

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
HYDROLOGIC DATA SERVICES
STATION DESCRIPTION
OR1100 Lake Hiawasee (SF)

Updated on: 01/20/2009

Description prepared by: R Breed

Station established on: 01/2009

Description of station: 4" PVC ground water monitoring well

Hydron number: 15282840

History of Equipment: Installed CR1000 logger powered by a 20-watt solar panel and 2 gell cell batteries. A 105S Encoder with tape, weight, and float is used to measure hourly WL readings. Site reports in via Raven airlink cellular telemetry.

Manual WL Requirement:

Electric Tape:

Steel Tape & Chalk:

Ground water:

Aquifer code: SF

M.P. elevation: 500.00 Assumed

M.P. location: Top of 4" PVC Casing

Depth of well: 20'

Depth of casing: 20'

WELL COMPLETION REPORT (Please complete in black ink or type.)Well # DR 1100 CAPI # _____ DID # _____

If permit is for multiple wells indicate the number of wells drilled _____

Indicate remaining wells to be cancelled _____

WATER WELL CONTRACTOR'S (All wells drilled need an individual completion report)

Signature Robert A. King License # 2879

I certify that the information provided in this report is accurate and true.

Grout	No. of Bags	From (Ft.)	To (Ft.)
Neat Cement:	3	0.0	6.0'
Bentonite:	1	6.0	8.0'

WELL LOCATION: Site Address EDGEWOOD RANCH (County) ORANGE Co.1/4 of _____ 1/4 of Section 35 Twp: 22s Rge: 28eLatitude 283127 Longitude 812857

DATE STAMP

Sketch of well location on property



Official Use Only

CHEMICAL ANALYSIS WHEN REQUIRED

Iron: _____ ppm Sulfate: _____ ppm

Chloride: _____ ppm

[] Lab Test [] Field Test Kit

Pump Type

[] Centrifugal [] Jet [] Submersible [] Turbine

Horsepower _____ Capacity _____ G.P.M. _____

Pump Depth _____ Ft. Intake Depth _____ Ft.

OWNER'S NAME SJR WMDCOMPLETION DATE 7-17-08 Florida Unique I.D. _____WELL USE: DEP/Public _____ Irrigation _____ Domestic _____ Monitor ☒

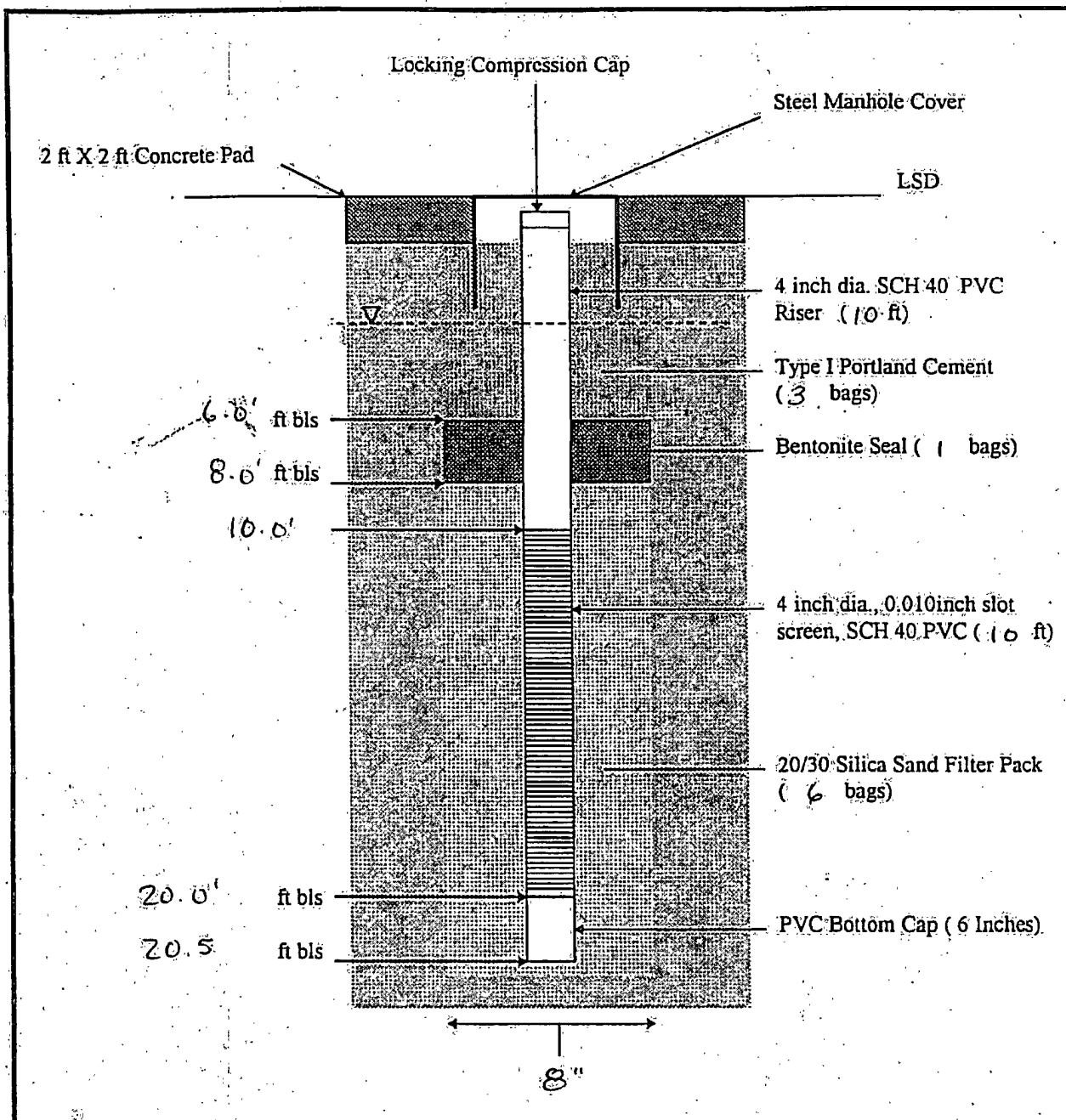
HRS Limited _____ 62-524 _____ Other _____

DRILL METHOD ☒ Rotary [] Cable Tool [] Combination

[] Jet [] Auger Other _____

Measured Static Water Level _____		Measured Pumping Water Level _____	
After _____ Hours at _____ G.P.M. Measuring Pt. (Describe): _____			
Which is _____ Ft. [] Above [] Below Land Surface			
Casing: [] Black Steel [] Galv. [] PVC Other _____			
[] Open Hole	Depth (Ft.)		DRILL CUTTINGS LOG Examine cuttings every 20 ft. or at formation changes. Note cavities, depth to producing zones. Color Grain Size Type of Material
[X] Screen	From	To	
Casing Diameter & Depth (Ft.)	From	To	
Diameter 4"	0.0		GREY, SILTY FINE
From 0.0			SAND.
To 10.0		20.0	
SCREEN			
Diameter 4"			
From 10.0			
To 20.0			
Liner [] or Casing []			
Diameter _____			
From _____			
To _____			

Driller's Name:
(print or type)EDDIE PALMER



Project: LAKE HIAWASSEE

Project No: 3111

Well Completed: 7-17-08

SJRWMD

Well Number:

OR 1100

Not To Scale