (2005)
	3.3 and 0.3 ft	James Island simulations	Li, et al (2008)
	0.33 to 1.6 ft	Based on 220 ft scale tracer test	Corbett, et al (2000)
Molecular diffusion	9.3 x 10^{-4} ft^2/d	James Island simulations	Li, et al (2008)

The data compiled above was used to formulate two separate water budgets, one for the entire island and another for the modeled area. The water budget for the entire island (Table 3) relies primarily on the work by Corbett, et al (2000) and uses a reasonable value of submarine discharge to balance the water budget. This water balance represents a current condition.

Table 3. Water budget for St George Island.

Component	Quantity (ft^3/y)	Quantity (mgd)	Percentage	Notes
Inflow				
Precipitation	5.30×10^8	10.86	97%	24.8 in/yr x area of island
Injection (septic)	1.77×10^7	0.36	3%	1997-1998 imported water
Total	5.48×10^8	11.21	100%	
Outflow				
Evapotranspiration	4.24×10^8	8.69	78%	80% of precipitation
Submarine discharge	1.24×10^8	2.52	22%	Difference to obtain balance
Pumping	0	0	0%	
Runoff	0	0	0%	
Downward leakage	0	0	0%	
Total	5.48×10^8	11.21	100%	

The second water balance (Table 4) is specific to the modeled area and provides high and low bounds on the estimates of precipitation and injection.

Table 4. Water budget for the modeled area.

Component	High		Low		Notes
	Quantity (mgd)	Percentage	Quantity (mgd)	Percentage	
Inflow					
Precipitation	17.77	99%	8.00	99%	Hi = 55 in/yr Appalachicola; Lo = 24.8 in/yr St George Island causeway
Injection (septic)	0.12	1%	0.10	1%	=333 gpd/unit x 486 units x factor (0.75 hi, 0.6 low)
Total	17.89	100%	8.10	100%	
Outflow					
Evapotranspiration	14.22	79%	6.40	79%	80% of precipitation
Submarine discharge	3.67	21%	1.70	21%	Difference to obtain balance
Pumping	0	0	0		
Runoff	0	0	0		
Downward leakage	0	0	0		
Total	17.89	100%	8.10	100%	

These water balances may be used to conceptualize the hydrogeologic system, as a guide to the relative impact of specific development strategies, or as reasonableness checks for the groundwater model that is described below.

Flow Model Analysis

MODFLOW-2000 (Harbaugh et al., 2000) was selected as the groundwater flow simulation software. This public-domain product of the U.S. Geological Survey is very widely used and accepted among

groundwater modeling professionals. It is appropriate for the multi-layer porous media constant density groundwater flow simulation.

The Groundwater Vistas (Environmental Simulations Inc, 2007) graphical user interface was used as a shell to MODFLOW. The GV calibration routine was used as a tool to assist in the calibration.

Model Construction

The model domain, with the finite difference grid overlain, is shown in Figure 3. The horizontal grid of rectangular cells has variable spacing with a maximum spacing of 200 ft x 100 ft and a minimum spacing, in the area of the APT production well, of 20 ft x 20 ft (Figure 3). There are 187 columns and 62 rows covering a 35,030 ft by 5,390 ft area extending from Sikes Cut to just west of the Bryant Patton (Hwy 300) bridge. The southwest corner of the grid is located at 1823070 ft East, 222980 ft West in 1983 State Plane Florida North coordinates. The grid is tilted at an angle of 30 counterclockwise to align the rows of the model with the general direction of the shoreline. Note that the remaining figures in the report align the rectangle of the study area with the rectangle of the report page; directions normally inferred to be north-south by page orientation do not follow this convention in the figures presented herein.

The model is divided into 3 layers that correspond to those of the conceptual model shown in Figure 2. These layers were selected to represent specific hydrogeologic layers and are uniform in thickness of 8, 4, and 12 ft. Layer 1 is modeled as an unconfined layer and all other layers are modeled as confined layers.

The boundary conditions for the model include no-flow, specified head, and specified flux, as shown in Figure 3. No-flow boundaries are placed along the two boundaries running perpendicular to the island. These boundaries are placed for convenience at the edge of the area of interest. Hydrologically, they represent flow lines that are envisioned to run cross island at these locations. A no-flow boundary is also placed at an elevation of -20 ft. This boundary represents the approximate location of the depth of aquifer materials. Specified head boundaries are placed along the remaining two boundaries that parallel the coast of the island. Hydrologically these boundaries represent discharge to the ocean. Initially these boundaries were assigned a head of 0 ft. However during the initial model simulations it was found that this simplification did not adequately describe the flow dynamics near the saltwater-freshwater interface; too much water exited the system by flowing horizontally to the boundary. As an alternative, relative freshwater heads were assigned along this boundary—starting at 0 ft at sea level and increasing linearly by a factor of 0.025 ft/ft with depth. This boundary specification approximates the complex flow directions near the freshwater/saltwater interface and maintains the freshwater bubble beneath the island.

A specified flux of 26.3 in/yr is assigned (using the MODFLOW recharge package) along the top face of the model in layer 1 to represent areal recharge to groundwater (after the processes of interception, runoff, and surface evaporation have been subtracted from precipitation). This inflow is balanced somewhat by a head dependent boundary (MODFLOW evapotranspiration package) also in layer 1. A maximum groundwater ET rate of 31 in/yr and extinction depth of 6 ft are used.

The well used in the APT model calibration simulation is represented using a specified flux boundary (well package in MODFLOW). The well is screened in layer 3 and pumps at a rate of 65.2 gpm. For the predictive simulations, a series of specified flux cells (MODFLOW well package) are used to simulate potential net irrigation water use for developed parcels. This representation is more fully described in the section on predictive model simulations.

The modeling presented here uses uniform parameter values within specific hydrogeologic layers. Insufficient spatial data exist to identify specific zones or trends of hydraulic conductivity variation. This approach ignores likely local heterogeneity of aquifer materials in favor of a simple model that can more easily be used to perform model tests.

The pre-conditioned conjugate gradient (PCG) solver of MODFLOW-2000 was used to solve the groundwater flow equations. Closure criteria were 0.001 ft for head and 1 ft^3/d for the residual. A maximum of 500 outer iterations and 10 inner iterations were allowed to achieve convergence. The relaxation and acceleration parameters were each assigned values of 1.0.

Convergence was achieved for all simulations presented in this memo, and model mass balance errors for all simulations were much less than 1%. These facts indicate that the model provides a reasonable solution to the groundwater flow equation.

Model Calibration

Calibration consists of adjusting model parameters and boundary conditions within reasonable ranges such that the model results, referred to as calibration targets, match observed conditions. Two data sets were used for model calibration: 1) regional island water levels, and 2) drawdown measurements from the APT. These calibrations are described below.

Island water levels

This calibration is intended to match the expected distribution of water levels in the study area on the island. This distribution is essentially theoretical in nature, with high water levels in the central part of the island decreasing to 0 at the shore. This expected head distribution provides bounded calibration targets in the sense that modeled water levels should be less than land surface at all cells in the model. Static water levels at the APT site (Figure 1) are used as the primary calibration targets. These wells only provide water levels at one location on the island and these water levels are subject to some uncertainty due to a fair amount of responsiveness to precipitation events. Low water levels are used as steady state calibration targets following the assumption that the spikes in water level are driven by short-duration precipitation events and are not representative of long-term water levels. Values of calibration targets at two of the three wells at the APT site are shown in Table 5.

Table 5. Comparison of modeled and observed hydraulic heads.

Well	Observed head (ft)	Modeled head (ft)	Residual (observed – modeled) ft
OB-2	1.14	1.10	0.04
OB-3	1.35	1.11	0.24

In practice, the model calibration involved iteration between the two data sets (island water levels and APT drawdown), although the model calibrations are described separately in this memorandum to maintain clarity. A prototype island water level calibration was performed to provide initial conditions for the APT drawdown model calibration. Since the island water level calibration involved adjustment of both recharge and hydraulic conductivity, a non-unique solution is likely for the prototype model. The APT drawdown calibration only involves adjustment of hydraulic conductivity. Therefore, the APT provides an improved value of hydraulic conductivity that can plugged back into the island water level calibration to refine the recharge value. Calibrated water levels for the island water level calibration are shown for the targets in Table 5 and across the model domain in Figure 4.

APT drawdown

As described above, the model calibration was performed iteratively, with the APT drawdown calibration providing the most reliable values of hydraulic conductivity. The APT drawdown calibration was initially performed as a steady state simulation using the drawdown at the end of the test as a calibration target. The final calibration of the APT involved a transient model used to simulate variable time steps.

Table 6 shows the calibration targets and modeled drawdowns for the APT drawdown calibration.

Table 6. Comparison of modeled and observed drawdowns.

Well	Observed drawdown (ft)	Modeled drawdown (ft)	Residual (observed – modeled) ft
OB-1	2.05	1.40	0.65
OB-2	2.49	2.61	-0.12
OB-3	1.13	1.04	0.09

Table 7 shows the parameter values for the calibrated model, based on both calibrations. These values generally match the expected range. However, these values should be viewed as best estimates, with some range of possible values due to the simplicity of the model and lack of calibration targets. The transmissivity of the entire aquifer is 2,740 ft^2/d. The calibrated recharge rate is 26.3 in/yr.

Table 7. Calibrated hydraulic parameters.

Parameter	Horizontal Hydraulic conductivity (ft/d)	Vertical Hydraulic Conductivity (ft/d)	Specific Storage (1/ft)	Specific Yield
Layer 1	100	10		0.2
Layer 2	10	0.44	1e-5	
Layer 3	158	14	1e-5	

Predictions

The impact of pumping groundwater from the island for the purpose of irrigation was investigated by running the model using assumed conditions for four primary variables: pumping distribution, pumping quantities, recharge, and duration of stress (pumping and/or recharge). Table 8 summarizes the predictive simulations that were made.

Table 8. Summary of predictive simulations.

Evaluation	Pumping distribution	Pumping Quantity	Recharge rate	Duration
Average pumping conditions under current level of development	Developed parcels	ADR	Average	Steady State
Average pumping conditions under full buildout	Full buildout	ADR	Average	Steady State
Climatic variability	none	none	25% reduction	Steady State
Short-term maximum stress	Full Buildout	MMR	0	30 days (average pumping conditions under full buildout as initial condition)

Average pumping conditions for current level of development

This simulation addresses the primary concern of allowing additional pumping on the island. The model is set up by specifying a net average day (ADR) withdrawal of 197 gpd per parcel from 1,022 parcels distributed across the island as shown in Figure 5a. This quantity of pumping was derived by NWFWMD based on pumping 660 gpd per parcel (assumes ¼ acre irrigated per parcel) and subtracting historical OSDS recharge (233 gpd) and 35% return flow for irrigation (230 gpd). The distribution is based on the number of public water supply interconnections relative to the total number of buildable parcels on the island. This quantity, 51%, was used to randomly select parcels from all buildable parcels that were greater than one quarter acre in size. A net pumping of 0.2 mgd was therefore assigned to 1,022 parcels in the model area. Drawdown from the calibrated steady state model is shown in Figure 6. Maximum water level declines are 0.17 ft.

Average pumping conditions under full buildout

This simulation is similar to the previous simulation, except the net average day withdrawal of 197 gpd per parcel is applied to all buildable parcels within the model area (Figure 5b). A total of 0.39 mgd is therefore applied to 1,992 parcels. Drawdown from the calibrated steady state model is shown in Figure 7. Maximum water level decline is 0.32 ft.

Climatic variability

This simulation is intended to evaluate the sensitivity of water levels to lowered precipitation that could result from periodic droughts or climate change. Of interest are the water levels at which a new equilibrium is attained. The calibrated steady state model (without pumping) was run with a 25% reduction in areal recharge rate to steady state. The results of this simulation are shown in Figure 8. Maximum water level decline from the steady state calibrated model is 0.40 ft at the center of the island.

Short-term maximum stress

This simulation is made to evaluate the impact of a short-term drought that is accompanied by maximum monthly net pumping (MMR) of 707 gpd per irrigated parcel. In this case, the results of the average pumping conditions under full buildout simulation are used as initial conditions and the model is run for 30 days without recharge and the 3.6-fold increase in pumping. As a transient model, a specific yield of 0.2 in layer 1 and specific storage of 1×10^{-5} ft^{-1} in layers 2 and 3 is assigned. Figure 10 shows the drawdown from the calibrated steady state model (no pumping) to the end of the 30 day maximum stress

period. The maximum drawdown is 0.38 ft. Comparison to the average pumping conditions (full buildout) drawdown of 0.32 ft indicates that the 30-day drought combined with the 3.6 fold increase in pumping results in an additional 0.06 ft of drawdown.

Water balance from predictive simulations

Water balances were developed for each of the four predictive simulations. These water balances are compared to the water balance for the calibrated model, which has no pumping, in Table 9. Note that the pumping is a small (5 and 10% for the average pumping under the current level of development and full buildout, respectively) component of the recharge. A common feature of the water balances is that the pumping is made up primarily by reductions in outflow to specified heads and secondarily by reductions in evapotranspiration (ET capture). The 30-day simulation accounts for the temporary elimination of recharge and increase in pumping (648,235 ft^3/d) by drawing from storage (225,342 ft^3/d), decrease in specified head outflow (186,865 ft^3/d), increase in specified head inflow (191,986 ft^3/d), and decrease in evapotranspiration (44,040 ft^3/d).

Table 9. Water balances (ft^3/d) for the groundwater flow model.

	Calibrated Model	Average pumping conditions under current level of development	Average pumping conditions under full buildout	Climatic variability	30 days (average pumping conditions under full buildout as initial condition
INFLOW					
Recharge	514,085	514,085	514,085	389,784	0.0
Specified head	21,658	22,492	23,427	40,550	215,413
Storage	0	0	0	0	225,342
Total	535,743	536,576	537,512	430,334	440,756
OUTFLOW					
Evapotranspiration	262,393	258,849	255,560	253,248	211,520
Specified head	273,376	251,160	230,218	177,089	43,353
Wells	0	26,563	51,732	0	185,882
Storage	0	0	0	0	0
Total	535,726	536,571	537,511	430,337	440,754
% DIFFERENCE	0.0	0.0	0.0	0.0	0.0

Saltwater Upconing Analysis

The model described above assesses drawdown due to additional pumping at the parcels. Drawdown is one constraint that may limit water production or it may be a surrogate for another impact, that of saltwater upconing. Saltwater upconing is a concern on St George Island because the relatively low water level elevation implies a shallow depth of the saltwater interface (between 40 and 80 ft for 1 and 2 ft of water table elevation, according to the Ghyben-Herzberg principle). The additional pumping will lower the water table elevation and hence raise the elevation of the saltwater interface. The localized effect of the pumping and contamination of individual wells is of most concern because the water level is lowered the most close to the well.

An analysis method developed by Motz and Acar (2007) was used to approximate the critical pumping rate at which the saltwater interface would rise into the well and contaminate it. Like most analytical equations, many simplifying assumptions are made, and these must be considered when judging the applicability of the method and the results obtained. The following is a description taken from Motz and Acar (2007) describing the method:

In an aquifer overlain by a leaky confining unit, the steady-state drawdown in a piezometer at a depth of penetration z and a distance r from a steadily discharging well that is screened between the penetration depths d and ℓ is given by (Hantush 1964) .

$$s = \frac{Q}{4\pi K_r b}\left[2K_0\left(\frac{r}{B}\right) + f_s\right] \qquad (1)$$

where s = drawdown; Q = pumping rate of the well; K_r = horizontal hydraulic conductivity of the aquifer; b = thickness of aquifer; K_0 = modified Bessel function of the second kind, zero order; r = radial distance from the well; $1/B = (K'/b'T)^{1/2}$; K'/b' = leakance of the overlying confining unit; T = transmissivity of the aquifer = $K_r b$; and f_s = partial penetration correction factor:

$$f_s = \frac{4b}{\pi(\ell - d)}\sum_{n=1}^{\infty}\frac{1}{n}\left[\sin\left(\frac{n\pi\ell}{b}\right) - \sin\left(\frac{n\pi d}{b}\right)\right]\cos\left(\frac{n\pi z}{b}\right)K_0\left[\left(\frac{K_z}{K_r}\right)^{1/2}\left(\frac{n\pi r}{b}\right)\right] \qquad (2)$$

where ℓ = distance from top of aquifer to bottom of well screen; d = distance from top of aquifer to top of well screen; n = summation index; and K_z = vertical hydraulic conductivity of the aquifer.

Based on Equations 1 and 2, the analytical, sharp-interface solution that describes the upconing of saltwater beneath a well pumping freshwater from an aquifer overlain by a leaky confining unit is (Motz 1992):

$$Q_c = \frac{2\pi(0.3)T(b-\ell)}{\delta\left[K_0\left(\frac{r_w}{B}\right) + \frac{f_i}{2}\right]} \qquad (3)$$

where: Q_c = critical pumping rate; $\delta = [(\gamma_f/(\gamma_s - \gamma_f)]$; γ_f = specific weight of fresh water; γ_s = specific weight of salt water; r_w = radius of well; and f_i = partial penetration correction factor for drawdown along the saltwater-freshwater interface at z = b:

$$f_i = \frac{4b}{\pi(\ell - d)}\sum_{n=1}^{\infty}\frac{(-1)^n}{n}\left[\sin\left(\frac{n\pi\ell}{b}\right) - \sin\left(\frac{n\pi d}{b}\right)\right]K_0\left[\left(\frac{K_z}{K_r}\right)^{1/2}\left(\frac{n\pi r}{b}\right)\right] \qquad (4)$$

The upconing solution in Equations 3 and 4 is based on Muskat's (1946) approach, in which it is assumed that the rise in the saltwater-freshwater interface is small, the interface acts as a streamline, and no flow occurs in the saltwater beneath the interface. Thus, in this solution, the aquifer thickness b is the distance from the top of the aquifer to the saltwater-freshwater interface. The critical rise of the interface is assumed to occur when the interface has risen to a height equal to 0.3 times the distance between the initial location of the interface and the bottom of the pumped well (Motz 1992).

The most critical assumption in this method is that the pumped zone is a leaky aquifer in which water is obtained from above. The St George Island conceptual model can be described as such, although the amount of confinement and supply from above are probably limited. To account for the data and applicability concerns regarding this method, a range of parameters and configurations were run to

obtain critical flows, as shown in Table 10. To construct Table 10, the range in parameters was determined as:

Transmissivity = 2000 to 4000 ft^2/d

Leakance = 0.11 to 0.55 /d

Distance from top of aquifer (top of layer 3) to saltwater interface = 20 ft;

Distance from top of aquifer (top of layer 3) to top of well screen = 0 ft; and

Distance from top of aquifer (top of layer 3) to bottom of well screen = 10 ft.

Transmissivity and leakance were then varied to obtain a range in critical pumping.

Table 10. Critical pumping rates (gpd) for individual wells (saltwater upconing analysis).

Parameter	T = 2000 ft^2/d	T = 4000 ft^2/d
L = 0.11	2,510	4,470
L = 0.55	3,520	6,010

The critical pumping rate is more representative of the total pumping (not accounting for return flow) than the net withdrawal rate and hence should be compared to the average day pumping (660 gpd) and maximum month pumping (1,440 gpd) for quarter acre parcels. This analysis suggests that there is a limitation on how much water should reasonably be allowed per well. Note that the critical pumping rate is just slightly more sensitive to doubling the transmissivity than the leakance. Also note that the presence of a semi-confining bed immediately below the pumped zone and approximately at the location of the saltwater interface is not considered in this analysis. The effect of the semi-confining bed would be to retard upward movement of saltwater and hence allow higher critical pumping rates than suggested by this analysis.

Summary and Recommendations

The modeling presented in this technical memorandum provides an approximation to the drawdown that would take place if irrigation withdrawals were permitted using quantities estimated by NWFWMD. A review of the prior studies, which included a series of analyses regarding submarine discharge at barrier islands, was conducted and used in formulating an HCM. In addition, a site-specific APT was reviewed and incorporated into the HCM. A numerical groundwater flow model was constructed based on the HCM and calibrated to water levels at a limited number of locations and to the response to the APT. The APT provided data on hydraulic conductivities and these values were used to approximate an average recharge rate. Following calibration, the model was configured to evaluate several predictive scenarios.

The predictive scenarios that were conducted with the model were primarily related to the effect of irrigation withdrawal on the island. For average projected pumping under the current level of development, a total of 1,022 parcels with a net withdrawal of 0.2 mgd were modeled. This withdrawal gave a maximum steady state drawdown of 0.17 ft. For average pumping under full buildout conditions, a total of 1,992 parcels with a net withdrawal of 0.39 mgd were modeled. This withdrawal resulted in a maximum steady state drawdown of 0.32 ft. A steady state simulation with a reduction in recharge of 25% indicated that water levels on the island would decline by a maximum of 0.40 ft. Sensitivity to recharge was observed by others (Li et al, 2008 and Schneider and Kruse, 2005). A transient simulation

using the average full buildout pumping as an initial condition and 30 days without recharge and maximum monthly pumping resulted in a total maximum drawdown of 0.38 ft.

An analytical evaluation of the potential for saltwater upconing showed that the critical pumping rate at which upconing would occur ranges between 2,510 and 6,010 gpd per well. Note that these quantities should be subject to a factor of safety, do not consider interference effects from other wells, and are based on simplifying assumptions that are inherent to the analytical solution.

The current modeling analysis was limited by the data. Additional data, including several water level recorders and water quality monitoring, would allow development of a transient model and the ability to understand the dynamics of flow on the island. Another useful activity would be to integrate useful aspects of the prior models by Schneider and Kruse (2005) and Li, et al (2008) into a single model. The work of these researchers focused on different aspects of the hydrogeology and used unique calibration targets in the form of the position of the saltwater interface, as determined from a geophysical investigation. The information from these studies could be added to the current model to develop a SEAWAT model that would be capable of evaluating variable density saltwater transport.

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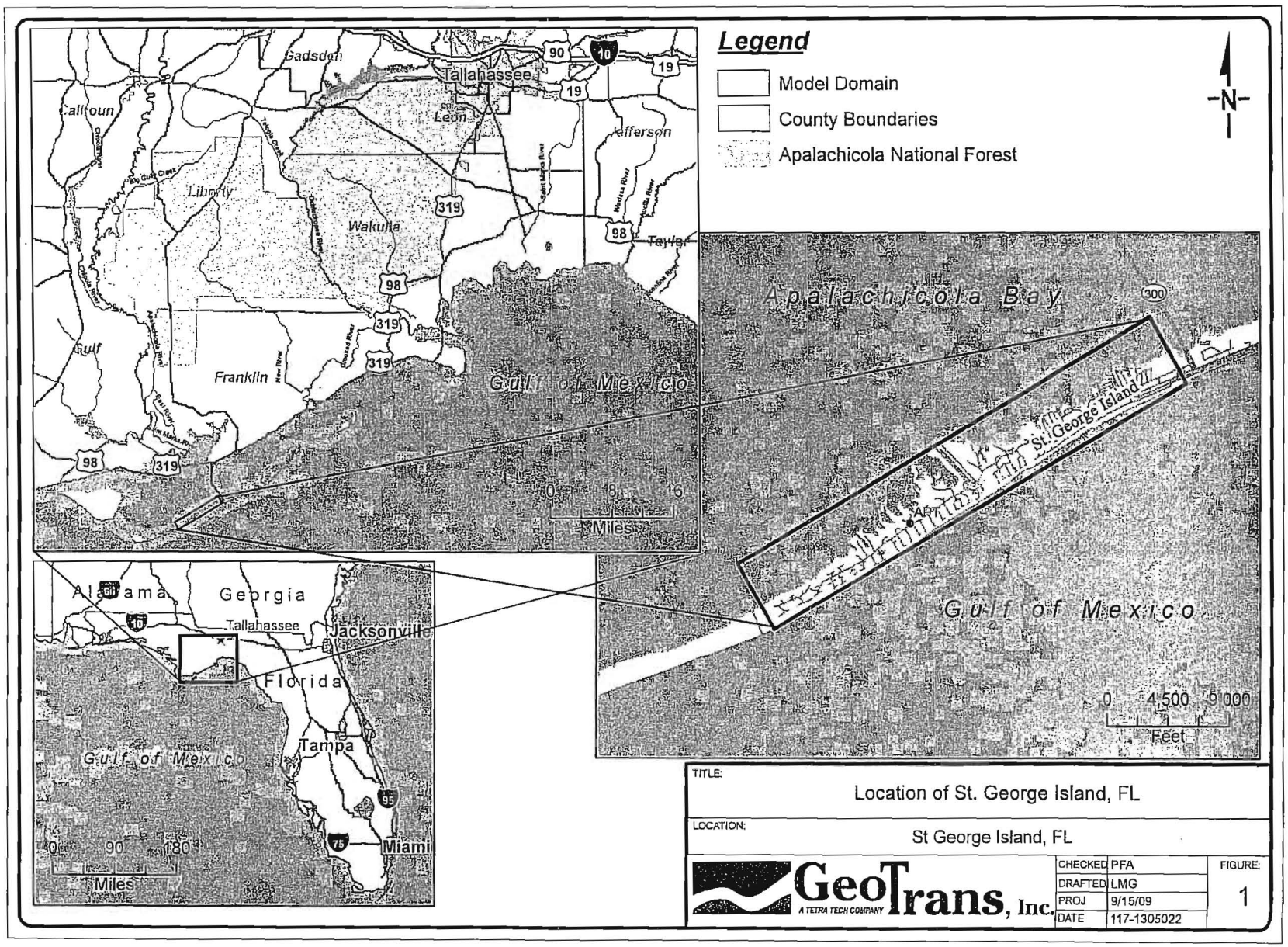

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000015 of 000023
Technical Memorandum

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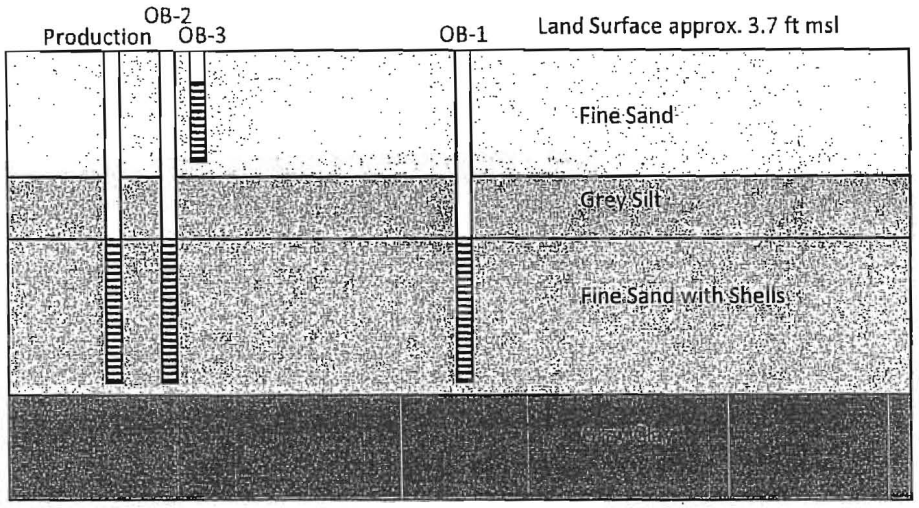

TITLE:	Conceptual Cross Section of St George Island
LOCATION:	St George Island, FL

GeoTrans, Inc.

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DRAFTED:	LMG
PROJECT:	117-1305022
DATE:	9/18/09X

FIGURE: 2

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000016 of 000023
Technical Memorandum

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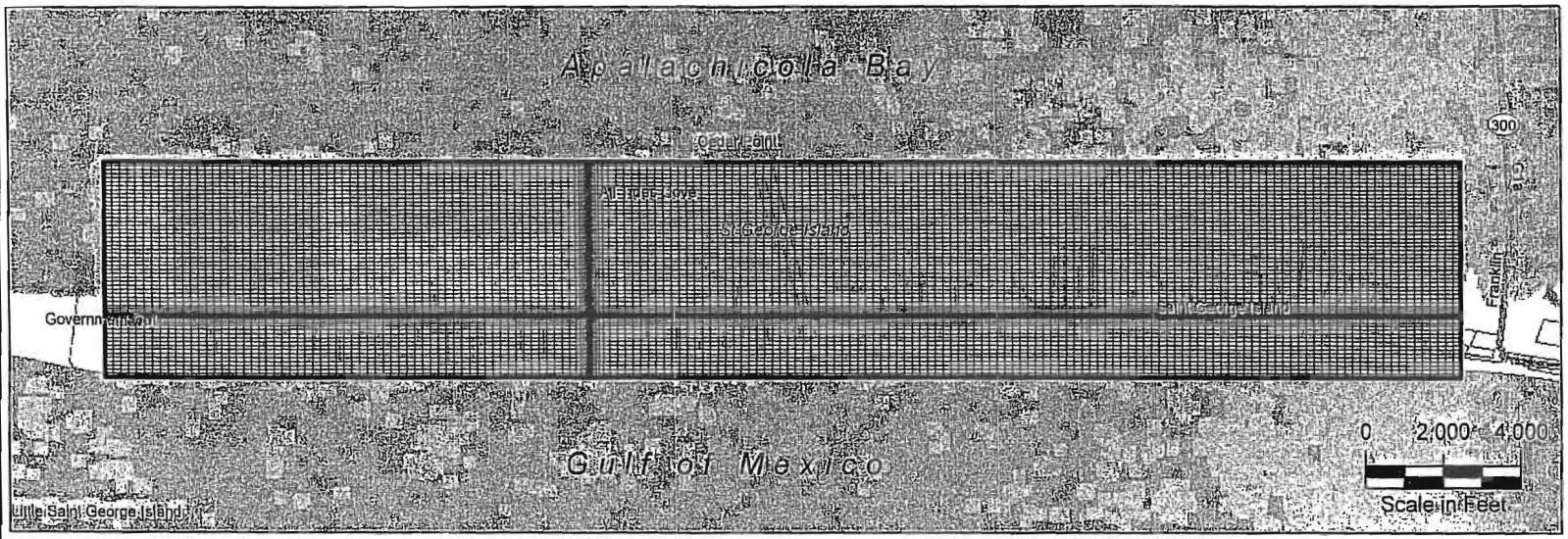

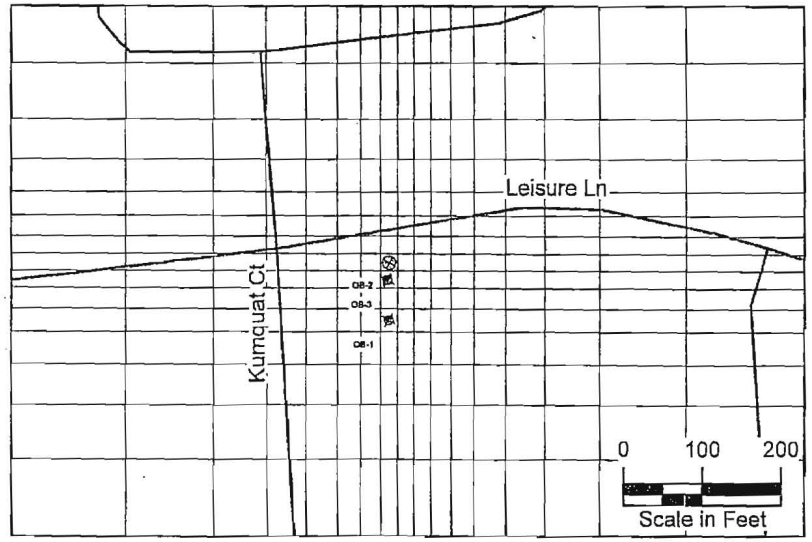

Legend

- Observation Wells
- APT Production Well
- Roads
- Model Domain
- Model Grid

TITLE: Model Domain and Local APT Detail with Finite Difference Grid Overlain

LOCATION: St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

CHECKED	PFA
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PROJ	9/15/09
DATE	117-1305022

FIGURE: 3

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000017 of 000023
Technical Memorandum

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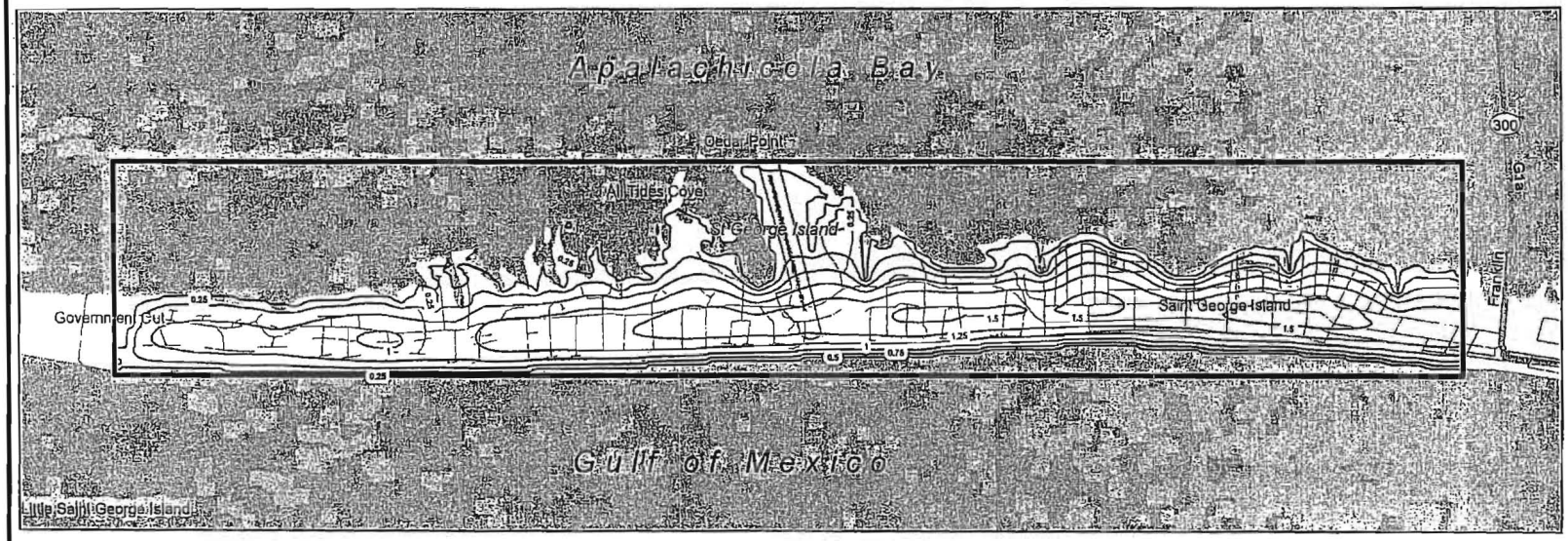

N

0 2,000 4,000

Scale in Feet

TITLE:
Modeled Steady State Hydraulic Head (0.25 ft interval) in Layer 1

LOCATION:
St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

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DATE	117-1305022

FIGURE: 4

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000018 of 000023
Technical Memorandum

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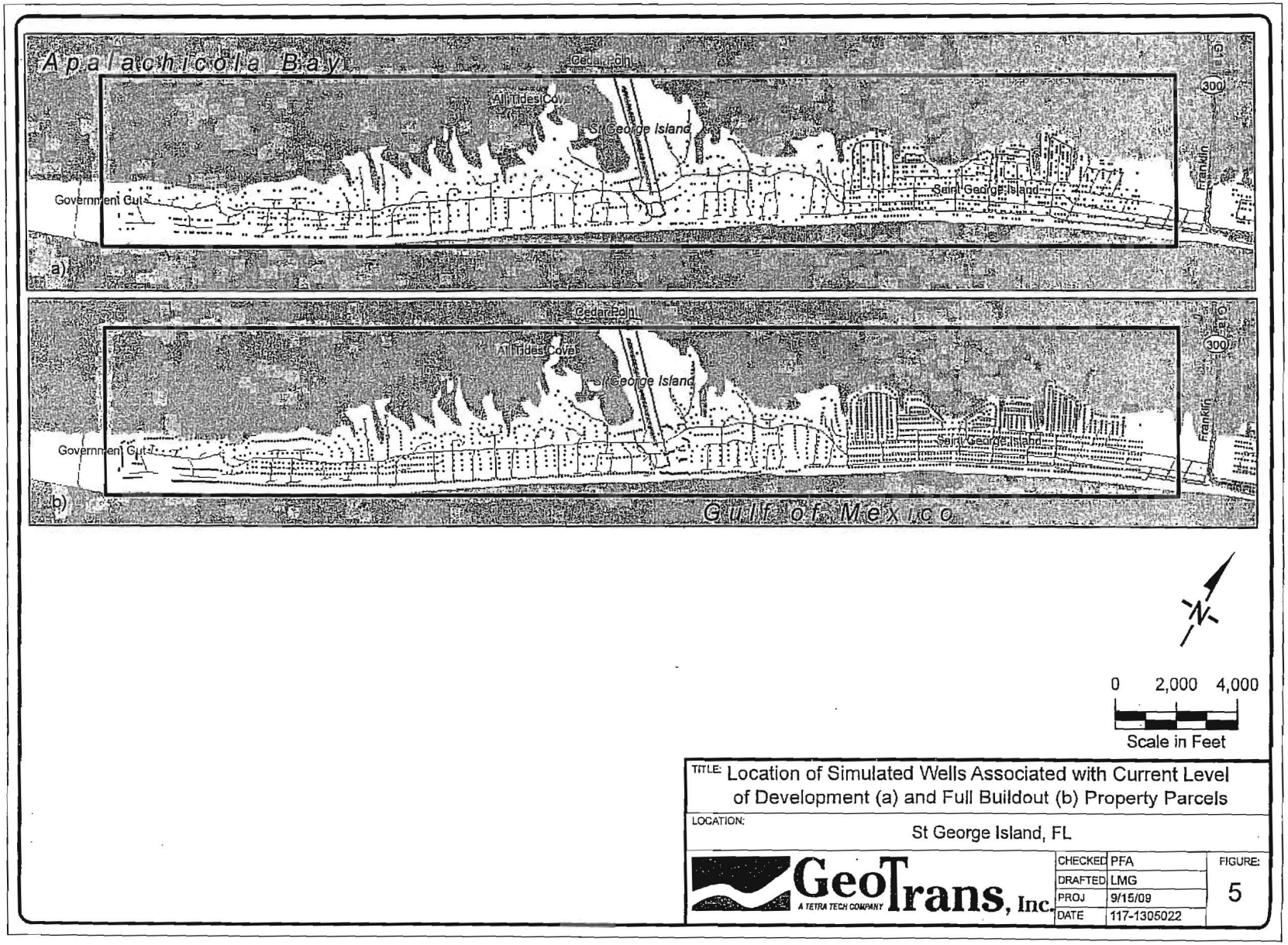

TITLE: Location of Simulated Wells Associated with Current Level of Development (a) and Full Buildout (b) Property Parcels

LOCATION: St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

CHECKED	PFA
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DATE	117-1305022

FIGURE: 5

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000019 of 000023
Technical Memorandum

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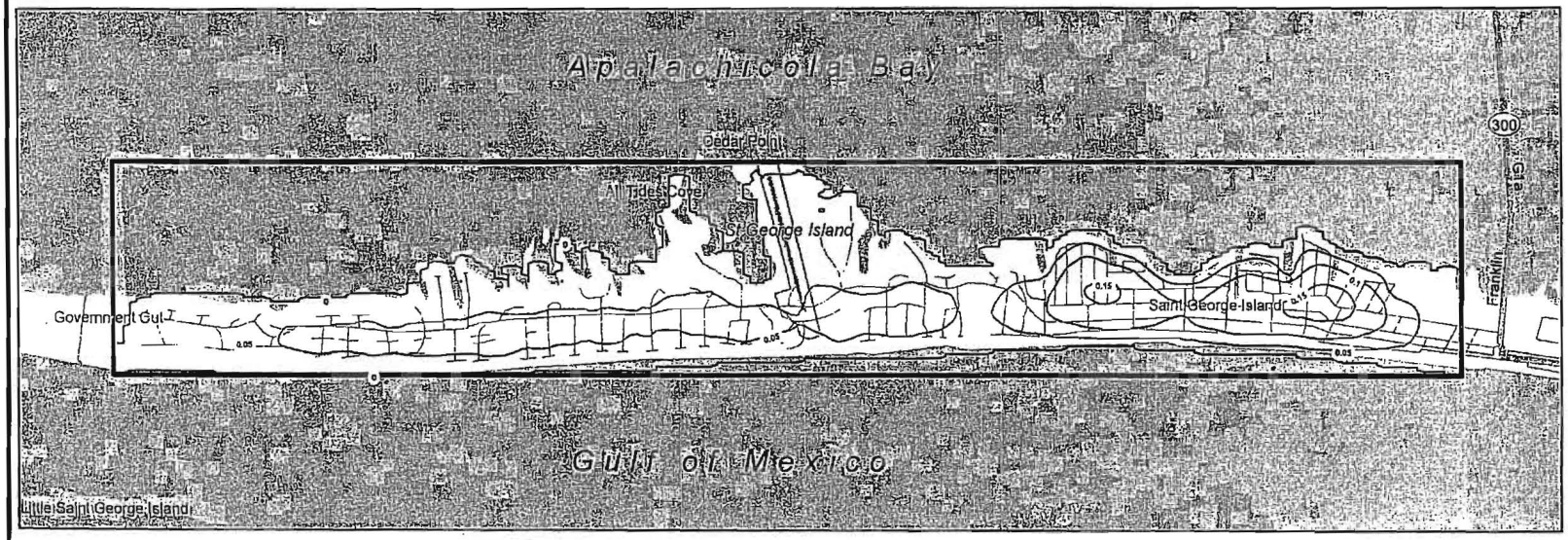

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0 2,000 4,000

Scale in Feet

TITLE:
Modeled Drawdown Contours (0.05 ft interval) for Steady-State ADR Pumping for Current Level of Development

LOCATION:
St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

CHECKED	PFA
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PROJ	9/15/09
DATE	117-1305022

FIGURE: 6

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000020 of 000023
Technical Memorandum

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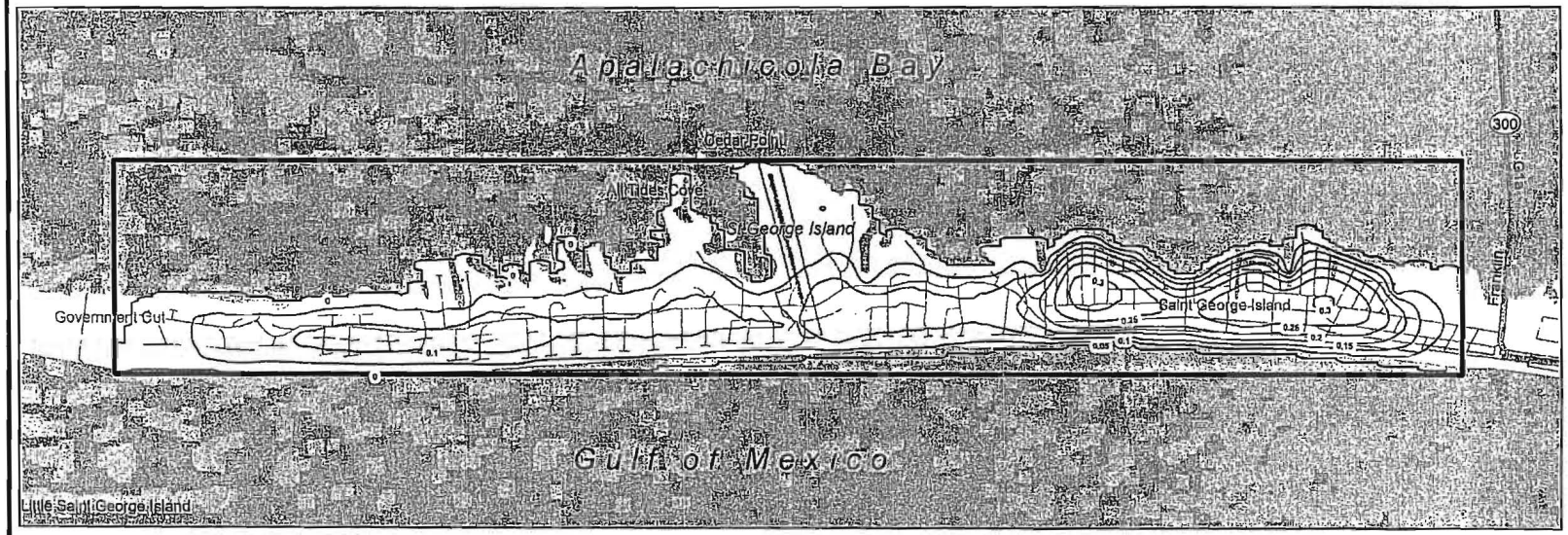

N

0 2,000 4,000

Scale in Feet

TITLE: Modeled Drawdown Contours (0.05 ft interval) for Steady-State ADR Pumping for the Full Buildout

LOCATION: St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

CHECKED	PFA
DRAFTED	LMG
PROJ	9/15/09
DATE	117-1305022

FIGURE: 7

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000021 of 000023
Technical Memorandum

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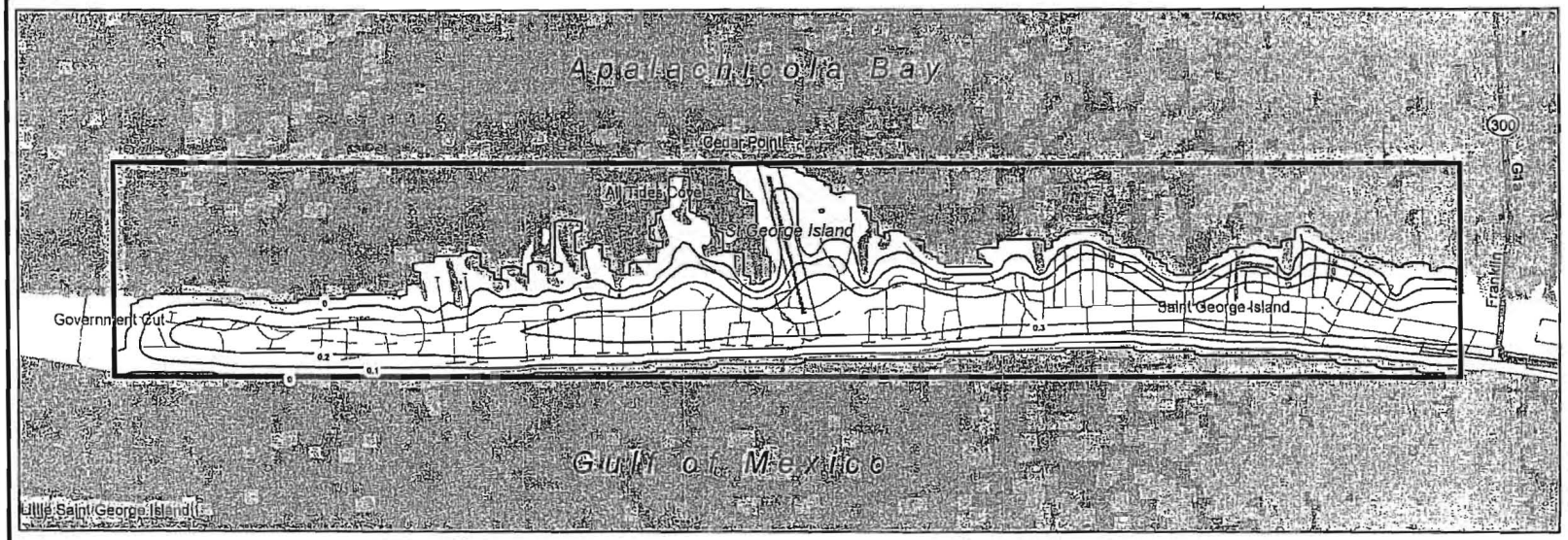

N

0 2,000 4,000

Scale in Feet

TITLE: Modeled Water Level Decline Contours (0.1 ft interval) for Steady-State 25% Recharge Reduction (No Pumping)

LOCATION: St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

CHECKED	PFA
DRAFTED	LMG
PROJ	9/15/09
DATE	117-1305022

FIGURE: 8

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000022 of 000023
Technical Memorandum

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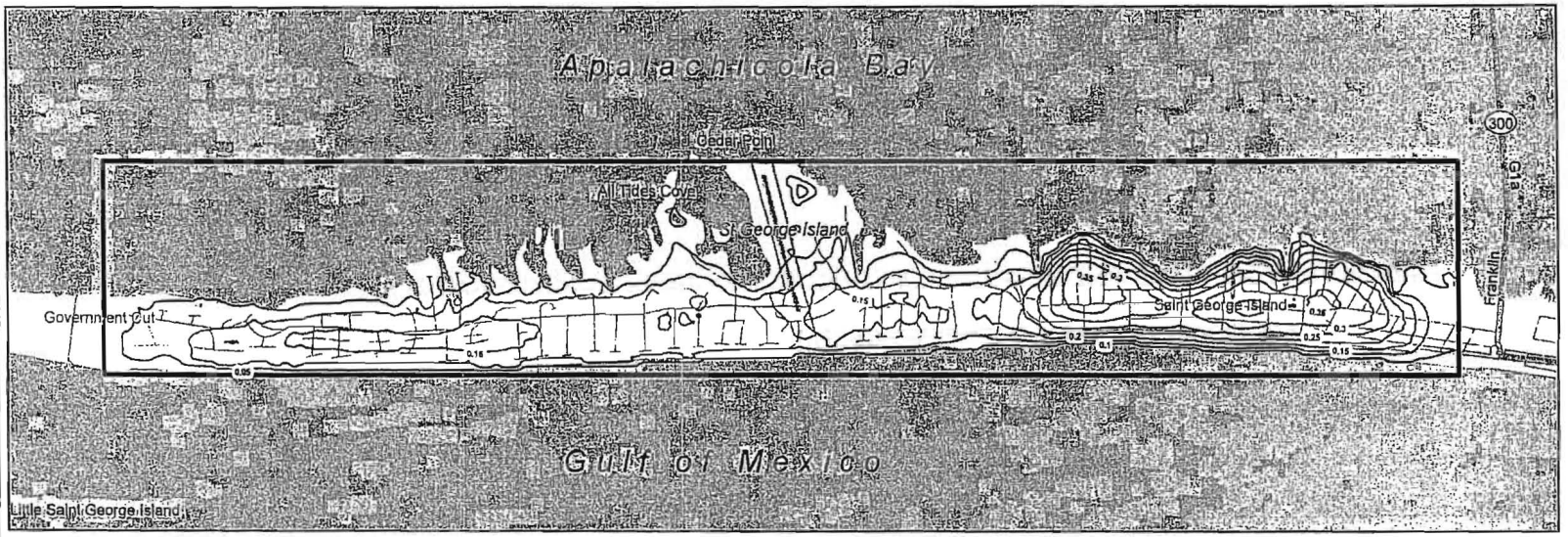

N

0 2,000 4,000

Scale in Feet

TITLE: Modeled Drawdown Contours (0.05 ft interval) for Steady State, Full Buildout ADR with Short-Term Maximum Stress (MMR and No Recharge)

LOCATION: St George Island, FL

GeoTrans, Inc. A TETRA TECH COMPANY

CHECKED	PFA
DRAFTED	LMG
PROJ	9/15/09
DATE	117-1305022

FIGURE: 9

Docket No. 100104-WU
Gene Brown, Exhibit GB-13, Page 000023 of 000023
Technical Memorandum

(d) In Area C, as delineated on the map identified in Rule 40A-2.902, Florida Administrative Code, an Individual Water Use Permit is required for ground water use if:

1. The withdrawal exceeds 1,440,000 gallons on any single day; or

2. The withdrawal is obtained from one or more wells ten (10) inches or larger in diameter; or

3. The withdrawal is for community public supply or bottled water use.

(e) An Individual Water Use Permit is required for surface water use if:

1. A system or a single facility withdraws water from a lake, pond, impoundment, reservoir, river, stream or other surface water courses and the withdrawal:

   a. exceeds an annual daily average of 100,000 gallons;

   b. exceeds 1,000,000 gallons on any single day, or;

   c. is more than ten (10) percent of the base flow of the supplying water body.

2. The surface water withdrawal is located within Gadsden County and the outside diameter of the withdrawal pipe or the sum of the outside diameters of the withdrawal pipes is four (4) inches or greater in size.

3. The withdrawal is for community public supply or bottled water use.

(f) In Water Resource Caution Areas Individual Water Use Permits shall be required for ground and surface water uses as specified in Rule 40A-2.802, Florida Administrative Code, except for those uses exempt by Rule 40A-2.051, Florida Administrative Code.

(4) Failure to obtain a water use permit by non-exempted users creates a conclusive presumption that the use does not exist or has been abandoned, and the withdrawal will be considered in violation of this Chapter.

(5) Any person controlling a ground water or surface water withdrawal which does not require an Individual Water Use Permit may submit an application to obtain a permit.

Specific Authority 373.044, 373.113, 373.116, 373.118, 373.171 FS.
Law Implemented 373.171, 373.219, 373.226 FS.
History–New 10-1-82; Amended 1-5-86, 5-4-87, 8-1-89, 5-31-92, 11-1-93, 10-1-95, 7-1-98, 1-1-05, 2-27-06.

40A-2.051 EXEMPTIONS.

(1) A water use permit shall not be required for domestic water use.

(2) An Individual Water Use Permit shall not be required for withdrawals of water from non-community public supply wells four (4) inches or smaller in diameter, withdrawing an annual daily average of 15,000 gallons or less in Permit Area A.

(3) An Individual Water Use Permit shall not be required for wells constructed and used for temporary testing or monitoring purposes. However, prior to the

conversion of a test or monitor well to a production well, a water use permit shall be obtained from the District, if required, according to the provisions of Section 40A-2.041, Florida Administrative Code.

(4) An Individual Water Use Permit shall not be required for aquifer or ground water quality remediation projects provided the following conditions are met: the project is conducted under the auspices of the Department or U.S. Environmental Protection Agency, the treated effluent returned meets applicable Department of Environmental Protection water quality standards, the treated effluent is returned via infiltration or direct injection into the same formation and supply source from which it was obtained, and a preliminary well abandonment plan is submitted to the District.

(5) An Individual Water Use Permit shall not be required for dewatering activities in construction sites, as long as the dewatering activity has a duration of six (6) months or less.

(6) An Individual Water Use Permit shall not be required for non-public supply shallow wells four (4) inches or smaller in diameter, withdrawing an annual daily average of 15,000 gallons or less of water from the shallow sand aquifer in the portion of Permit Area A found in the counties of Bay, Franklin, Gulf, Okaloosa, and Walton, and which do not penetrate any competent and continuous confining formation.

(7) An Individual Water Use Permit shall not be required for non-public supply shallow wells, having a depth no greater than one hundred (100) feet, four (4) inches or smaller in diameter, withdrawing an annual daily average of 15,000 gallons or less of water from the shallow sand aquifer in the portion of Permit Area A found in Escambia and Santa Rosa counties, and which do not penetrate any competent and continuous confining formation.

(8) An Individual Water Use Permit shall not be required for a single non-public supply well four (4) inches or smaller in diameter, withdrawing an annual daily average of 15,000 gallons or less of water which is located in Gadsden County outside of the Upper Telogia Creek Water Resource Caution Area.

(9) An Individual Water Use Permit shall not be required for ground water used for heating and cooling systems which withdraw less than an annual daily average of 100,000 gallons and provide for the return of non-treated uncontaminated water, by means of a closed system, to the same subsurface formation and supply source from which the water was obtained.

(10) An Individual Water Use Permit shall not be required for water obtained from holding ponds not constructed in wetlands and not recharged by ground water infiltration or by a river, stream, or other naturally occurring water course(s).

Rulemaking Authority 373.044, 373.113, 373.171 FS.
Law Implemented 373.171, 373.216, 373.219 FS.
History–New 10-1-82; Amended 5-17-83, 3-1-84, 1-5-86, 8-1-89, 5-31-92, 11-2-92, 10-1-95, 7-1-98, 1-1-05, 2-27-06, 1-4-10.

WATER MANAGEMENT SERVICES, INC.
WELLS

Cust #		Original Customer	Current Customer	Service Address	R	C	P	M	Well
PLANTATION WELLS									
0002		St. George Plantation	NO CUSTOMER	SOUTH ENTRANCE PLANTATION		C2			WELL
0034		Pelham	GUICE SLAWSON	29 SEA PINE VILLAGE	R1				WELL
0047		Dews	THOMAS NATOLI	70 SEA PALM VILLAGE	R1				WELL
0056		Seral	ROBERT STAIB	20 BAY PALM VILLAGE	R1Q				WELL
0062		Whitaker (Schultz)	PHIL B. WHITAKER	3 & 4 NICK'S HOLE	R2				WELL
0067		Davis	JOSIE DAVIS	9 PEBBLE BEACH VILLAGE	R1				WELL
0076		Slagnt	DOROTHY SLAGHT	51 PEBBLE BEACH VILLAGE	R1				WELL
0080		Miley	HRR PROPERTIES, LLC.	9 WINDJAMMER VILLAGE	R1				WELL
0084		Henkel	VIVIAN ANN KADIS	65 PEBBLE BEACH VILLAGE	R1				WELL
0088		Troutman	BEVERLY TROUTMAN	4 TURTLE BEACH VILLAGE	R1				WELL
0090		Caminex	JON CAMINEZ	8 TURTLE BEACH VILLAGE	R1				WELL
0092		Soberay	GRETCHEN RUPERT	10 TURTLE BEACH VILLAGE	R1				WELL
0100		Siler	ROY PLAUT	38 TURTLE BEACH VILLAGE	R1				WELL
0109		SGI Plantation Homeowners Ass	LLT BUILDING CORP.	48 TURTLE CLUBHOUSE/POOL		C2			WELL
0110		Buford	NORBERT KAMINSKI	49 TURTLE BEACH VILLAGE	R1				WELL
0112		Taylor	AARON TAYLOR	51 TURTLE BEACH VILLAGE	R1				WELL
0113		Plessinger	CLAIR PLESSINGER	53 TURTLE BEACH VILLAGE	R1				WELL
0117		Froelich	MARK S. & JULIA L. GOBER	38 PLANTATION BEACH VILL.	R1				WELL
0123		Tunnell	LEONARD MONIZ	6 PLANTATION BEACH VILL.	R1				WELL
0125		Caddell	JOHN CADDELL	8 PLANTATION BEACH VILL.	R2				WELL
0131		Kadis	JAN L. DOUGHTY	23 PLANTATION BEACH VILL.	R1				WELL
0147		Thaxton	JAMES W. CRANFORD	21 BAY VIEW VILLAGE	R1				WELL
0152		Sommer	GERHARD SOMMER	33 TREASURE BEACH VILLAG	R1				WELL
0165		Wilkinson	WALTHALL OIL COMPANY	26 TREASURE BEACH VILLAG	R1				WELL
0181		Hanes	GLORIA HUNT DEISON	2 PELICAN BEACH VILLAGE	R1				WELL
0195		Burman	CRAIG BEACH NEST FL, LLC	14 PELICAN BEACH VILLAGE	R1				WELL
0196		Thames	MORGAN M. SCHUESSLER	15 PELICAN BEACH VILLAGE	R1				WELL
0199		Hughes	STEVEN SEGER	22 PELICAN BEACH VILLAGE	R1				WELL
0207		McMillan	M. ERIC FOSTER & ALI M. FO	29 DOLPHIN BEACH VILLAGE	R1				WELL
0211		Lubbers	W. L. MADDOX	8 DOLPHIN BEACH VILLAGE	R1				WELL
0212		Moore	LUCY MOODY	25 DOLPHIN BEACH VILLAGE	R1				WELL
0220		Llewellyn	WILLIAM L. MOODY	14 DOLPHIN BEACH VILLAGE	R1				WELL
0221		Simmons	GARY H. & TRACY C. BURGE	23 DOLPHIN BEACH VILLAGE	R1				WELL
0988		Beach Builders	DONALD H. & LINDA GUNTHE	9 DOLPHIN BEACH VILLAGE	R1				WELL
1028		Cullen	MASON & MARILYN BEAN	61 SEA PALM VILLAGE	R1				WELL
1059		Pearce (Schultz)	STUART PECKNER	10 NICK'S HOLE	R1				WELL
1090		Jeppson	ROBERT M. TOLENTINO	52 SEA PALM VILLAGE	R1				WELL
1091		Jeppson	RICHARD WATSON	51 SEA PALM VILLAGE	R1				WELL
1108		Salyer	JOHN H. SALYER	36 PEBBLE BEACH VILLAGE	R1				WELL
1115		Doyle/Winter	H & M LOWE	21 PEBBLE BEACH VILLAGE	R1				WELL
1118		Butzbaugh	WAYNE SHULER	34 PEBBLE BEACH VILLAGE	R1				WELL
1124		Beach Builder's	NO CUSTOMER	38 PELICAN BEACH VILLAGE	R1Q				WELL
1137		Farrow	KENNETH L. FARROW	8 OSPREY VILLAGE	R1				WELL
1151		Kurtz	NO CUSTOMER	33 TURTLE BEACH VILLAGE	R1				WELL
1202		Plumblee	HARRY E. PLUMBLEE, JR	7 PLANTATION BEACH	R1				WELL
1207		DJ Enterprises	LARRY IMAN	6 OYSTER BAY VILLAGE	R1				WELL
1208		Lyles	SCOTT MCCORMICK	6 HERON BAY VILLAGE	R1				WELL
1212		Mahr Dev.	ROB OLIN	4 CASA DEL MAR	R1				WELL
1213		Mahr Dev.	MATT SMITH/DAVE RILEY	5 CASA DEL MAR	R1				WELL
1223		Mahr Dev.	DEBORAH RESPASS	16 CASA DEL MAR	R1Q				WELL
1308		Mahr Dev. (Covington)	NO CUSTOMER	18 SCHOONER LANDING					WELL
1356		Andrew Jackson	SIDNEY E. GRAY	47 CASA DEL MAR	R1				WELL
1365		Brad Suber	ALVIN & JOHAN HAGAMAN	17 SCHOONER LANDING	R1				WELL
1377		Barry Snell	JOE AND ALLISON ALTIC	22 BAY VIEW VILLAGE	R1Q				WELL
1403		Andrew Jackson	FRANK BRICKOWSKI	39 CASA DEL MAR	R1				WELL
1424		Charles M. Stafford	CHARLES M. STAFFORD	3 PELICAN BEACH VILLAGE	R1				WELL
1439		Guyon	THOMAS AMOS	11 TURTLE BEACH	R1Q				WELL
1484		Hoffman	CYNTHIA McEWEN	20 TURTLE BEACH VILLAGE	R1				WELL
1495		Two Palm Investment co.	EDNA LEE WILLIS	25 TURTLE BEACH VILLAGE	R1Q				WELL
1500		Davis	JEROME & REBECCA BROUS	9 PELICAN BEACH VILLAGE	R1				WELL
1506		Poloronis Construction	JOE PHILLIPS	12 BAY VIEW VILLAGE	R1				WELL
1513		Bayside HOA	BAYSIDE HOMEOWNERS AS	BAYSIDE POOL		C1			WELL
1516		Henry C. Browne	HENRY C. BROWNE	4 BAY PALM VILLAGE	R1				WELL
1517		Gold Key Contr & Designs	DANIEL SUMNER	45 PLANTATION BEACH VILL	R1Q				WELL
1519		Carl Hoffman	JESSIE MUECKE	10 SEA PINE VILLAGE	R1				WELL
1525		Earl Cash	PATRICK G. BAILEY	2 PEBBLE BEACH VILLAGE	R1				WELL
1528		William Solberg	6TH ALABAMA, LLC	15 TREASURE BEACH VILLAG	R1				WELL
1530		George T. Jarrard, Jr.	FICKLING & COMPANY, INC.	7 PELICAN BEACH VILLAGE	R1Q				WELL
1533		William Vaughn	MARGARET E. KOEPKE	5 WINDJAMMER VILLAGE	R1				WELL
1542		Two Palm Investment co.	GAYLE DeHANN	70 PEBBLE BEACH VILLAGE	R1Q				WELL
1548		John Thornton	JOHN THORNTON	6 DOLPHIN BEACH VILLAGE	R1				WELL

WATER MANAGEMENT SERVICES, INC.
WELLS

Cust #	Original Customer	Current Customer	Service Address	R	C	P	M	Well
1559	Jeff Galloway	GEORGE DUSOE	59 PLANTATION BEACH VILL	R1				WELL
1573	Robert L. Ealy	ROBERT L. EALY	20 SANDPIPER VILLAGE	R1				WELL
1579	Jerry M. Thompson (Mahr)	JERRY M. THOMPSON	9 OYSTER BAY VILLAGE	R1				WELL
1583	Chollet Ramsey	CHOLLET RAMSEY	46 TURTLE BEACH VILLAGE	R1				WELL
1596	S.G.I. Methodist Church	MICHAEL A. DOYLE	13 PEBBLE BEACH VILLAGE	R1				WELL
1634	Lacey & Fran Robinson	JEANNE J. CUMMINS	44 TURTLE BEACH VILLAGE	R1Q				WELL
1640	Pruitt, Humphrey	DAVID DREIBELBIS	2 DOLPHIN BEACH VILLAGE	R1Q				WELL
1662	Carl Hoffman	MARK E. GOLDSTONE	15 PEBBLE BEACH VILLAGE	R1				WELL
1677	Gary Fogelman	DAVID L. ALLEN	16 TURTLE BEACH VILLAGE	R1				WELL
1685	Wayne Bevis	WAYNE BEVIS	15 SCHOONER LANDING	R1				WELL
1722	Claude Sims	DAVID JOHNSON	30 SCHOONER LANDING	R2				WELL
1730	Steven C. Ramsey	STEVEN C. RAMSEY	49 SEA PALM VILLAGE	R1				WELL
1732	Mike Parrish	JAMES WOJCIK	17 BAY PALM VILLAGE	R1				WELL
1750	Gibbes-Miller Constr	CHARLES W.L EHRHARDT	44 PLANTATION BEACH VILL	R1				WELL
1758	Tom Siculiano	TOM SICULIANO	47 PEBBLE BEACH VILLAGE	R1				WELL
1765	Greg & Lara Becker	GREG & LARA BECKER	48 SEA PALM VILLAGE	R1				WELL
1808	Gary Fogelman	SUSAN A. MARTIN	7 HERON BAY VILLAGE	R2				WELL
1814	Manley & Glen Siler	MANLEY & GLEN SILER	26 BAY VIEW VILLAGE	R1				WELL
1840	Gibbes-Miller Construction	RICHARD T. PLUMMER	7 PELICAN POINT	R1				WELL
1851	Cothran Construction	JEFF GALLOWAY	2 SCHOONER LANDING	R3				WELL
1938	Phillip Foelich	PHILIP & KATHY FROELICH	31 PLANTATION BEACH	R1Q				WELL
1947	Mahr Dev. (Covington)	MAHR DEVELOPMENT CORP	23 SCHOONER LANDING	R1				WELL
OUTSIDE PLANTATION								
0239	Wager	GWYNNE ASHTON	29/87/5 - 335 NEDLEY ST.	R1				WELL
0242	Prickett	GLENN PRICKETT	9/90/5 - 1116 W. PINE AVE	R1				WELL
0247	Troy	LARRY TROY	32/86/5 - 347 BRADFORD	R1				WELL
0252	Gross	RONALD J. WHITFIELD	3/86/5 - 336 BROWN ST.	R1				WELL
0256	Gauthier	JOHN GAUTHIER	1/82/5 -1048 W. BAYSHSORE	R1				WELL
0258	Hicks	BILLY J. HICKS	27/78/5 - 301 E. SAWYER	R1				WELL
0283	McCall	GLADYS E. MCCALL	20/78/5 - 997 W. BAYSHORE	R1				WELL
0284	Law	JAMES WESLEY FROST	22/78/5- 1009 W. BAYSHORE	R1				WELL
0291	Reeder	LUIGI CANELLA	2/73/5 - 309 MARKS ST.	R1				WELL
0294	Goyette & Jones	GOYETTE & JONES	7/71/5 - 320 MARKS ST.	R1				WELL
0326	Whitney	T. M. WHITNEY	4/69/5 -764 W. BAYSHORE	R1				WELL
0328	Rabon	J. DAVID RABON	4/68/5 - 304 GIBSON ST.	R1				WELL
0329	Grose	DON BOYD	3/68/5 - 308 GIBSON ST.	R1				WELL
0333	Healy	RON E. WIDENER	1/68/5 - 316 GIBSON ST.	R1				WELL
0342	Steele	GLENN D. SOSEBEE	1/62/5 - 339 LAND ST.	R1				WELL
0343	Porter	JANICE A. SHEPARD	6/63/5 - 705 BUCK ST.	R1				WELL
0372	Anderson	SANDRA THORINGTON	3/61/5 - 352 PATTON ST.	R1				WELL
0373	White	DOYLE MATTHEWS	2/61/5 - 356 PATTON ST.	R1				WELL
0376	Lamamore-Edwards	JEAN GUNTER	2/59/5 - 367 BRUCE ST.	R1				WELL
0384	Millender	NO CUSTOMER	9/58/5 - 315 HOWELL ST.	R1				WELL
0387	Luttrell	JOHN LUTTRELL	10/22/1W-572 W. BAYSHORE	R1				WELL
0388	Ethridge	CARLTON ETHRIDGE	14/57/5 - 541 W. BAYSHORE	R1				WELL
0394	Pitts	CHAD GUNTER	7/57/5 - 331 BRUCE ST.	R1				WELL
0396	Kadel	CLINT H. KADEL	6/57/5 - 335 BRUCE ST.	R1				WELL
0398	Duffes	JAMES DUFFES	4/57/5 - 343 BRUCE ST.	R1				WELL
0401	Milam	NO CUSTOMER	5/55/5 - 501 W. BAYSHORE	R1				WELL
0403	Flowers	NEAL DEJARNETTE	9/56/5 - 304 WING ST.	R1				WELL
0404	Pitts	ALICE PITTS	5/56/5 - 320 WING ST.	R1				WELL
0405	Hankins	JAMES HANKINS	4/56/5 - 324 WING ST.	R1				WELL
0414	Watson	DONALD WATSON	12/54/5 - 401 MCCLOUD ST.	R1				WELL
0415	Taylor	JACK TAYLOR	1/51/5 - 327 GANDER ST.	R1				WELL
0419	Baragona	PERIANNE MCKEOWN	7/52/5 - 304 GANDER ST.	R1				WELL
0424	Christenson	JANET CHRISTENSON	12/15/1W - 481 W. PINE	R1				WELL
0439	Prince	NO CUSTOMER	15/15/1W - 457 W. PINE	R1				WELL
0446	Clark	BOB CLARK	11/21/1W - 581 W. GBD	R1				WELL
0447	Wingler	WOOD & JANE MONTGOMER	1/24/1W - 601 W. GBD	R1				WELL
0467	Harry A's Tavern & Package	JAMES KOURKOULIS	6-9/1/1W		C3			WELL
0470	Apalachicola State Bank	APALACHICOLA STATE BANK	19-21/1/1W-200 FRANKLIN		C2			WELL
0476	Villas of St. George	VILLAS OF ST. GEORGE	1-16/10/1W -240 W. GORRIE				MC4	WELL
0480	Rucker	BLUE PARROT OCEANFRON	37-38/10/1W -68 W. GORRIE		C1			WELL
0495	St. George Inn	CELTAE, INC.	16-24/6/1E - 135 FRANKLIN		C4			WELL
0498	McGhin	HARRY MCGHIN	20/16/1E - 416 E. PINE	R1				WELL
0508	Powers	PEGGY HAMM	6/36/4 - 640 E. PINE	R1				WELL
0512	Kienzle	NO CUSTOMER	10/37/4 - 725 E. PINE	R1				WELL
0517	Cobb	VICTOR COBB	5/44/4 - 901 E. PINE	R1				WELL
0522	Floyd	GEORGE FLOYD	11/48/4 - 957 E. PINE	R1				WELL
0531	Woolever	PAMELA WARD	14/46/4 - 1065 BRINKLEY	R1Q				WELL
0537	Guess	JOHN S. MATTHEWS	2/12/1W - 309 W. GORRIE	R1				WELL

WATER MANAGEMENT SERVICES, INC.
WELLS

Cust #	Original Customer	Current Customer	Service Address	R	C	P	M	Well
0539	Proskine	NO CUSTOMER	4/11/1W - 324 W. GORRIE	R1				WELL
0550	Glaze	HAL GLAZE	3/19/1W - 516 W. GORRIE	R1				WELL
0552	Kilpatrick	MORRIS H. MILLER	6/19/1W - 540 W. GORRIE	R1				WELL
0558	Gleber	JUAN MOLINA	10/20/1W - 573 W. GORRIE	R1				WELL
0559	Baird	ROBERT SAYLE	2/25/1W - 609 W. GORRIE	R1				WELL
0564	May	DON MAY	7/26/1W - 648 W. GORRIE	R1				WELL
0566	Gulf Coast	SHIRLEY W. PACE & LUCILLE	1/A/3 - 700 W. GORRIE DR.	R1				WELL
0567	Bell	W.D. BELL	2/A/3 - 708 W. GORRIE	R1				WELL
0576	Thomas	ELLIS C. SMITH	13/F/3 - 773 W. GORRIE	R1				WELL
0579	Walt	NO CUSTOMER	16/G/3 - 849 W. GORRIE	R1				WELL
0585	Clark	WALTER ARMISTEAD	1/C/3 - 900 W. GORRIE	R1				WELL
0590	Edwards	NANCY EDWARDS	22/I/3 - 1001 W. GORRIE	R1				WELL
0592	Gallant	D & B PARKES-MUSTARD SE	21/I/3 - 1009 W. GORRIE	R1				WELL
0599	Aldridge	JOEL BURKE	10/D/3 - 1072 W. GORRIE	R1				WELL
0600	Rash	STEVEN RASH	12/I/3- 1081 W. GORRIE	R1				WELL
0601	Simmons	LEE SIMMONS	1/E/3 - 1100 W. GORRIE				M1	WELL
0605	Tornillo	WHITNEY KNOLL	3/E/3 - 1116 W. GORRIE	R1				WELL
0607	Jeppson	SUSAN A. MARTIN	6/E/3 - 1140 W. GORRIE	R1				WELL
0621	Dolloff	JO-ANNA DOLLOFF	10/N/3 - 1073 W. GBD	R1				WELL
0624	Morrison	WILLIAM & KATHRYN SNYDE	7/N/3 - 1049 W. GBD	R1				WELL
0629	Bouy	LOIS BOUY	9/M/3 - 965 W. GBD	R1				WELL
0632	Martin	JERRY MARTIN	6/H/3 - 940 W. GBD	R1				WELL
0636	McComb	FLORINE MCCOMB	3/H/3 - 916 W. GBD	R1				WELL
0637	Davis	JOHNNY & CINDY MOORE	3/M/3 - 917 W. GBD	R1				WELL
0638	Marks	PATRICIA WIDENER	1/M/3 - 901 W. GBD	R1				WELL
0644	Chase	LARRY EPPERSON	1/G/3 - 800 W. GBD	R1				WELL
0647	Ficklen	JOHN FICKLEN	22/G/3 - 801 W. GORRIE	R1				WELL
0656	Johnson	LETITIA RICKER	2/21/1W - 509 W. GBD	R1				WELL
0658	Hjorth/Bennett	JANE ELLEN BLEDSOE	1/20/1W - 501 W. GORRIE	R1				WELL
0659	Arnold	HARRY ARNOLD	9/16/1W - 465 W. GBD	R1				WELL
0665	Ponder	ISAAC LANG	3/K/3 - 717 W. GBD	R1				WELL
0678	Underwood	GRADY UNDERWOOD	9/21/1E - 565 E. GBD	R1				WELL
0680	Fish	DONALD J. MASON	2/K/2 - 609 E. GBD	R1				WELL
0681	Cash	MARY BOSKER	3/F/2 - 616 E. GBD	R1				WELL
0687	Leavins	STEVE ATKINS	10/K/2 - 673 E. GBD	R1				WELL
0691	Guernsey	JAMES LEE GUERNSEY	9/L/2 - 765 E. GBD	R1				WELL
0700	Quick	SUSAN B. MCCLENDON	4/N/2 - 925 E. GBD	R1				WELL
0702	Cates	MATTHEW SAMALIS	6/N/2 - 941 E. GBD	R1Q				WELL
0703	Novak	CAROLYN McCALEB	11/N/2 - 981 E. GBD	R1				WELL
0704	Brannon	LYNN JOHNSON	1/O/2 - 1001 E. GBD	R1				WELL
0706	Shuler	GLENDA EDWARDS	1/J/2- 1000 E. GBD				M1	WELL
0707	Garvue	LINDA C. SCHMIDT	2/J/2 - 1008 E. GBD	R1				WELL
0708	Gardner	ROBERT GARDNER	2/O/2 - 1009 E. GBD	R1				WELL
0713	Mims	NO CUSTOMER	6/15/1W - 440 W. BAYSHORE	R1				WELL
0716	Mathews	R. J. MATHEWS, JR.	1/TRACT 1 - 1100 E. GBD	R1				WELL
0717	Burton	KERRY O'NEIL	2/TRACT 1 - 1116 E. GBD	R1				WELL
0723	Hinson	ALEXANDER HINSON	21/J/2 - 1009 E. GORRIE	R1				WELL
0725	Hallman	CLEM HALLMAN	1/E/2 - 1000 E. GORRIE	R1				WELL
0729	Johnson	RICK JOHNSON	14/I/2 - 965 E. GORRIE	R1				WELL
0731	Phillips	GLENNA N. SMITH	6/D/2 - 940 E. GORRIE DR.	R1				WELL
0735	Dubay	JERRY THOMPSON	13/H/2 - 873 E. GORRIE	R1				WELL
0746	Helms	SID GRAY	22/H/2 - 801 E. GORRIE				M2	WELL
0752	DeBruyne	LINDA K. DEBRUYNE	16/G/2 - 749 E. GORRIE	R1				WELL
0758	Register	PATSY MCDANIEL	2/B/2 - 708 E. GORRIE				M1	WELL
0770	Anderson	LINDA TAYLOR	19/F/2 - 625 E. GORRIE				M2	WELL
0775	Lines	BLUCHER B. LINES	6/19/1E - 540 E. GORRIE	R1				WELL
0787	Ruhl	DAN RUHL	5/18/1E - 432 E. GORRIE	R1				WELL
0788	Harrell	WILLIAM L. MOODY	1/18/1E - 400 E. GORRIE	R1				WELL
0789	Kirvin	GEORGE FLOYD	5/11/1E - 332 E. GORRIE	R1				WELL
0808	Ripley	KLAUS LANGENBACH	1 DUNES OF ST. GEORGE	R1				WELL
0811	Folger	FOLGER PARTNERS, LP.	5/TRACT 10 - 1336 E. GBD	R1				WELL
0812	Brown	GARY NIBLACK	3/TRACT 42 - 1335 E. GBD	R1Q				WELL
0835	Hodge	ROYCE HODGE	4/GULF PEARL ESTATE	R1				WELL
0842	Crowder	JIMMIE CROWDER	TRACT 19 - 1540 E. GBD	R1				WELL
0843	Maxwell	PEGGY MAHDAVI	1/TRACT 21 - 1600 E. GBD	R1Q				WELL
0848	Ball	ANTHONY W. SALVO	1/TRACT 24 - 1660 E. GBD	R1				WELL
0849	McPherson	MARTHA M. GHERARDI	4 SHELL HARBOUR	R1				WELL
0851	Jeppson	ROBERT & MARY JEAN HEID	1/TRACT 25 - 1716 E. GBD	R1				WELL
0852	Cobb	JAMES H. COBB	8 SHELL HARBOUR	R1				WELL
0854	Hanson	LA VONNE C. TAYLOR	5/TRACT 27 - 1744 E. GBD	R1				WELL
0857	Burke	JANE M. BURKE	17 SHELL HARBOUR	R1				WELL
0978	Herndon	DALE HERNDON	2/22/1E - 508 E. BAYSHORE	R1				WELL
0989	Johnson	MARY BOSKER	4/TRACT 23 - 1648 E. GBD	R1				WELL
0990	Frederick	GEORGE STRENK	1/17/1E - 401 E. GORRIE	R1				WELL
1009	Wilson	WILLIAM H.&DOROTHY WILS	1/11/1E - 300 E. GORRIE	R1				WELL

WATER MANAGEMENT SERVICES, INC.
WELLS

Cust #	Original Customer	Current Customer	Service Address	R	C	P	M	Well
1039	Carter	INDIA CARTER	22/H/3 - 901 W. GORRIE DR	R1				WELL
1040	Donahue	NO CUSTOMER	7/C/2 - 848 E. GORRIE	R1				WELL
1044	Griffen	MATT GILBERT	27 SHELL HARBOUR	R1				WELL
1087	Pace Enterprises (AJ)	WHALEY HUGHES	2/TRACT 18 - 1532 E. GBD	R1				WELL
1093	Frederick	GEORGE D. PLYMEL	6/20/1W - 541 W. GORRIE	R1				WELL
1101	Kenneth Tidwell	ROBERT J. SAYLE	3/TRACT 15 - 1452 E. GBD	R1				WELL
1159	Fish	STEVE STONE	3/20/1E - 517 E. GORRIE	R2				WELL
1162	Lardent	BEVERLY WYCHE	2/TRACT 33 - 1105 E. GBD	R1				WELL
1171	Gulf Coast Realty	GULF COAST REALTY	14-16/8/1E		C1			WELL
1188	Daffin	J. MICHAEL FERRARA	5/G/2 - 732 E. GBD	R1				WELL
1235	Gordon	CALVIN & CINDY THOMPSON	6 SUNSET BEACH	R1				WELL
1273	Newberry	MARTHA T. NEWBERRY	5/TRACT 3 - 1152 E. GBD	R1				WELL
1287	Morris Palmer	MARK N. HARBARGER	3/71/5 - 304 MARKS ST.	R1				WELL
1289	Gold Key Contr & Designs	RALPH MCKINLEY	2/O/3 - 1109 W. GULF BCH	R1				WELL
1294	Patrick H. Campbell	LESLIE A. FENNELL	10/G/2 - 772 E. GBD	R1				WELL
1309	Milton B. Ward	KATHERINE EMRICH	5/H/3 - 932 W. GBD	R1				WELL
1328	Charles Matthews	CHARLES MATTHEWS	2/58/5 - 343 HOWELL ST.	R1				WELL
1334	Richard C. Hodgkins	GAINOR E. GUNTER	7/TRACT 50 - 1529 E. GBD	R1				WELL
1336	Stephen Noel	SALLY HAYNIE	2/11/1E - 308 E. GORRIE	R1				WELL
1337	T. H. Knight	CAROLE M. GRATES	6/TRACT 37 - 1207 E. GBD	R1				WELL
1351	Karen Rabinowitz	KAREN BROWN	2/TRACT 37 - 1205 E. GBD	R1				WELL
1369	Mason Beach	MASON J. BEAN	10/20/1E - 573 E. GORRIE	R1				WELL
1386	Dennis J. Weaver	STEVE NOEL	5/12/1W - 333 W. GORRIE	R1				WELL
1388	Myers O. Hand	NO CUSTOMER	1/D/3 - 1000 W. GORRIE	R1				WELL
1392	Jack Thomas	NEWT COLSTON	5/77/5 - 332 COOK ST.	R1				WELL
1419	First NatBank-Abilene-Trustee	ROBERT C. BOGUSKY	11 CARA BAY - 1183 E. GBD	R1				WELL
1420	First NatBank-Abilene-Trustee	CARA BAY HOMEOWNER'S A	CARA BAY ENTRANCE		C1			WELL
1428	Robert Faliski	KATHY & DONNIE JONES	7/21/1E - 549 E. GBD	R1Q				WELL
1445	Smith	ROBERT H. PETERS	4/TRACT 37 - 1203 E. GBD	R1				WELL
1450	Rittenour	ART SIVILLA	16/74/5 - 825 W. PINE AVE	R1				WELL
1473	James D. Beasley	JAMES D. BEASLEY	10/B/3 - 872 W. GORRIE	R1				WELL
1475	Benoit	NO CUSTOMER	10/43/4 - 872 E. PINE AVE	R1				WELL
1490	GA/FL Burglar Alarm Co.	GA/FL BURGLAR ALARM CO.	3/26/1W - 616 W. GORRIE	R1				WELL
1503	James Blissett	JOHN T. FRUIN	15/46/4 - 1073 BRINKLEY	R1				WELL
1509	O'Neal	LYNN JOHNSON	1/20/1E - 501 E. GORRIE	R1				WELL
1510	Buchaneer Inn III	BUC INN # 3	30-33/10/1W-LG SIDE		CC2			WELL
1511	Florine S. Weldon	FLORINE S. WELDON	7/17/1W - 449 W. GORRIE	R1				WELL
1523	Halfed, Inc.	NEPTUNES PALACE HOMEO	11/20/1W - 581 W. GORRIE				M3	WELL
1545	Lannette Griffin	EVA D. MCCAULEY	11/22/1E - 220 E. 6TH ST.	R1				WELL
1550	C, Heath Galloway	STEVEN REIDER	4/K/3 - 725 W. GBD	R1Q				WELL
1554	Tom Lewis	KERRY O'NEIL	10/18/1E - 472 E. GORRIE	R1				WELL
1555	Carla L. Stich	CARLA L. STICH	9/18/1W - 464 W. GORRIE	R1				WELL
1557	Charles G. Brown	RYAN E. SCHLITT	1/TRACT 22 - 1620 E. GBD	R1				WELL
1566	Sue Cox (Mahr)	HAROLD & PATTY HARRISON	12 MARINER'S HARBOR		C1			WELL
1567	Fred P. Ackerman	FREDERICK P. ACKERMANN	8/19/1E - 556 W. GORRIE	R1				WELL
1586	Carl Hofffman	MICHAEL LAKE	8/73/5 - 800 AKEL ST.	R1				WELL
1595	Thomas & Mary Baird	S.G.I. UNITED METHODIST CI	11/77/5 - 1023 PORTER ST.	R1				WELL
1603	Jimmy W. Meeks	GULF STATE COMMUNITY BA	30/85/5 - 408 N. SAWYER	R1Q				WELL
1611	Gerald Greene	GERALD GREENE	7/I/3 - 1048 W. GBD	R1				WELL
1613	Frank Pilcher	WALTHALL OIL COMPANY	4/54/5 - 435 MCCLOUD ST.	R1				WELL
1620	Phillip B. Russell	LISA LEVISON	13/H/3 - 973 W. GORRIE	R1				WELL
1623	Franklin County	FRANKLIN COUNTY BD OF C	COUNTY PARK-UNIT 1			P2		WELL
1628	John T. Sewell, Jr.	CHRIS & KAREN EIGENBERG	7/K/2 - 649 E. GBD	R1				WELL
1631	Archie B. Holton	ROGER R. WHITFIELD	4/73/5 - 325 MARKS ST.	R1				WELL
1632	Brian Krontz	BRIAN KRONTZ	11/K/3 - 781 W. GBD				M1	WELL
1637	Margaret J. Estes	MARGARET J. ESTES	8-9/36/4 - 664 E. PINE	R1				WELL
1638	Joe & Kelly Rysavy	JOE & KELLY RYSAVY	6 SAVANNAH COVE	R1				WELL
1641	Dragon DW, LLC	BETTY ANN SKELTON	12/G/3 - 881 W. GORRIE	R1				WELL
1645	W.A. Thomas, III	KAY & ROBIN OLIN	18/I/3 - 1033 W. GORRIE	R1				WELL
1647	Howell L. Ferguson	HOWELL L. FERGUSON	5/19/1W - 532 W. GORRIE	R1				WELL
1648	Claus Laugenbach	CLAUS & UTE LAUGENBACH	1/TRACT 20 - 1576 E. GBD	R1				WELL
1649	James W. Lewis	JAMES W. LEWIS	10/J/3 - 1172 W. GBD	R1				WELL
1664	Nancy A. Morris	NANCY MORRIS	3/12/1E - 317 E. GORRIE	R1				WELL
1681	Frank Erckmann	FRANCIS DRAMIS	3/TRACT 2 - 1124 E. GBD	R1				WELL
1683	Randy Carey	JOHN J. FENSTERMAKER	4/H/3 - 924 W. GBD	R1				WELL
1688	Goldkey Construction	WILLIAM W. KIDD	4 CLIPPER BAY ESTATES	R1				WELL
1695	Carl Hoffman	ELDEN BUTZBAUGH	21/89/5 - 501 W. SAWYER	R1				WELL
1705	Joe Bacher	JOE BACHER	20/F/2 - 617 E. GORRIE	R1				WELL
1713	Sara Mims	TRACY MCCLAIN	3/90/5 - 1164 W. PINE	R1Q				WELL
1716	Ulrich Construction	DAVID M. CRENSHAW	5/L/2 - 733 E. GBD	R1				WELL
1718	Jeff Galloway	PAT AUCOIN	3/TRACT 26 - 1736 E. GBD	R2				WELL
1719	J. Long/G. Fogelman	JACOBS FAMILY LTD PARTN	9/K/2 - 665 E. GULF BCH	R2				WELL
1723	Richard Baker	RICHARD BAKER	9/TRACT 14 - 1432 E. GBD	R1				WELL
1729	Nautilus Properties	GARY P. HANSEN	8/N/3 - 1057 W. GULF BCH	R1				WELL
1742	Gary R. Oliver	GARY R. OLIVER	21/15/1W - 409 W. PINE	R1				WELL

WATER MANAGEMENT SERVICES, INC.
WELLS

Cust #		Original Customer	Current Customer	Service Address	R	C	P	M	Well
1745		William Bassett	WILLIAM S. BASSETT	5/81/5 - 401 E. SAWYER	R1				WELL
1746		Kristin Shelby	KRISTEN SHELBY	7/D/2 - 948 E. GORRIE	R1				WELL
1752		Charlie Brown	DOTY CONSTANTINIDES	14 CLIPPER BAY ESTATES	R1				WELL
1756		Lee & Laurie Rivers	LEE & LAURIE RIVERS	1/N/3 - 1001 W. GBD	R1				WELL
1757		Blackjack Enterprises	R & E ALLEN PROPERTIES IN	10/66/5 - 700 RANDOLPH ST	R1				WELL
1783		Donald W. Wilson	GREG KIRK	16/I/2 - 949 E. GORRIE DR	R1				WELL
1784		Robert McClendon	ROBERT MCLENDON	2/TRACT 2 - 1136 E. GBD	R1				WELL
1794		Tony Fendrick	KATHY MILLEN	1/19/1W - 500 W. GORRIE	R1				WELL
1799		Deborah Stamiatinos	LOWELL BALL	19/J/3 - 1125 W. GORRIE	R1				WELL
1800		Robert Davis	ROBERT DAVIS	11/I/3 - 1080 W. GBD	R1				WELL
1811		Kerry O'Neil	KERRY O'NEIL	21/I/2 - 909 E. GORRIE				M2	WELL
1823		Anthony K. Smith	ANTHONY K. SMITH	10/74/5 - 816 W. BAYSHORE	R1				WELL
1830		Patricia Herold	PATRICIA HEROLD	19/I/3 - 1025 W. GORRIE				M1	WELL
1833		Glen Smith	JUAN MOLINA	6/39/4 - 740 E PINE AVE	R1				WELL
1837		Whitney Knoll	RONALD HOWELL	4/D/2 - 924 E. GORRIE DR.	R1				WELL
1838		Elliott Fann Construction	KAREN MARTINOFF	4/TRACT 13-14-1404 E. GBD	R1Q				WELL
1844		Above Par, Inc.	LUCY E. HEAGY	29/85/5 - 343 BROWN ST.	R1				WELL
1849		Cothran Construction	JEFF GALLOWAY	3/A/2 - 616 E. GORRIE	R1				WELL
1850		Cothran Construction	CARL SIMS	10/TRACT 7 - 1248 E. GBD	R1Q				WELL
1859		Rob Olin	SGI GROUP, LLC	13/I/3 - 1073 W. GORRIE	R1				WELL
1883		Jim High	JAMES HIGH	8 SANDS OF ST. GEORGE	R1				WELL
1906		Ron Bloodworth	RON BLOODWORTH	21/J/3 - 1109 W. GORRIE	R1				WELL
1920		Pat Leach	PAT LEACH	21/F/2 - 609 E. GORRIE	R1				WELL
1921		Victor A. Yarborough	VICTOR A. YARBOROUGH	6/I/2 - 940 E. GBD	R1				WELL
1922		Martha Brooks	MARTHA MADDOX	19/F/3 - 725 W. GORRIE DR	R1				WELL
1930		Margaret Smith	MARGARET SMITH	4/D/3- 1024 W. GORRIE DR.	R1				WELL
1931		William E. Powers, Jr.	WILLIAM E. POWERS, JR.	8/J/3 - 1156 E. GBD	R1				WELL
1936		Lucy B. Traywick	LUCY B. TRAWICK	4/18/1E - 424 E. GORRIE	R1				WELL
1939		HCN Family Trust	HCN FAMILY TRUST	6/C/3 - 940 W. GORRIE	R1				WELL
1948		Nell Spratt	NELL SPRATT	3/22/1W - 516 W. BAYSHORE	R1				WELL
1953		Mike Moberly	MIKE MOBERLY	10/56/5 - 525 W. BAYSHORE	R1				WELL
1957		Bob Tolentino	NO CUSTOMER	11/J/3 - 1180 W. GBD	R1				WELL
1959		Betty F. Russell	BETTY F. RUSSELL	3/77/5 - 348 COOK ST.	R1				WELL
1000476			VILLAS OF ST. GEORGE	7-8/10/1W - SMALL SIDE				MX4	WELL
1001510			BUC INN # 3	30-33/10/1W-SM SIDE		CX2			WELL

Thursday, December 24, 2009 Apalachicola Times Local

Rules eased for shallow wells along the coast

By David Adlerstein
Times City Editor

The Northwest Florida Water Management District has eased up on rules governing shallow wells in an effort to encourage their use by residents of coastal Gulf and Franklin counties.

The rule change, approved Nov. 30 by the Northwest Florida Water Management Governing Board, means residents in the coastal areas, mainly St. George Island and Cape San Blas, will no longer have to secure an individual water use permit to put in a shallow well for non-potable uses, such as irrigation.

Well construction permits will still be required.

Officials backed the rule change to help preserve Floridan Aquifer water for human consumption.

"The rule revision is expected to enhance resource protection," said Guy Gowens, director of the district's Division of Resource Regulation. "Our objectives are to comply with Florida statutes and statewide minimum standards while reducing unnecessary regulation."

Angela Chelette, chief of the Bureau of Ground Water Regulation, said the rule change expands to the coastal zone an exemption already in place for the two other inland zones.

Beginning Jan. 4, 2010, shallow wells less than 4 inches in diameter, and withdrawing on average less than 15,000 gallons per day, will be authorized by rule under a general water use permit.

Chelette said the purpose of the rule change is to encourage the use of these shallow wells, which do not penetrate a confining unit or enter the Floridan aquifer, so as to preserve the aquifer for potable purposes.

"In Franklin County, on St. George Island, most are 30 to 40 feet deep and some are only 15 to 20 feet deep," she said.

"Most non-potable systems use wells 2-4 inches in diameter, so this will largely be for small irrigation wells," Chelette said. "Both coastal areas have a utility supply for drinking water, so this is to encourage people to reduce stress on the drinking water supply. The water supply is fairly vulnerable to saltwater intrusion, and we need to reduce stress there and preserve more for drinking."

She said the rule change will eliminate the hassle of water use permitting, which used to take 30 to 90 days, and even longer for a utility permit. "This means they don't have to come and go through that big process," Chelette said.

The district has 29 individual water use permits in place for the coastal zone the two counties, 17 in Franklin and nine in Gulf, she said.

The rule change eliminates some of the problems that surfaced during recent inspections by the Florida Department of Health which found irrigation wells were dug too close to septic tanks.

Those homeowners who had failed to secure individual water use permits will now be in compliance with that legal requirement.

But those who had failed to secure the required well construction permit will remain in violation of the law, in addition to those who in the future fail to get a well permit.

"On the well construction side, I think we're going to see problems there. I have a feeling we're going to continue to have to work through that issue for a while," Chelette said. "We have witnessed some instances where I don't think they're aware of what their hose bibs are connected with. Ten feet from a septic tank drainfield, that's obviously not a good thing."

Taking part in the cour... opening