

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
HYDROLOGIC DATA SERVICES
STATION DESCRIPTION
OR1101 Lake Hiawasee (IM)

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: 15282842

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: IM

M.P. elevation: 500.00 Assumed

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

Depth of well: 65'

Depth of casing: 65'

J. D.

ft X ft Concrete Pad
with SJRWMD Survey Marker

Static GWL: _____ ft bls

Grout Type: PORTLAND CEMENT
Quantity: 16

Grout Type: CEMENT
Quantity: 16

Seal Type: BENTONITE
Quantity: 1 BAG

Filter Pack Type: 20/30 Silica
Quantity: 4

PVC Bottom Cap (6 inches)

LSD (est. @ ~ _____ ft NGVD)

Casing Type: PVC
Diameter: 8"
Depth: 50' ft

Casing Type: PVC
Diameter: 4"
Depth: 60' ft

Tag Holeplug @ 56.0' ft bls
Tag Sand @ 58.0' ft bls

Screen Type: SLOTTED
Slot Size: .010
Interval: 60.0 - 65.0'

Total Depth @ 65' ft bls

8 inch dia. bore

Not to Scale

Site: LAKE HIAWASSEE Driller: EDDIE PALMER Method: MUD ROTARY Date Completed: 7-17-08	SJRWMD Well ID: OR 1101
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WELL COMPLETION REPORT (Please complete in black ink or type.)
 PERMIT # 021101 SUP # _____ DID # _____
 WELL # _____

 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 [Signature] License # 2879

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

Grout	No. of Bags	From (Fl.)	To (Fl.)
Neat Cement:	<u>32</u>	<u>0.0</u>	<u>56.0'</u>
Bentonite:	<u>1</u>	<u>56.0</u>	<u>58.0'</u>

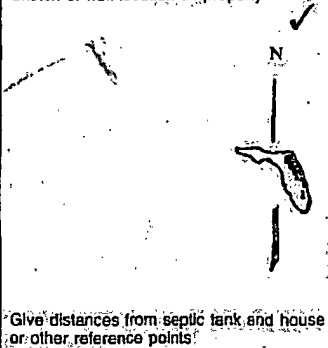
 WELL LOCATION: Site Address EDGEWOOD RANCH (County) ORANGE Co.

 _____ 1/4 of _____ 1/4 of Section 35 Twp. 22s Rge. 28e

 latitude 28°12'N Longitude 81°28'W

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 _____ FL Intake Depth _____ FL

OWNER'S NAME: STEWARTCOMPLETION 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 _____ A.P.M. Measuring Pt. (Describe): _____			
Which is _____ Ft. ☐ Above ☐ Below Land Surface			
Casing: ☐ Black Steel ☐ Galv. ☒ PVC Other _____			
☐ Open Hole	Depth (FL)	DRILL CUTTINGS LOG Examine:	
☒ Screen	From To	cuttings every 20 ft. or at formation changes:	
Casing Diameter & Depth (FL)	From To	Note cavities, depth to producing zones:	
Diameter <u>4"</u>	<u>0.0</u>	Color Grain Size Type of Material	
From <u>0.0</u>		<u>GREY, SILTY FINE</u>	
To <u>60.0'</u>	<u>65.0'</u>	<u>SAND</u>	
Screen			
Diameter <u>4"</u>			
From <u>60.0'</u>			
To <u>65.0'</u>			
Liner ☐ or Casing ☐			
Diameter _____			
From _____			
To _____			

Driller's Name:

(print or type)

EDDIE PALMER