

SOUTH FLORIDA WATER MANAGEMENT DISTRICT

TABLE A Description of Wells

Well Name or Number	Well 1	Well 2	Well 3	Well 4	Well 5	Well 6
Map Designation						
Existing or Proposed	E	E	E	E	E	E
Date of Proposed Construction						
Date Installed if Existing						
Diameter (in)						
Total Depth (ft)						
Cased Depth (ft)						
Screened Interval (ft)						
Pumped or Flowing	P	P	P	P	P	P
Pump Type (see Instructions)						
Pump Intake Depth (ft bls)						
Pump or Flow Capacity (GPM)						
Working Valve if Artesian (yes, no or not applicable)						
Status (see Instructions)						
Purpose (see Instructions)						
Elevation of the Wellhead (ft NGVD - see Instructions)						
Water Use Accounting Method (see Instructions)						
Date Last Calibrated (ATTACH calibration report)						
Planar Coordinates (if known - see instructions)						
Section / Township / Range	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28

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TABLE A Description of Wells

Well Name or Number	Well 7	Well 8	Well 9	Well 10	Well 11	
Map Designation						
Existing or Proposed	P	P	P	P	P	
Date of Proposed Construction						
Date Installed if Existing						
Diameter (in)						
Total Depth (ft)						
Cased Depth (ft)						
Screened Interval (ft)						
Pumped or Flowing	P	P	P	P	P	
Pump Type (see Instructions)						
Pump Intake Depth (ft bls)						
Pump or Flow Capacity (GPM)						
Working Valve if Artesian (yes, no or not applicable)						
Status (see Instructions)						
Purpose (see Instructions)						
Elevation of the Wellhead (ft NGVD - see Instructions)						
Water Use Accounting Method (see Instructions)						
Date Last Calibrated (ATTACH calibration report)						
Planar Coordinates (if known - see instructions)						
Section / Township / Range	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28	S29 32 /T25 /R28	

Instructions for Completing TABLE A, Description of Wells

Please provide the following information about the well, if known or if applicable:

Well Name or Number: *This is your designation of the well; if we contact you about the well, this is how you would refer to it.*

Map Designation: *This is how you have labeled the well on the map you submitted. This may be the same as Well Name or Number, but does not necessarily have to be.*

Existing or Proposed: *If the well is proposed enter the date of expected operation. If it is an existing well, enter the date it was installed if you know it.*

Diameter: *Outside diameter of the well casing.*

Total Depth: *Total length in feet between the land surface and the bottom of the well.*

Cased Depth: *The length in feet from land surface to the bottom of the well casing.*

Screened Interval: *The distance in feet below land surface to the top and bottom of the well screen if the well is so equipped.*

Pumped or Flowing: *Does the well produce water as a result of natural artesian flow, or is it pumped?*

Pump Type: *This is the type of pump that has been installed for your well. Typical choices are:*

centrifugal	diesel turbine	axial flow	windmill
submersible	jet	suction	other (specify)
electric turbine	hydraulic	portable	

Pump Intake Depth: *Location of the pump depth in feet below land surface. The pump may be on the surface or down inside the well.*

Pump or Flow Capacity: *The amount of water the pump can produce in gallons per minute (GPM).*

Working Valve: *If the well is artesian; does it have a working valve to control the flow?*

Status: *Typical choices are:*

- Primary
- Secondary (Ex: a production well that is rotated)
- Standby (Ex: used for freeze protection or emergency)
- Monitor
- Injection (Ex: Air Conditioning, pool heat exchange, etc.; sometimes used only periodically)
- Recharge (Ex: same as above)

Purpose: *This is what the water will be used for. Typical choices are:*

Dairy	Irrigation	Air Conditioning	Swimming Pool Heating
Monitor	Aquaculture	Freeze Protection	Irrigation/Lake Recharge
Livestock	Bottled Water	Mining/Dewatering	Aquifer Storage and Recovery
Industrial	Other (specify)	Public Water Supply	Aquifer Remediation and Recovery

Elevation of the Wellhead: *This is the elevation of the top of the finished well at the ground surface.*

Flow Measurement Method: *Section 4.1, Basis of Review for Water Use Permit Applications, requires all permittees with a **maximum monthly use of greater than 3 million gallons** to equip each existing water withdrawal facility with an authorized operating water use accounting system and a report of its calibration to be sent to the District. Describe how you measure the amount of water produced by the well.*

Date Last Calibrated: *When was the flow measurement method last calibrated? ATTACH the calibration report.*

Planar coordinates: *The Florida State Plane System (Planar Coordinates), should be submitted if you have a land survey which identifies the location of the well in terms of those measurements. If you do not know what these are, it is not necessary to include them.*

Section / Township / Range: *The section, township and range in which the well is located.*