



December 9, 2014  
120043-1401

Environmental Administrator  
Hazardous Waste Regulation Section M.S. 4560  
**Department of Environmental Protection**  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Attention: Mr. Merlin D. Russell, Jr.  
Professional Geologist III  
Hazardous Waste Regulation

**Re: Safety-Kleen Systems, Inc., 5309 24<sup>th</sup> Avenue South, Tampa, Florida**  
**EPA ID # FLD 980 847 271; Operating Permit No. 34744-HO-007**  
**Monitoring Well Abandonment Report**

Dear Mr. Russell:

On behalf of Safety-Kleen Systems, Inc. (S-K), Environmental Consulting & Technology, Inc. (ECT) submits this Monitoring Well Abandonment Report for the referenced facility in accordance with Chapter 62-780, Florida Administrative Code (F.A.C.), and per Paragraph 7 of the November 5, 2014, Site Rehabilitation Completion Order (SRCO) issued by the Department for the facility. Figure 1 shows the location of the facility.

### **MONITORING WELL ABANDONMENT**

On November 14, 2014, ECT met with Preferred Drilling Solution, Inc. staff to abandon six monitoring wells and remove the monitoring well protective concrete pads. After arriving onsite, ECT located and opened monitoring wells MW-1 MW-2, MW-3, MW-4, MW-5, and MW-6D to measure depth to water and the total depth of the monitoring wells. Figure 2 is a site map showing the locations of the abandoned monitoring wells relative to the location of the septic tank and drain field (SWMU-21). The monitoring wells were abandoned properly in accordance with the requirements of Subsection 62-532.500(4), F.A.C.

1408 N Westshore  
Blvd, Suite 115  
Tampa, FL  
33607

(813) 289-9338

FAX  
(813) 289-9388

R:\COMMON\SK\TAMPA\WELL ABANDONMENT\WELL ABANDONMENT RPT.DOCX.1

*An Equal Opportunity/Affirmative Action Employer*  
[www.ectinc.com](http://www.ectinc.com)

Mr. Merlin D. Russell, Jr.  
December 9, 2014  
Page 2

A copy of the field notes documenting the monitoring well abandonment is included as Attachment 1. Photographs of the monitoring well abandonment activities are included as Attachment 2. Copies of the State of Florida Well Completion reports are included as Attachment 3.

If you have any questions, please contact Bob Schoepke of Safety-Kleen at (847) 468-6733. Thank you for your assistance on this project.

Sincerely,

**ENVIRONMENTAL CONSULTING & TECHNOLOGY, INC.**



Richard J. Stebnisky, P.G.  
Principal Hydrogeologist

Enclosures:

Figures 1 to 2  
Attachments 1 to 3

cc: Hazardous Waste Supervisor, FDEP Temple Terrace, Florida (hard copy)  
Bob Schoepke, Safety-Kleen (electronic)  
Branch File, c/o Steve Gugino, Safety-Kleen Facility Manager (hard copy)  
Keith Morrison, ECT (electronic)  
Jeff Curtis, Safety-Kleen (electronic)

## FIGURES



FIGURE 1.  
REGIONAL LOCATION MAP  
SAFETY-KLEEN  
HILLSBOROUGH COUNTY, TAMPA, FLORIDA

Sources: ESRI Street Map Data, 2013; ECT, 2014.

**ECT** Environmental  
Consulting &  
Technology, Inc

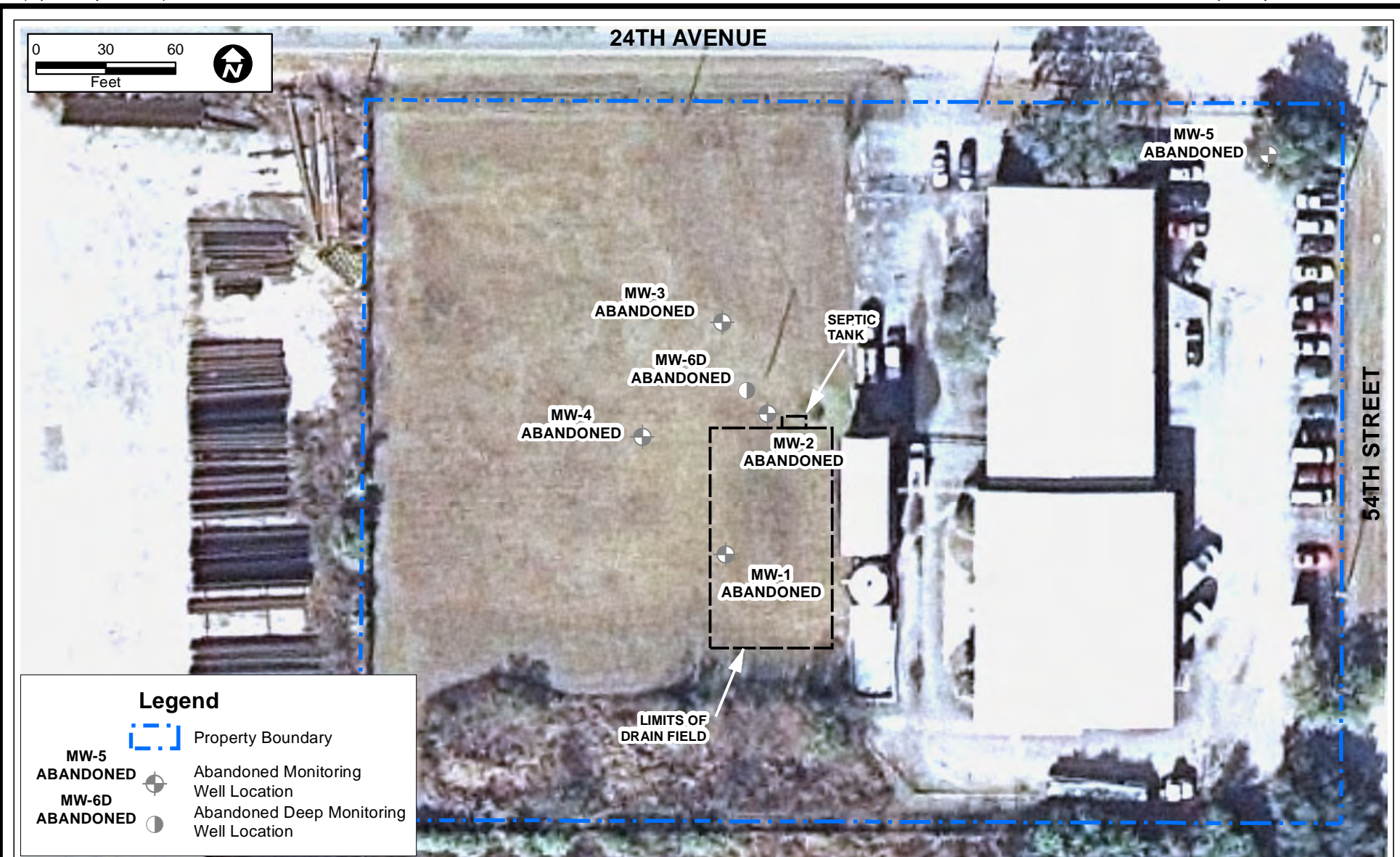


FIGURE 2.  
ABANDONED MONITORING WELL LOCATION MAP  
SAFETY-KLEEN  
TAMPA, FLORIDA

Sources: SWFWMD Aerial Photography 2011; Hillsborough Property Appraiser's Office, 2013; ECT, 2014

## **ATTACHMENT 1**

### **FIELD NOTES**



Well Abandonment  
SK-Tampa

# ECT DAILY FIELD LOG

## PROJECT INFORMATION

Project & Task #: 120043-1401

Date: 11-14-14

## DAY LOG

Time	Comments
730	at ECT office, load T-7, offsite to Safety-Klean Facility - Tampa (SK-TPA) - stuck in traffic.
830	inside SK-TPA, one Preferred personnel onsite. Chel w/ Preferred Drilling Solutions <sup>(PDS)</sup> coming from Orlando also delayed by fatality accident on I-4 coming from Orlando/Lakeland
905	Preferred drillers onsite, going over site specific health & safety plan /
920	meetings - check in w/ office, get badge. / 925 Rains water levels and Total Depths of wells to abandon.
930	Abandoning MW-6D / MW-2 / MW-4 / MW-1 / MW-3 + taking photos for photo documentation. Talking to new SK-TPA manager.
	Breaking up concrete pads in grass on MW-6D, MW-2, MW-3, MW-4 / MW-1
	Backfill removed concrete pads w/ 20/30 sand
1030	Abandoning MW-5 + remove pad.
1040	Preferred drillers offsite ECT-Roim Morrison - Talking with new
1045	SK-TPA facility manager + updating him on project
1050	ECT - offsite / 1115 getting gas
1125	at ECT office, unload T-7, scan in field notes for well abandonment
1140	Report. gave Ben <sup>camera</sup> photos + download. 1
1220	Label pictures. / 1220 complete - 5.0 hrs
	Terrell M. Mark

## PROJECT INFORMATION

Date: 11-14-14

[illegible]

SIGNED INITIALS

Measured by: KATH E. MARSHALL KRM

Date: 11-14-14

Recorded by: Keith F. Morrison Jfu

Date: 11-14-14

Reviewed by:

Date:

## EQUIPMENT DESCRIPTION &amp; DECONTAMINATION

**Description ID or S/N:**

Decontaminate between wells? Y or N (Circle One)

Procedure 4.1.9.1 (Y or N) or other (describe):



**ATTACHMENT 2**  
**PHOTOGRAPHS**



**Monitoring Well MW-1 Abandonment**



**Monitoring Well MW-1 Abandonment Completion (typical)**



**Monitoring Well MW-2 Abandonment**



**Completed Grouting (Abandonment) of Monitoring Well MW-2 (typical)**





**Monitoring Well MW-3 Abandonment**



**Monitoring Well MW-3 Abandonment Completion**



**Monitoring Well MW-4 Abandonment**



**Monitoring Well MW-4 Abandonment Completion**





**Monitoring Well MW-5 Abandonment Completion**



**Monitoring Well MW-6D Abandonment**



**Monitoring Well MW-6D Abandonment Completion**



**ATTACHMENT 3**  
**WELL COMPLETION REPORTS**



# STATE OF FLORIDA WELL COMPLETION REPORT

☒ Southwest  
☐ Northwest  
☐ St. Johns River  
☐ South Florida  
☐ Suwannee River  
☐ DEP  
☐ Delegated Authority (If Applicable) \_\_\_\_\_

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

Date Stamp  
Received:  
Nov 24, 2014 4:33 pm

Official Use Only

1. \*Permit Number 839888 \*CUP/WUP Number \_\_\_\_\_ \*DID Number \_\_\_\_\_ 62-524 Delineation No. \_\_\_\_\_  
2. \*Number of permitted wells constructed, repaired, or abandoned 5 \*Number of permitted wells not constructed, repaired, or abandoned 3  
3. \*Owner's Name Safety Kleen Corporation 4. \*Completion Date 11/14/2014 5. Florida Unique ID \_\_\_\_\_

6. 5309 S 24TH AV TAMPA  
\*Well Location - Address, Road Name or Number, City, ZIP

7. \*County HILLSBOROUGH \*Section 27 Land Grant \_\_\_\_\_ \*Township 29 \*Range 19

8. Latitude 27 55 33.30 Longitude 82 23 40.36

9. Data Obtained From: \_\_\_\_\_ GPS ☒ Map \_\_\_\_\_ Survey \_\_\_\_\_ Datum: \_\_\_\_\_ NAD 27 ☒ NAD 83 \_\_\_\_\_ WGS 84

10. \*Type of Work: \_\_\_\_\_ Construction \_\_\_\_\_ Repair \_\_\_\_\_ Modification ☒ Abandonment

11. \*Specify Intended Use(s) of Well(s):

<input type="checkbox"/> Domestic	<input type="checkbox"/> Landscape Irrigation	<input type="checkbox"/> Agricultural Irrigation	<input type="checkbox"/> Site Investigation
<input type="checkbox"/> Bottled Water Supply	<input type="checkbox"/> Recreation Area Irrigation	<input type="checkbox"/> Livestock	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Public Water Supply (Limited Use/DOH)		<input type="checkbox"/> Nursery Irrigation	<input type="checkbox"/> Test
<input type="checkbox"/> Public Water Supply (Community or Non-Community/DEP)		<input type="checkbox"/> Commercial/Industrial	<input type="checkbox"/> Earth-Coupled Geothermal
		<input type="checkbox"/> Golf Course Irrigation	<input type="checkbox"/> HVAC Supply
			<input type="checkbox"/> HVAC Return

Class I Injection \_\_\_\_\_  
Class V Injection: \_\_\_\_\_ Recharge \_\_\_\_\_ Commercial/Industrial Disposal \_\_\_\_\_ Aquifer Storage and Recovery \_\_\_\_\_ Drainage

Remediation: \_\_\_\_\_ Recovery \_\_\_\_\_ Air Sparge \_\_\_\_\_ Other (Describe) \_\_\_\_\_

☒ Other (Describe) PLUGGED

12. \*Drill Method: \_\_\_\_\_ Auger \_\_\_\_\_ Cable Tool \_\_\_\_\_ Rotary \_\_\_\_\_ Combination (Two or More Methods) \_\_\_\_\_ Jetted \_\_\_\_\_ Sonic \_\_\_\_\_  
\_\_\_\_\_ Horizontal Drilling \_\_\_\_\_ Hydraulic Point (Direct Push) ☒ Other PLUGGED BY APPROVED METHOD

13. \*Measured Static Water Level 4.2 ft. Measured Pumping Water Level \_\_\_\_\_ ft. After \_\_\_\_\_ Hours at \_\_\_\_\_ GPM

14. \*Measuring Point (Describe) \_\_\_\_\_ Which is \_\_\_\_\_ ft. Above \_\_\_\_\_ Below Land Surface \*Flowing: \_\_\_\_\_ Yes \_\_\_\_\_ No

15. \*Casing Material: \_\_\_\_\_ Black Steel \_\_\_\_\_ Galvanized ☒ PVC \_\_\_\_\_ Stainless Steel \_\_\_\_\_ Not Cased \_\_\_\_\_ Other \_\_\_\_\_

16. \*Total Well Depth 12.0 ft. Cased Depth 12.0 ft. \*Open Hole: From \_\_\_\_\_ To \_\_\_\_\_ ft. \*Screen: From \_\_\_\_\_ To \_\_\_\_\_ ft. Slot Size \_\_\_\_\_

17. \*Abandonment: ☒ Other (Explain) PLUGGED

2" From 0.00 ft. To 12.00 ft. No. of Bags <u>0.26</u>	Seal Material (Check One): <input checked="" type="checkbox"/> Neat Cement _____ Bentonite _____ Other _____
From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____

18. \*Surface Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____

19. \*Primary Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____

20. \*Liner Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____

21. \*Telescope Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____	Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____

22. Pump Type (If Known):

\_\_\_\_\_ Centrifugal \_\_\_\_\_ Jet \_\_\_\_\_ Submersible \_\_\_\_\_ Turbine  
Horsepower \_\_\_\_\_ Pump Capacity (GPM) \_\_\_\_\_  
Pump Depth \_\_\_\_\_ ft. Intake Depth \_\_\_\_\_ ft.

23. Chemical Analysis (When Required):

Iron \_\_\_\_\_ ppm Sulfate \_\_\_\_\_ ppm Chloride \_\_\_\_\_ ppm  
\_\_\_\_\_ Laboratory Test \_\_\_\_\_ Field Test Kit

24. Water Well Contractor:

\*Contractor Name Gregory W Campbell \*License Number 2613 E-mail Address chad@pdsflorida.com

\*Contractor's Signature Digitally Signed

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

\*Driller's Name (Print or Type) Trey Creamer

WWW.SWFWMD.STATE.FL.US

WWW.SJRWMD.COM

WWW.NWFWMD.STATE.FL.US

WWW.SFWMD.GOV

WWW.MYSUWANNEERIVER.COM

[illegible]

MW-1



FORM LEG-R.005.02 (06/10) Rule 40D-3.411 (1)(a), F.A.C. EFFECTIVE DATE: 9/12/2010





# STATE OF FLORIDA WELL COMPLETION REPORT

☒ Southwest  
☐ Northwest  
☐ St. Johns River  
☐ South Florida  
☐ Suwannee River  
☐ DEP  
☐ Delegated Authority (If Applicable) \_\_\_\_\_

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

Date Stamp  
Received:  
Nov 24, 2014 4:33 pm

Official Use Only

1. *Permit Number <u>839888</u>		*CUP/WUP Number _____		*DID Number _____		62-524 Delineation No. _____	
2. *Number of permitted wells constructed, repaired, or abandoned <u>5</u>		*Number of permitted wells not constructed, repaired, or abandoned <u>3</u>					
3. *Owner's Name <u>Safety Kleen Corporation</u>		4. *Completion Date <u>11/14/2014</u>		5. Florida Unique ID _____			
6. <u>5309 S 24TH AV</u>		TAMPA					
*Well Location - Address, Road Name or Number, City, ZIP							
7. *County <u>HILLSBOROUGH</u>		*Section <u>27</u>		Land Grant _____		*Township <u>29</u> *Range <u>19</u>	
8. Latitude <u>27 55 34.06</u>		Longitude <u>82 23 40.32</u>					
9. Data Obtained From: _____		<input checked="" type="checkbox"/> GPS <input checked="" type="checkbox"/> Map		<input checked="" type="checkbox"/> Survey		Datum: _____ NAD 27 <input checked="" type="checkbox"/> NAD 83 _____ WGS 84	
10. *Type of Work: _____ Construction _____ Repair _____ Modification <input checked="" type="checkbox"/> Abandonment							
11. *Specify Intended Use(s) of Well(s):							
_____ Domestic		_____ Landscape Irrigation		_____ Agricultural Irrigation		_____ Site Investigation	
_____ Bottled Water Supply		_____ Recreation Area Irrigation		_____ Livestock		_____ Monitoring	
_____ Public Water Supply (Limited Use/DOH)		_____ Commercial/Industrial		_____ Nursery Irrigation		_____ Test	
_____ Public Water Supply (Community or Non-Community/DEP)		_____ Golf Course Irrigation		_____ Earth-Coupled Geothermal		_____ HVAC Supply	
_____ Class I Injection				_____ HVAC Return			
Class V Injection: _____ Recharge _____ Commercial/Industrial Disposal _____ Aquifer Storage and Recovery _____ Drainage							
Remediation: _____ Recovery _____ Air Sparge _____ Other (Describe) _____							
<input checked="" type="checkbox"/> Other (Describe) <u>PLUGGED</u>							
12. *Drill Method: _____ Auger _____ Cable Tool _____ Rotary _____ Combination (Two or More Methods) _____ Jetted _____ Sonic _____ Horizontal Drilling _____ Hydraulic Point (Direct Push) <input checked="" type="checkbox"/> Other <u>PLUGGED BY APPROVED METHOD</u>							
13. *Measured Static Water Level <u>4.2</u> ft. Measured Pumping Water Level _____ ft. After _____ Hours at _____ GPM							
14. *Measuring Point (Describe) _____ Which is _____ ft. Above _____ Below Land Surface *Flowing: _____ Yes _____ No							
15. *Casing Material: _____ Black Steel _____ Galvanized <input checked="" type="checkbox"/> PVC _____ Stainless Steel _____ Not Cased _____ Other _____							
16. *Total Well Depth <u>12.0</u> ft. Cased Depth <u>12.0</u> ft. *Open Hole: From _____ To _____ ft. *Screen: From _____ To _____ ft. Slot Size _____							
17. *Abandonment: <input checked="" type="checkbox"/> Other (Explain) <u>PLUGGED</u>							
2" From 0.00 ft. To 12.00 ft. No. of Bags <u>0.26</u>		Seal Material (Check One): <input checked="" type="checkbox"/> Neat Cement _____ Bentonite _____ Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
18. *Surface Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
19. *Primary Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
20. *Liner Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
21. *Telescope Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): _____ Neat Cement _____ Bentonite _____ Other _____					
22. Pump Type (If Known): _____ Centrifugal _____ Jet _____ Submersible _____ Turbine				23. Chemical Analysis (When Required):			
Horsepower _____ Pump Capacity (GPM) _____				Iron _____ ppm Sulfate _____ ppm Chloride _____ ppm			
Pump Depth _____ ft. Intake Depth _____ ft.				_____ Laboratory Test _____ Field Test Kit			
24. Water Well Contractor:							
*Contractor Name <u>Gregory W Campbell</u>		*License Number <u>2613</u>		E-mail Address <u>chad@pdsflorida.com</u>			
*Contractor's Signature <u>Digitally Signed</u>				*Driller's Name (Print or Type) <u>Trey Creamer</u>			
(I certify that the information provided in this report is accurate and true.)							

2379 BROAD STREET, BROOKSVILLE, FL 34604-6899  
PHONE: (352) 796-7211 or (800) 423-1476  
WWW.SWFWM.D.STATE.FL.US

4049 REID STREET, PALATKA, FL 32178-1429  
PHONE: (386) 329-4500  
WWW.SJRWMD.COM

152 WATER MANAGEMENT DR., HAVANA, FL 32333-4712  
(U.S. Highway 90, 10 miles west of Tallahassee)  
PHONE: (850) 539-5999  
WWW.NFWMD.STATE.FL.US

P.O. BOX 24680  
3301 GUN CLUB ROAD  
WEST PALM BEACH, FL 33416-4680  
PHONE: (561) 686-8800  
WWW.SFWMD.GOV

9225 CR 49  
LIVE OAK, FL 32060  
PHONE: (386) 362-1001 or (800) 226-1066 (Florida only)  
WWW.MYSUWANNEERIVER.COM

[illegible]

MW-3



FORM LEG-R.005.02 (06/10) Rule 40D-3.411 (1)(a), F.A.C. EFFECTIVE DATE: 9/12/2010





# STATE OF FLORIDA WELL COMPLETION REPORT

- ☒ Southwest  
☐ Northwest  
☐ St. Johns River  
☐ South Florida  
☐ Suwannee River  
☐ DEP  
☐ Delegated Authority (If Applicable) \_\_\_\_\_

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

Date Stamp

Received:

Nov 24, 2014 4:33 pm

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2. *Number of permitted wells constructed, repaired, or abandoned <u>5</u>		*Number of permitted wells not constructed, repaired, or abandoned <u>3</u>					
3. *Owner's Name <u>Safety Kleen Corporation</u>		4. *Completion Date <u>11/14/2014</u>		5. Florida Unique ID _____			
6. <u>5309 S 24TH AV</u>		TAMPA					
*Well Location - Address, Road Name or Number, City, ZIP							
7. *County <u>HILLSBOROUGH</u>		*Section <u>27</u>		Land Grant _____		*Township <u>29</u> *Range <u>19</u>	
8. Latitude <u>27 55 33.79</u>		Longitude <u>82 23 40.48</u>					
9. Data Obtained From: <u>GPS</u> <input checked="" type="checkbox"/> Map _____ Survey _____		Datum: <u>NAD 27</u> <input checked="" type="checkbox"/> NAD 83 _____		WGS 84 _____			
10. *Type of Work: <input type="checkbox"/> Construction <input type="checkbox"/> Repair <input type="checkbox"/> Modification <input checked="" type="checkbox"/> Abandonment							
11. *Specify Intended Use(s) of Well(s):							
<input type="checkbox"/> Domestic		<input type="checkbox"/> Landscape Irrigation		<input type="checkbox"/> Agricultural Irrigation		<input type="checkbox"/> Site Investigation	
<input type="checkbox"/> Bottled Water Supply		<input type="checkbox"/> Recreation Area Irrigation		<input type="checkbox"/> Livestock		<input type="checkbox"/> Monitoring	
<input type="checkbox"/> Public Water Supply (Limited Use/DOH)		<input type="checkbox"/> Commercial/Industrial		<input type="checkbox"/> Nursery Irrigation		<input type="checkbox"/> Test	
<input type="checkbox"/> Public Water Supply (Community or Non-Community/DEP)		<input type="checkbox"/> Golf Course Irrigation		<input type="checkbox"/> Earth-Coupled Geothermal		<input type="checkbox"/> HVAC Supply	
<input type="checkbox"/> Class I Injection				<input type="checkbox"/> HVAC Return			
Class V Injection: <input type="checkbox"/> Recharge <input type="checkbox"/> Commercial/Industrial Disposal <input type="checkbox"/> Aquifer Storage and Recovery <input type="checkbox"/> Drainage							
Remediation: <input type="checkbox"/> Recovery <input type="checkbox"/> Air Sparge <input type="checkbox"/> Other (Describe) _____							
<input checked="" type="checkbox"/> Other (Describe) <u>PLUGGED</u>							
12. *Drill Method: <input type="checkbox"/> Auger <input type="checkbox"/> Cable Tool <input type="checkbox"/> Rotary <input type="checkbox"/> Combination (Two or More Methods) <input type="checkbox"/> Jetted <input type="checkbox"/> Sonic							
<input type="checkbox"/> Horizontal Drilling <input type="checkbox"/> Hydraulic Point (Direct Push) <input checked="" type="checkbox"/> Other <u>PLUGGED BY APPROVED METHOD</u>							
13. *Measured Static Water Level <u>4.2</u> ft. Measured Pumping Water Level _____ ft. After _____ Hours at _____ GPM							
14. *Measuring Point (Describe) _____ Which is _____ ft. Above _____ Below Land Surface *Flowing: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
15. *Casing Material: <input type="checkbox"/> Black Steel <input type="checkbox"/> Galvanized <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Not Cased <input type="checkbox"/> Other _____							
16. *Total Well Depth <u>12.0</u> ft. Cased Depth <u>12.0</u> ft. *Open Hole: From _____ To _____ ft. *Screen: From _____ To _____ ft. Slot Size _____							
17. *Abandonment: <input checked="" type="checkbox"/> Other (Explain) <u>PLUGGED</u>							
2" From 0.00 ft. To 12.00 ft. No. of Bags <u>0.26</u>		Seal Material (Check One): <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
18. *Surface Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
19. *Primary Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
20. *Liner Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
21. *Telescope Casing Diameter and Depth:							
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
Dia _____ in. From _____ ft. To _____ ft. No. of Bags _____		Seal Material (Check One): <input type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____					
22. Pump Type (If Known):							
<input type="checkbox"/> Centrifugal <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine		23. Chemical Analysis (When Required):					
Horsepower _____ Pump Capacity (GPM) _____		Iron _____ ppm Sulfate _____ ppm Chloride _____ ppm					
Pump Depth _____ ft. Intake Depth _____ ft.		____ Laboratory Test _____ Field Test Kit					
24. Water Well Contractor:							
*Contractor Name <u>Gregory W Campbell</u>		*License Number <u>2613</u>		E-mail Address <u>chad@pdsflorida.com</u>			
*Contractor's Signature <u>Digitally Signed</u>		*Driller's Name (Print or Type) <u>Trey Creamer</u>					
(I certify that the information provided in this report is accurate and true.)							

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Case No.	Case Name	Case Type	Case Status	Case Date	Case Time	Case Location	Case Description	Case Details	Case Notes	Case Comments	Case Actions	Case Results	Case Summary	Case Conclusion	Case Final Status
1	Case 1	Case Type 1	Case Status 1	Case Date 1	Case Time 1	Case Location 1	Case Description 1	Case Details 1	Case Notes 1	Case Comments 1	Case Actions 1	Case Results 1	Case Summary 1	Case Conclusion 1	Case Final Status 1
2	Case 2	Case Type 2	Case Status 2	Case Date 2	Case Time 2	Case Location 2	Case Description 2	Case Details 2	Case Notes 2	Case Comments 2	Case Actions 2	Case Results 2	Case Summary 2	Case Conclusion 2	Case Final Status 2
3	Case 3	Case Type 3	Case Status 3	Case Date 3	Case Time 3	Case Location 3	Case Description 3	Case Details 3	Case Notes 3	Case Comments 3	Case Actions 3	Case Results 3	Case Summary 3	Case Conclusion 3	Case Final Status 3
4	Case 4	Case Type 4	Case Status 4	Case Date 4	Case Time 4	Case Location 4	Case Description 4	Case Details 4	Case Notes 4	Case Comments 4	Case Actions 4	Case Results 4	Case Summary 4	Case Conclusion 4	Case Final Status 4
5	Case 5	Case Type 5	Case Status 5	Case Date 5	Case Time 5	Case Location 5	Case Description 5	Case Details 5	Case Notes 5	Case Comments 5	Case Actions 5	Case Results 5	Case Summary 5	Case Conclusion 5	Case Final Status 5
6	Case 6	Case Type 6	Case Status 6	Case Date 6	Case Time 6	Case Location 6	Case Description 6	Case Details 6	Case Notes 6	Case Comments 6	Case Actions 6	Case Results 6	Case Summary 6	Case Conclusion 6	Case Final Status 6
7	Case 7	Case Type 7	Case Status 7	Case Date 7	Case Time 7	Case Location 7	Case Description 7	Case Details 7	Case Notes 7	Case Comments 7	Case Actions 7	Case Results 7	Case Summary 7	Case Conclusion 7	Case Final Status 7
8	Case 8	Case Type 8	Case Status 8	Case Date 8	Case Time 8	Case Location 8	Case Description 8	Case Details 8	Case Notes 8	Case Comments 8	Case Actions 8	Case Results 8	Case Summary 8	Case Conclusion 8	Case Final Status 8
9	Case 9	Case Type 9	Case Status 9	Case Date 9	Case Time 9	Case Location 9	Case Description 9	Case Details 9	Case Notes 9	Case Comments 9	Case Actions 9	Case Results 9	Case Summary 9	Case Conclusion 9	Case Final Status 9
10	Case 10	Case Type 10	Case Status 10	Case Date 10	Case Time 10	Case Location 10	Case Description 10	Case Details 10	Case Notes 10	Case Comments 10	Case Actions 10	Case Results 10	Case Summary 10	Case Conclusion 10	Case Final Status 10

Comments: Finish: PLUGGED

MW-4

Detailed Site Map of Well Location



Give distances from all reference points or structures, septic systems, sanitary hazards, and contamination sources within 500 ft. of well.





# STATE OF FLORIDA WELL COMPLETION REPORT

☒ Southwest

☐ Northwest

☐ St. Johns River

☐ South Florida

☐ Suwannee River

☐ DEP

☐ Delegated Authority (If Applicable) \_\_\_\_\_

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

Date Stamp

Received:

Nov 24, 2014 4:33 pm

Official Use Only

1. \*Permit Number 839888 \*CUP/WUP Number \_\_\_\_\_ \*DID Number \_\_\_\_\_ 62-524 Delineation No. \_\_\_\_\_

2. \*Number of permitted wells constructed, repaired, or abandoned 5 \*Number of permitted wells not constructed, repaired, or abandoned 3

3. \*Owner's Name Safety Kleen Corporation 4. \*Completion Date 11/14/2014 5. Florida Unique ID \_\_\_\_\_

6. 5309 S 24TH AV TAMPA  
\*Well Location - Address, Road Name or Number, City, ZIP

7. \*County HILLSBOROUGH \*Section 27 Land Grant \_\_\_\_\_ \*Township 29 \*Range 19

8. Latitude 27 55 33.92 Longitude 82 23 40.09

9. Data Obtained From: GPS ☒ Map Survey Datum: NAD 27 ☒ NAD 83 WGS 84

10. \*Type of Work: Construction Repair Modification ☒ Abandonment

11. \*Specify Intended Use(s) of Well(s):  
Domestic Landscape Irrigation Agricultural Irrigation Site Investigation  
Bottled Water Supply Recreation Area Irrigation Livestock Monitoring  
Public Water Supply (Limited Use/DOH) Nursery Irrigation Test  
Public Water Supply (Community or Non-Community/DEP) Commercial/Industrial Earth-Coupled Geothermal  
Class I Injection Golf Course Irrigation HVAC Supply  
Class V Injection Recharge Commercial/Industrial Disposal Aquifer Storage and Recovery Drainage  
Remediation Recovery Air Sparge Other (Describe) \_\_\_\_\_  
☒ Other (Describe) PLUGGED

12. \*Drill Method: Auger Cable Tool Rotary Combination (Two or More Methods) Jetted Sonic  
Horizontal Drilling Hydraulic Point (Direct Push) ☒ Other PLUGGED BY APPROVED METHOD

13. \*Measured Static Water Level 4.2 ft. Measured Pumping Water Level \_\_\_\_\_ ft. After \_\_\_\_\_ Hours at \_\_\_\_\_ GPM

14. \*Measuring Point (Describe) \_\_\_\_\_ Which is \_\_\_\_\_ ft. Above \_\_\_\_\_ Below Land Surface \*Flowing: Yes No

15. \*Casing Material: Black Steel Galvanized ☒ PVC Stainless Steel Not Cased Other

16. \*Total Well Depth 12.0 ft. Cased Depth 12.0 ft. \*Open Hole: From \_\_\_\_\_ To \_\_\_\_\_ ft. \*Screen: From \_\_\_\_\_ To \_\_\_\_\_ ft. Slot Size \_\_\_\_\_

17. \*Abandonment: ☒ Other (Explain) PLUGGED

2. \*From 0.00 ft. To 12.00 ft. No. of Bags 0.26 Seal Material (Check One): ☒ Neat Cement Bentonite Other  
From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other

18. \*Surface Casing Diameter and Depth:  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other

19. \*Primary Casing Diameter and Depth:  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other

20. \*Liner Casing Diameter and Depth:  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other

21. \*Telescope Casing Diameter and Depth:  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other  
Dia \_\_\_\_\_ in. From \_\_\_\_\_ ft. To \_\_\_\_\_ ft. No. of Bags \_\_\_\_\_ Seal Material (Check One): Neat Cement Bentonite Other

22. Pump Type (If Known):  
Centrifugal Jet Submersible Turbine  
Horsepower \_\_\_\_\_ Pump Capacity (GPM) \_\_\_\_\_  
Pump Depth \_\_\_\_\_ ft. Intake Depth \_\_\_\_\_ ft.  
24. Water Well Contractor:  
\*Contractor Name Gregory W Campbell \*License Number 2613 E-mail Address chad@pdsflorida.com

23. Chemical Analysis (When Required):  
Iron \_\_\_\_\_ ppm Sulfate \_\_\_\_\_ ppm Chloride \_\_\_\_\_ ppm  
\_\_\_\_ Laboratory Test \_\_\_\_\_ Field Test Kit

\*Contractor's Signature Digitally Signed  
(I certify that the information provided in this report is accurate and true.)

\*Driller's Name (Print or Type) Trey Creamer

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MW-2



FORM LEG-R.005.02 (06/10) Rule 40D-3.411 (1)(a), F.A.C. EFFECTIVE DATE: 9/12/2010





# STATE OF FLORIDA WELL COMPLETION REPORT

☒ Southwest

☐ Northwest

☐ St. Johns River

☐ South Florida

☐ Suwannee River

☐ DEP

☐ Delegated Authority (If Applicable) \_\_\_\_\_

PLEASE, FILL OUT ALL APPLICABLE FIELDS

(\*Denotes Required Fields Where Applicable)

Date Stamp

Received:

Nov 24, 2014 4:33 pm

Official Use Only

1. \*Permit Number 839888 \*CUP/WUP Number \_\_\_\_\_ \*DID Number \_\_\_\_\_ 62-524 Delineation No. \_\_\_\_\_

2. \*Number of permitted wells constructed, repaired, or abandoned 5 \*Number of permitted wells not constructed, repaired, or abandoned 3

3. \*Owner's Name Safety Kleen Corporation 4. \*Completion Date 11/14/2014 5. Florida Unique ID \_\_\_\_\_

6. 5309 S 24TH AV TAMPA

\*Well Location - Address, Road Name or Number, City, ZIP

7. \*County HILLSBOROUGH \*Section 27 Land Grant \_\_\_\_\_ \*Township 29 \*Range 19

8. Latitude 27 55 35.10 Longitude 82 23 37.48

9. Data Obtained From: GPS ☒ Map Survey Datum: NAD 27 ☒ NAD 83 WGS 84

10. \*Type of Work: Construction Repair Modification ☒ Abandonment

11. \*Specify Intended Use(s) of Well(s):

Domestic Landscape Irrigation Agricultural Irrigation Site Investigation  
Bottled Water Supply Recreation Area Irrigation Livestock Monitoring  
Public Water Supply (Limited Use/DOH) Nursery Irrigation Test  
Public Water Supply (Community or Non-Community/DEP) Commercial/Industrial Earth-Coupled Geothermal  
Class I Injection Golf Course Irrigation HVAC Supply  
Class V Injection Recharge Commercial/Industrial Disposal Aquifer Storage and Recovery Drainage

Remediation: Recovery Air Sparge Other (Describe) \_\_\_\_\_

☒ Other (Describe) PLUGGED

12. \*Drill Method: Auger Cable Tool Rotary Combination (Two or More Methods) Jetted Sonic  
Horizontal Drilling Hydraulic Point (Direct Push) ☒ Other PLUGGED BY APPROVED METHOD

13. \*Measured Static Water Level 4.2 ft. Measured Pumping Water Level \_\_\_\_\_ ft. After \_\_\_\_\_ Hours at \_\_\_\_\_ GPM

14. \*Measuring Point(Describe) \_\_\_\_\_ Which is \_\_\_\_\_ ft. Above Below Land Surface \*Flowing: Yes No

15. \*Casing Material: Black Steel Galvanized ☒ PVC Stainless Steel Not Cased Other \_\_\_\_\_

16. \*Total Well Depth 12.0 ft. Cased Depth 12.0 ft. \*Open Hole: From \_\_\_\_\_ To \_\_\_\_\_ ft. \*Screen: From \_\_\_\_\_ To \_\_\_\_\_ ft. Slot Size \_\_\_\_\_

17. \*Abandonment: ☒ Other (Explain) PLUGGED

From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>

18. \*Surface Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>

19. \*Primary Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>

20. \*Liner Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>

21. \*Telescope Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>
Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	<u>Neat Cement</u>	<u>Bentonite</u>	<u>Other</u>

22. Pump Type (If Known):

Centrifugal Jet Submersible Turbine

Horsepower \_\_\_\_\_ Pump Capacity (GPM) \_\_\_\_\_

Pump Depth \_\_\_\_\_ ft. Intake Depth \_\_\_\_\_ ft.

23. Chemical Analysis (When Required):

Iron \_\_\_\_\_ ppm Sulfate \_\_\_\_\_ ppm Chloride \_\_\_\_\_ ppm

\_\_\_\_\_  
Laboratory Test \_\_\_\_\_ Field Test Kit

24. Water Well Contractor:

\*Contractor Name Gregory W Campbell \*License Number 2613 E-mail Address chad@pdsflorida.com

\*Contractor's Signature Digitally Signed

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

\*Driller's Name (Print or Type) Trey Creamer

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[illegible]

Comments: Finish: PLUGGED

MW-5

Detailed Site Map of Well Location



Give distances from all reference points or structures, septic systems, sanitary hazards, and contamination sources within 500 ft. of well.





# STATE OF FLORIDA WELL COMPLETION REPORT

☒ Southwest  
☐ Northwest  
☐ St. Johns River  
☐ South Florida  
☐ Suwannee River  
☐ DEP  
☐ Delegated Authority (If Applicable) \_\_\_\_\_

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

Date Stamp  
Received:  
Nov 24, 2014 4:40 pm

Official Use Only

1. Permit Number 839889 \*CUP/WUP Number \_\_\_\_\_ \*DID Number \_\_\_\_\_ 62-524 Delineation No. \_\_\_\_\_

2. Number of permitted wells constructed, repaired, or abandoned 1 \*Number of permitted wells not constructed, repaired, or abandoned 1

3. Owner's Name Safety Kleen Corporation 4. Completion Date 11/14/2014 5. Florida Unique ID \_\_\_\_\_

6. 5309 S 24TH AV TAMPA  
\*Well Location - Address, Road Name or Number, City, ZIP

7. \*County HILLSBOROUGH \*Section 27 Land Grant \_\_\_\_\_ \*Township 29 \*Range 19

8. Latitude 27 55 33.99 Longitude 82 23 40.41

9. Data Obtained From: GPS ☒ Map Survey Datum: NAD 27 ☒ NAD 83 WGS 84

10. \*Type of Work: Construction Repair Modification ☒ Abandonment

11. \*Specify Intended Use(s) of Well(s):  
Domestic Landscape Irrigation Agricultural Irrigation Site Investigation  
Bottled Water Supply Recreation Area Irrigation Livestock Monitoring  
Public Water Supply (Limited Use/DOH) Commercial/Industrial Nursery Irrigation Test  
Public Water Supply (Community or Non-Community/DEP) Golf Course Irrigation Earth-Coupled Geothermal  
Class I Injection HVAC Supply  
Class V Injection: Recharge Commercial/Industrial Disposal Aquifer Storage and Recovery Drainage  
Remediation: Recovery Air Sparge Other (Describe) \_\_\_\_\_  
☒ Other (Describe) PLUGGED

12. \*Drill Method: Auger Cable Tool Rotary Combination (Two or More Methods) Jetted Sonic  
Horizontal Drilling Hydraulic Point (Direct Push) ☒ Other PLUGGED BY APPROVED METHOD

13. \*Measured Static Water Level 4.3 ft. Measured Pumping Water Level \_\_\_\_\_ ft. After \_\_\_\_\_ Hours at \_\_\_\_\_ GPM

14. \*Measuring Point (Describe) \_\_\_\_\_ Which is \_\_\_\_\_ ft. Above \_\_\_\_\_ Below Land Surface \*Flowing: Yes No

15. \*Casing Material: Black Steel Galvanized ☒ PVC Stainless Steel Not Cased Other

16. \*Total Well Depth 46.0 ft. Cased Depth 46.0 ft. \*Open Hole: From \_\_\_\_\_ To \_\_\_\_\_ ft. \*Screen: From \_\_\_\_\_ To \_\_\_\_\_ ft. Slot Size \_\_\_\_\_

17. \*Abandonment: ☒ Other (Explain) PLUGGED

From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	Neat Cement	Bentonite	Other
From 0.00 ft. To 46.00 ft.	0.94	<input checked="" type="checkbox"/>			
From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			
From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			
From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			
From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			

18. \*Surface Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	Neat Cement	Bentonite	Other
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			

19. \*Primary Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	Neat Cement	Bentonite	Other
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			

20. \*Liner Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	Neat Cement	Bentonite	Other
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			

21. \*Telescope Casing Diameter and Depth:

Dia _____ in. From _____ ft. To _____ ft.	No. of Bags _____	Seal Material (Check One):	Neat Cement	Bentonite	Other
Dia _____ in. From _____ ft. To _____ ft.	_____	<input type="checkbox"/>			

22. Pump Type (If Known): Centrifugal Jet Submersible Turbine  
Horsepower \_\_\_\_\_ Pump Capacity (GPM) \_\_\_\_\_  
Pump Depth \_\_\_\_\_ ft. Intake Depth \_\_\_\_\_ ft.

23. Chemical Analysis (When Required):  
Iron \_\_\_\_\_ ppm Sulfate \_\_\_\_\_ ppm Chloride \_\_\_\_\_ ppm  
Laboratory Test \_\_\_\_\_ Field Test Kit \_\_\_\_\_

24. Water Well Contractor:  
\*Contractor Name Gregory W Campbell \*License Number 2613 E-mail Address chad@pdsflorida.com  
\*Contractor's Signature Digitally Signed \*Driller's Name (Print or Type) Trey Creamer  
(I certify that the information provided in this report is accurate and true.)

**NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT**  
152 WATER MANAGEMENT DR., HAVANA, FL 32333-4712  
(U.S. Highway 90, 10 miles west of Tallahassee)  
PHONE: (850) 539-5999  
[WWW.NWFWMD.STATE.FL.US](http://WWW.NWFWMD.STATE.FL.US)

**SOUTH FLORIDA WATER MANAGEMENT DISTRICT**  
P.O. BOX 24680  
3301 GUN CLUB ROAD  
WEST PALM BEACH, FL 33416-4680  
PHONE: (561) 686-8800  
WWW.SFWMD.GOV

**SUWANNEE RIVER WATER MANAGEMENT DISTRICT**  
9225 CR 49  
LIVE OAK, FL 32060  
PHONE: (386) 362-1001 or (800) 226-1066 (Florida only)  
[WWW.MYSUWANNEERIVER.COM](http://WWW.MYSUWANNEERIVER.COM)

\*DRILL CUTTINGS LOG (Examine cuttings every 20 ft. or at formation changes. Note cavities and depth to producing zone. Grain Size: F=Fine, M=Medium, and C=Coarse)

[illegible]

Comments: Finish: PLUGGED

MW-6D

\*Detailed Site Map of Well Location



Give distances from all reference points or structures, septic systems, sanitary hazards, and contamination sources within 500 ft. of well.