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TECO TAMPA ELECTRIC AN EMERA COMPANY

ANNUAL GROUNDWATER MONITORING AND CORRECTIVE ACTION REPORT

Big Bend Power Station
Economizer Ash and Pyrite Pond System
13031 Wyandotte Road
Gibsonton, FL 33572

Prepared for

Tampa Electric Company
Tampa, FL

Prepared by
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Project FR2814

January 26, 2021

EXECUTIVE SUMMARY

In accordance with the United States Environmental Protection Agency ("USEPA") coal combustion residuals ("CCR") rule (40 Code of Federal Regulations Part 257,Subpart D) ("CCR Rule"), this *2020 Annual Groundwater Monitoring and Corrective Action Report* fulfills CCR reporting requirements for activities completed in 2020 at the economizer ash and pyrite pond system (EAPPS) located at Tampa Electric Company's (TEC) Big Bend Power Station (BBS) in Hillsborough County, Gibsonton, Florida.

In 2016, TEC established a CCR groundwater monitoring well network to monitor groundwater quality within the uppermost aquifer in the vicinity of the EAPPS. Per the requirements of 40 CFR 257.90(b), baseline monitoring was performed between June 2016 and August 2017, and detection monitoring for Appendix III constituents was conducted in 2018 and 2019. Statistical evaluation of CCR groundwater monitoring data collected through 2018 identified statistically significant increases ("SSIs") of pH (Appendix III constituent) above background levels at two monitoring well locations (BBS-CCR-1 and BBS-CCR-2). In April 2018, an Alternate Source Demonstration (ASD) established that the elevated groundwater pH was not a result of a release from the EAPPS. Therefore, a transition to assessment groundwater monitoring was not required.

Although the four years of groundwater data did not indicate that either assessment monitoring or an assessment of corrective measures at the EAPPS were required, TEC decided to close the EAPPS by removal (e.g., "clean closure") based on other provisions of the CCR Rule. The closure project was initiated in December 2019 and continued throughout 2020. Groundwater monitoring was terminated, and the five monitoring wells were abandoned in September 2020. The closure project is anticipated to be completed by no later than the end of 2021.

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ACRONYMS

BBS	Big Bend Station
CCR	Coal Combustion Residuals
CCR Rule	Coal Combustion Residuals Rule
CFR	Code of Federal Regulations
EAPPS	Economizer Ash and Pyrite Pond System
GWPS	Groundwater Protection Standard
PE	Professional Engineer
RCRA	Resource Conservation and Recovery Act
SP	Statistical Analysis Plan
SSI	Statistically Significant Increase
TEC	Tampa Electric Company
USEPA	United States Environmental Protection Agency

1. BACKGROUND

On April 17, 2015, the United States Environmental Protection Agency (USEPA) published 40 Code of Federal Regulations (CFR) Parts 257 and 261: Hazardous and Solid Waste Management System; Disposal of Coal Combustion Residuals from Electric Utilities; Final Rule (USEPA, 2015). This regulation addresses the safe disposal of coal combustion residuals (CCR) as solid waste under Subtitle D of the Resource Conservation and Recovery Act (RCRA) and is referred to herein as the CCR Rule. The CCR Rule became effective on October 14, 2015. The rule provides national minimum criteria for "the safe disposal of CCR in new and existing CCR landfills, surface impoundments, and lateral expansions, design and operating criteria, groundwater monitoring and corrective action, closure requirements and post closure care, and recordkeeping, notification, and internet posting requirements." The groundwater monitoring requirements of the CCR Rule apply to the economizer ash and pyrite pond system (EAPPS) at Tampa Electric Company's (TEC) Big Bend Power Station (BBS) in southeast Hillsborough County, Gibsonton, Florida (**Figure 1**).

This document has been prepared to meet the requirements of 40 CFR 257.90(e) concerning the Annual Groundwater Monitoring and Corrective Action reporting required by the CCR Rule for the EAPPS and BBS. At a minimum, the annual groundwater monitoring and corrective action report must contain the information described below and the information required by 257.90(e)(1) through (5), to the extent available.

> *"For existing CCR landfills and existing CCR surface impoundments, no later than January 31, 2018, and annually thereafter, the owner or operator must prepare an annual groundwater monitoring and corrective action report. For new CCR landfills, new CCR surface impoundments, and all lateral expansions of CCR units, the owner or operator must prepare the initial annual groundwater monitoring and corrective action report no later than January 31 of the year following the calendar year a groundwater monitoring system has been established for such CCR unit as required by this subpart, and annually thereafter. For the preceding calendar year, the annual report must document the status of the groundwater monitoring and corrective action program for the CCR unit, summarize key actions completed, describe any problems encountered, discuss actions to resolve the problems, and project key activities for the upcoming year. For purposes of this section, the owner or operator has prepared the annual report when the report is placed in the facility's operating record as required by § 257.105(h)(1)"*

In late 2015, TEC decided to close the EAPPs voluntarily by removing all CCR material for offsite disposal and restoring the area to pre-development conditions. This closure is not driven by exceedances of Groundwater Protection Standards (GWPS) as demonstrated by the results of the Detection Monitoring Program. Nevertheless, since the bottom of the impoundment is periodically less than five feet from the mean high groundwater table elevation, TEC decided to close the impoundment by removal of all CCRs from the unit, which was inactivated and ceased receiving CCRs in April 2017. Engineering began in October 2018 and closure of the EAPPS commenced in December 2019. Excavation and disposal of CCRs continued in 2020 and final closure and restoration activities will be completed not later than the end of 2021.

This annual report covers the period January 1, 2020 through December 31, 2020. Sections of this report that are required by the CCR Rule but are not applicable for the reporting period, contain the text "Not applicable for this annual reporting period".

2. SITE DESCRIPTION

2.1 Site Setting

The BBS is located on the eastern shore of Tampa Bay in Sections 9, 10, 15, and 16, Township 31, Range 19 East of the Gibsonton Quadrangle, with the center of the facility at approximately 27˚47'36" north latitude and 82˚24'16" west longitude and encompasses approximately 1,492 acres. Topography at the Site ranges from approximately sea level (along the western portion of the BBS) to approximately 10 feet mean sea level (MSL) near the eastern portions of the property along U.S. Highway 41. The location of the BBS and the components of the EAPPS, namely the north and south economizer ash ponds and the suction pond, are shown on **Figure 2**.

Construction of BBS began in the late 1960s on two dredge/fill peninsulas. Four coal-fired power generating units are present at the BBS and were placed into service in 1970, 1973, 1976, and 1985. Units 1, 2, and 3 are wet-bottom slag-tap type units that originally used saltwater slag-handling systems and electrostatic precipitators for stack gas emissions control. However, these units are now operating as freshwater systems that allow more internal water recycling. Unit 4 is a dry-bottom unit with a closed-loop freshwater ash-sluice system. All units are equipped with electrostatic precipitators and stack gasses are treated with limestone flue gas desulfurization (FGD) and selective catalytic reduction (SCR) systems.

2.2 CCR Units

The EAPPS was built in the early 1980s to support the operation of Big Bend Unit 4 and consists of three lined ponds. The EAPPS is considered one CCR unit by 40 CFR 257.53 and is located approximately 1,000 feet southeast of the active power generating units (**Figure 1**). The EAPPS ceased operation in April 2017. Economizer ash from Unit 4 is now combined with bottom ash and the combined product is stored in the Bottom Ash Ponds at the site for offsite shipment and beneficial use.

The pond bottom and dike crest elevations for each pond are reportedly 5.5 ft NGVD and 31 ft, NGVD respectively. The South Economizer Ash Pond contains an estimated 337,400 cubic yards (cy) of CCR material over a surface area of 7.2 acres. The north pond contains an estimated 90,000 cy of CCR material (Geosyntec, 2016) over a surface area of 5.4 acres.

2.3 Summary of Site Geology and Hydrogeology

The units that form the hydrogeologic framework in the region include the surficial aquifer system (SAS), the Intermediate Confining Unit (ICU), and the upper Floridan aquifer system (UFAS). Based on Site-specific data as well as hydrogeologic studies of west-central Florida, the intermediate aquifer system has not been identified as being present at this location (Tihanksy and Knochenmus, 2001).

The SAS sediments consist of Pleistocene shell deposits and terrace sands. Due to the irregular surface of the underlying limestone, the SAS varies in thicknesses but typically ranges between 20 and 30 feet (ft) thick in the area of the Site (SWFWMD, 2010). Groundwater (the water table) in the SAS is unconfined. The groundwater flow direction in

the SAS is generally towards Tampa Bay as the discharge point; however, flow direction is influenced by various surface water features including ponds, drainage ditches, canals, and small creeks locally. Upward vertical flow gradients from the UFAS to the SAS are common based on historical data trends, and in certain cases can lead to artesian conditions (ECT, 2003; 2007).

The ICU resides within the undifferentiated Hawthorn Group. Due to the absence of the intermediate aquifer system, the permeable strata are absent and consequently the less permeable, fine grained clastic clay units are generally more prevalent. These clay units with varying silt, sand content, and marls comprise the semi-confining unit that separates the SAS and the UFAS.

The UFAS consists of a continuous series of carbonate units and is composed of the limestone sequences that occur in the Tampa Member of the Arcadia Formation of the Hawthorn Group as well as the underlying Suwannee Limestone and other carbonate strata. The Tampa Member encompasses sandy limestone containing varying amounts of clays and marls. The thickness of the UFAS may exceed 1,200 ft beneath the facility. Groundwater in the UFAS generally flows regionally from northeast to southwest towards Tampa Bay.

Additional details regarding the regional and Site-specific geology and hydrogeology are provided in the *CCR Rule Groundwater Monitoring Program Plan (GWMP), Big Bend Power Station*, (October 2016).

2.4 Aquifer System Description

2.4.1 Identification of Uppermost Aquifer

The uppermost aquifer is defined by § 257.91(a)(1) as the geologic formation nearest the natural ground surface that is an aquifer, as well as lower aquifers that are hydraulically interconnected with this aquifer within the facility's property boundary. The uppermost aquifer at the Site is the SAS.

2.4.2 Groundwater Flow Direction

A surface water feature, Jackson Branch, to the north/northeast of the EAPPS appears to influence local groundwater flow toward the stream in contrast to the general groundwater flow direction at the BBS, which is east to west. The groundwater flow direction near the EAPPS has consistently been north to northeast from groundwater elevations generated during the September 2019 detection monitoring event, which was the final groundwater sampling event performed at the Site (**Appendix A**).

2.4.3 Groundwater Flow Rates

The average linear velocity of groundwater in the SAS at the EAPPS ranges from 0.03 to 0.07 ft/day[1]. This flow velocity corresponds to a range of flow velocities from approximately 12

[1] Based on average hydraulic conductivity of 3.4 feet/day for SAS deposits, a porosity of 0.2 for sand, and horizontal hydraulic gradients between 0.002 and 0.004.

to 27 feet per year. An approximate groundwater flow velocity of 20 feet per year was estimated using the September 17, 2019 groundwater level measurements.

3. GROUNDWATER MONITORING SYSTEM

The groundwater monitoring system (GMS) installed at the EAPPS was designed to monitor the water quality in the SAS upgradient of the EAPPS to evaluate background concentrations and downgradient of the EAPPS to evaluate the potential effects of a release. The GMS consisted of two background monitoring wells (identified as BBS-CCR-BW1 and BBS-CCR-BW2) located hydraulically upgradient of EAPPS. Three monitoring wells (identified as BBS-CCR1, BBS-CCR-2, and BBS-CCR-3) were located at the waste boundary and at the "hydraulically downgradient perimeter (i.e., the edge) of the CCR unit or at the closest practical distance from this location" [80 FR 21400].

TEC initiated clean closure activities (CCR removal) of the EAPPs in December 2019. Therefore, all five GMS monitoring wells were abandoned and detection monitoring was not conducted in 2020. The former location of the monitoring wells comprising the GMS are shown on **Figure 3**.

3.1 Status of the Groundwater Monitoring and Corrective Action Program

Groundwater monitoring was initiated at the EAPPS in June 2016 in accordance with the requirements of 40 CFR 257.90(b). Ten sampling events were conducted as part of baseline monitoring between June 2016 and August 2017, and detection monitoring was conducted in 2018 and 2019.

The groundwater monitoring program was terminated in 2020 with the initiation of clean closure activities (CCR removal) of the EAPPs in December 2019 and the abandonment of the GMS monitoring wells in September 2020.

3.2 Identification of Monitoring Wells Installed, Abandoned, or Decommissioned -257.90 (E)(2)

The five monitoring wells comprising the GMS were abandoned on September 14, 2020 by a Florida licensed driller. The monitoring well construction information is provided in **Table 1.** Copies of the well abandonment permits from the Southwest Florida Water Management District and the abandonment forms are provided in **Appendix B**.

4. SUMMARY OF 2020 CCR RULE ACTIVITIES COMPLETED

4.1 Requirements Completed

Closure of the EAPPs continued through 2020 and are currently ongoing. These activities included dewatering, excavation, and offsite shipment of CCR for disposal in Class I Landfills in the region.

4.2 Completion of Required Reports

The following reports were completed during the reporting period:

- Annual Groundwater Monitoring and Corrective Action Report, Big Bend Power Station – Economizer Ash and Pyrite Pond System, January 2020.

4.3 Problems Encountered and Resolution

Not applicable for this annual reporting period.

5. GROUNDWATER MONITORING DATA - 257.90(E)(3)

5.1 Detection Monitoring

Not applicable for this annual reporting period. As stated previously, detection monitoring has not been performed since 2019 following the initiation of closure by removal of the EAPPS by TEC.

5.1.1 Alternative Monitoring Frequency – 257.94(d)(3)

Not applicable for this annual reporting period.

5.1.2 Identification of Appendix III Constituents Detected at SSI Over Background – 257.94(e)

None.

5.1.3 Alternate Source Demonstration – 257.94(e)(2)

In April 2018, an ASD was successfully completed and certified by a Professional Engineer to address SSIs of groundwater pH at BBS-CCR-1 and BBS-CCR-2 in accordance with 40 CFR.94(e)(2). The groundwater pH SSIs in 2019 were shown to be a result of alternate sources.

5.1.4 Transition from Detection to Assessment Monitoring – 257.90(e)(4)

The detection monitoring program for the groundwater monitoring system was initiated in October 2017 pursuant to §257.90(b). Based on the monitoring results and the ASD completed in April 2018 in accordance with §257.94(e)(2), the EAPPS remained in detection monitoring until initiation of closure activities in December 2019.

5.2 Assessment Monitoring

None of the provisions of 40 CFR 257.95 were applicable for this annual reporting period. All closure activities for this unit will conclude in 2021.

6. DATA USABILITY EVALUATION

Not applicable for this annual reporting period.

7. DETECTION MONITORING STATISTICAL ANALYSIS

Not applicable for this annual reporting period.

8. ASSESSMENT MONITORING STATISTICAL ANALYSIS

Not applicable for this annual reporting period.

9. ACTIVITIES PLANNED FOR 2021

The projected key activities for the upcoming year include the following:

- Continuation of the EAPPS closure activities in accordance with 40 C.F.R. § 257.102(c) (closure by removal).

10. CORRECTIVE MEASURES

Not applicable for this annual reporting period.

11. REMEDY SELECTION

Not applicable for this annual reporting period.

12. CORRECTIVE ACTION

Corrective action of the EAPPs is not required in accordance with the Rule. However, TEC has opted to closure the EAPPS in accordance with 40 C.F.R. § 257.102(c).

13. REFERENCES

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Environmental Consulting & Technology. 2007. Sodium Ground Water Quality Exemption Application for the TECO Big Bend Station. Tampa, Florida.

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Geosyntec Consultants, Inc. 2016. Basins of Design and Preliminary Closure Evaluation Report; Economizer Ash and Pyrite Ponds; Big Bend Power Station, September 2016.

Geosyntec Consultants, Inc. 2017. Groundwater Monitoring Well Design, Installation, Development, and Decommissioning Report, Big Bend Power Station, Economizer Ash and Pyrite Pond System, October 2017.

Geosyntec Consultants, Inc. 2017. Statistical Analysis Plan, Big Bend Power Station, Economizer Ash and Pyrite Pond System, October 2017.

Geosyntec Consultants, Inc. 2018. Alternate Source Demonstration, Economizer Ash and Pyrite Pond System, Big Bend Power Station, April 2018.

Southwest Florida Water Management District, 2010. 2010 Regional Water Supply Plan, Tampa Bay Planning Region. Brooksville, Florida.

Tihanksy, A.B. and L.A. Knochenmus. 2001. Karst Features and Hydrogeology in West-central Florida-A Field Perspective. US Geological Survey-Water-Resources Investigations Report 01-4011.

USEPA, April 2015. 40 CFR Part 257, Hazardous and Solid Waste Management System; Disposal of Coal Combustion Residuals from Electric Utilities; Final Rule, EPA-HQ-RCRA-2009-0640.

TABLES

Table 1: Former CCR Monitoring Well Construction Details

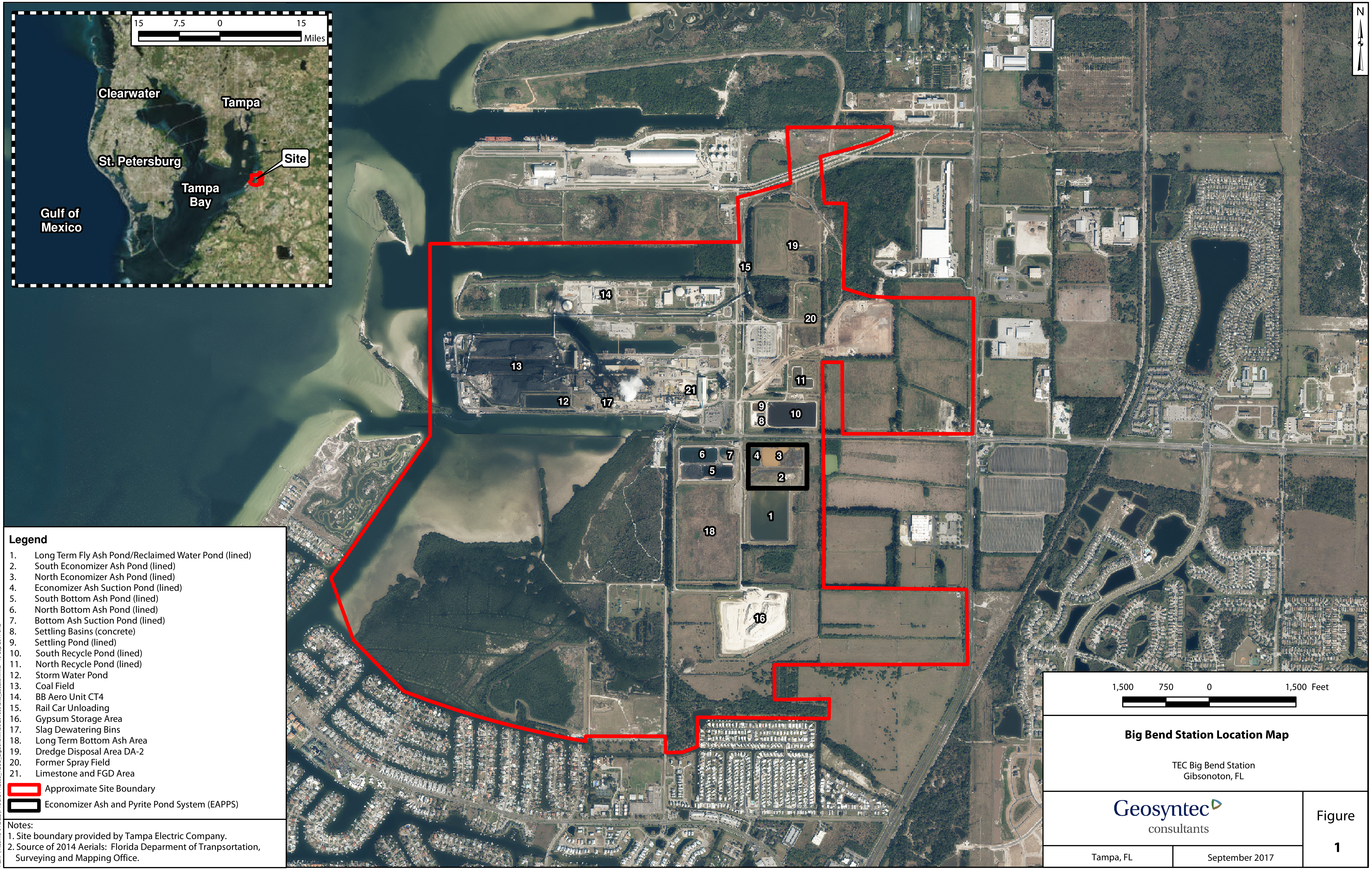
TEC Big Bend Station Economizer Ash and Pyrite Pond System
Gibsonton, FL

Well ID	Designation	Northing (NAD 1983)	Easting (NAD 1983)	Ground Surface Elevation (ft NAVD)	TOC Elevation* (ft NAVD)	Total Depth (ft bls)	Screen Interval (ft bls)	Top of Screen Elevation (ft NAVD)	Bottom of Screen Elevation (ft NAVD)
BBS-CCR-BW1	Background	1256638.34	528461.95	29.10	33.40	40	30-40	-0.90	-10.90
BBS-CCR-BW2	Background	1256966.67	527897.28	7.70	12.54	19	9-19	-1.30	-11.30
BBS-CCR-1	Detection	1257433.85	528211.74	5.00	9.82	17.5	7.5-17.5	-2.50	-12.50
BBS-CCR-2	Detection	1257429.29	528769.31	5.00	9.34	17.5	7.5-17.5	-2.50	-12.50
BBS-CCR-3	Detection	1257154.61	529023.26	4.90	9.20	18.5	8.5-18.5	-3.60	-13.60

Notes

1. Monitoring wells are 2 inches in diameter.
2. ft bls = feet below land surface
3. Horizontal datum surveyed to the North American Datum (NAD) of 1983 US State Plane Florida West.
4. Vertical datum surveyed to the North American Vertical Datum (NAVD) of 1988.
5. *Top of casing elevations were revised in September 2016 during final aboveground well completions. The additional PVC stickup was measured in the field and added to the surveyed top of casing elevation

FIGURES



Legend

1. Long Term Fly Ash Pond/Reclaimed Water Pond (lined)
2. South Economizer Ash Pond (lined)
3. North Economizer Ash Pond (lined)
4. Economizer Ash Suction Pond (lined)
5. South Bottom Ash Pond (lined)
6. North Bottom Ash Pond (lined)
7. Bottom Ash Suction Pond (lined)
8. Settling Basins (concrete)
9. Settling Pond (lined)
10. South Recycle Pond (lined)
11. North Recycle Pond (lined)
12. Storm Water Pond
13. Coal Field
14. BB Aero Unit CT4
15. Rail Car Unloading
16. Gypsum Storage Area
17. Slag Dewatering Bins
18. Long Term Bottom Ash Area
19. Dredge Disposal Area DA-2
20. Former Spray Field
21. Limestone and FGD Area

Approximate Site Boundary

Economizer Ash and Pyrite Pond System (EAPPS)

Notes:
1. Site boundary provided by Tampa Electric Company.
2. Source of 2014 Aerials: Florida Deparment of Tranpsortation, Surveying and Mapping Office.

Path: \\Titusville-01\Data\P:\GIS\FR2033_TECO_BigBend\MXDs\201606\Site_Location.mxd 19 Sep 2017 JRB

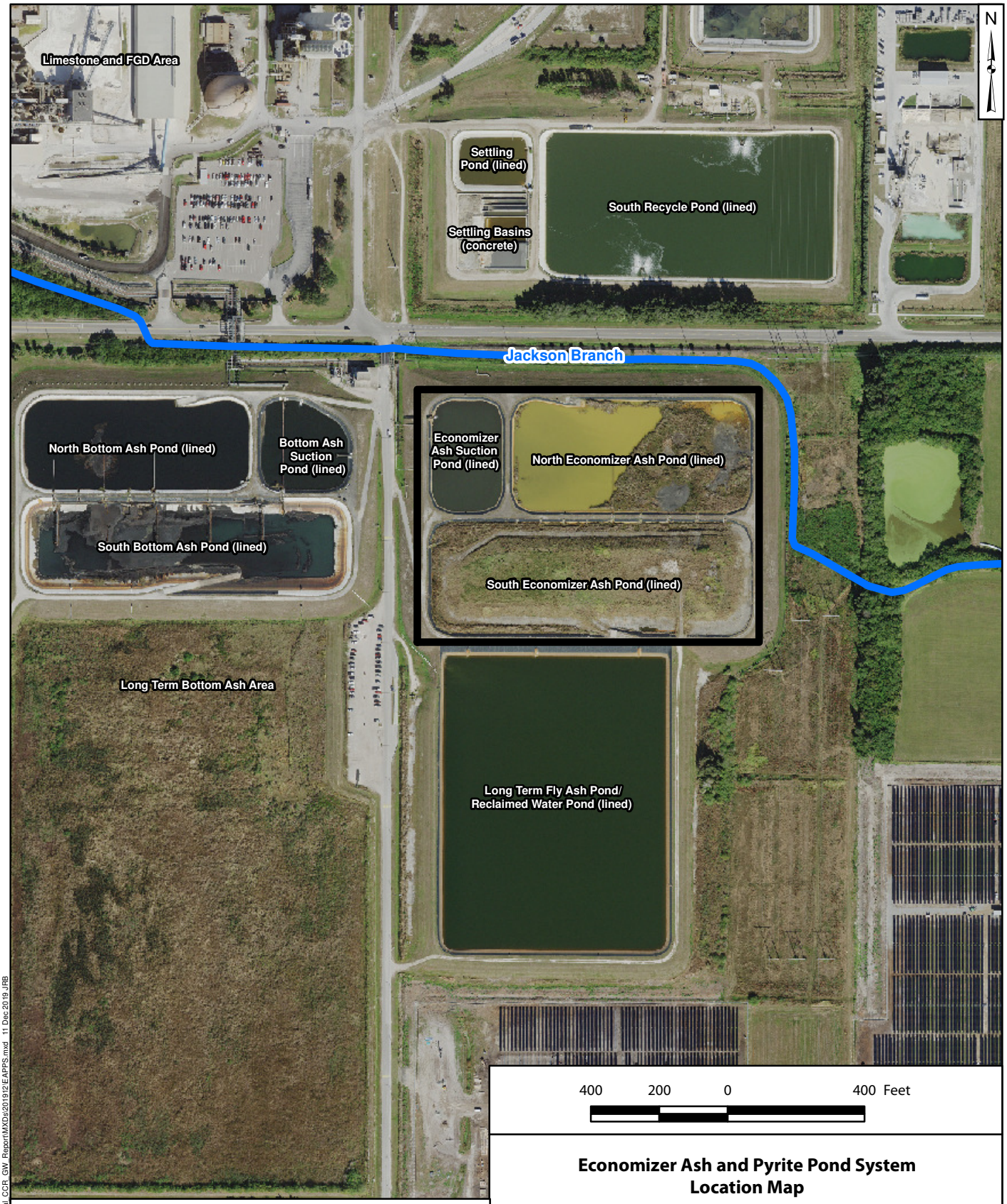
Big Bend Station Location Map

TEC Big Bend Station
Gibsonoton, FL

Geosyntec consultants

Tampa, FL | September 2017

Figure 1



400 200 0 400 Feet

Legend

Jackson Branch

Economizer Ash and Pyrite Pond System (EAPPS)

Note:
Source of 2017 Aerials: Florida Department of Transportation, Aerial Photo Look Up System website.

Economizer Ash and Pyrite Pond System Location Map

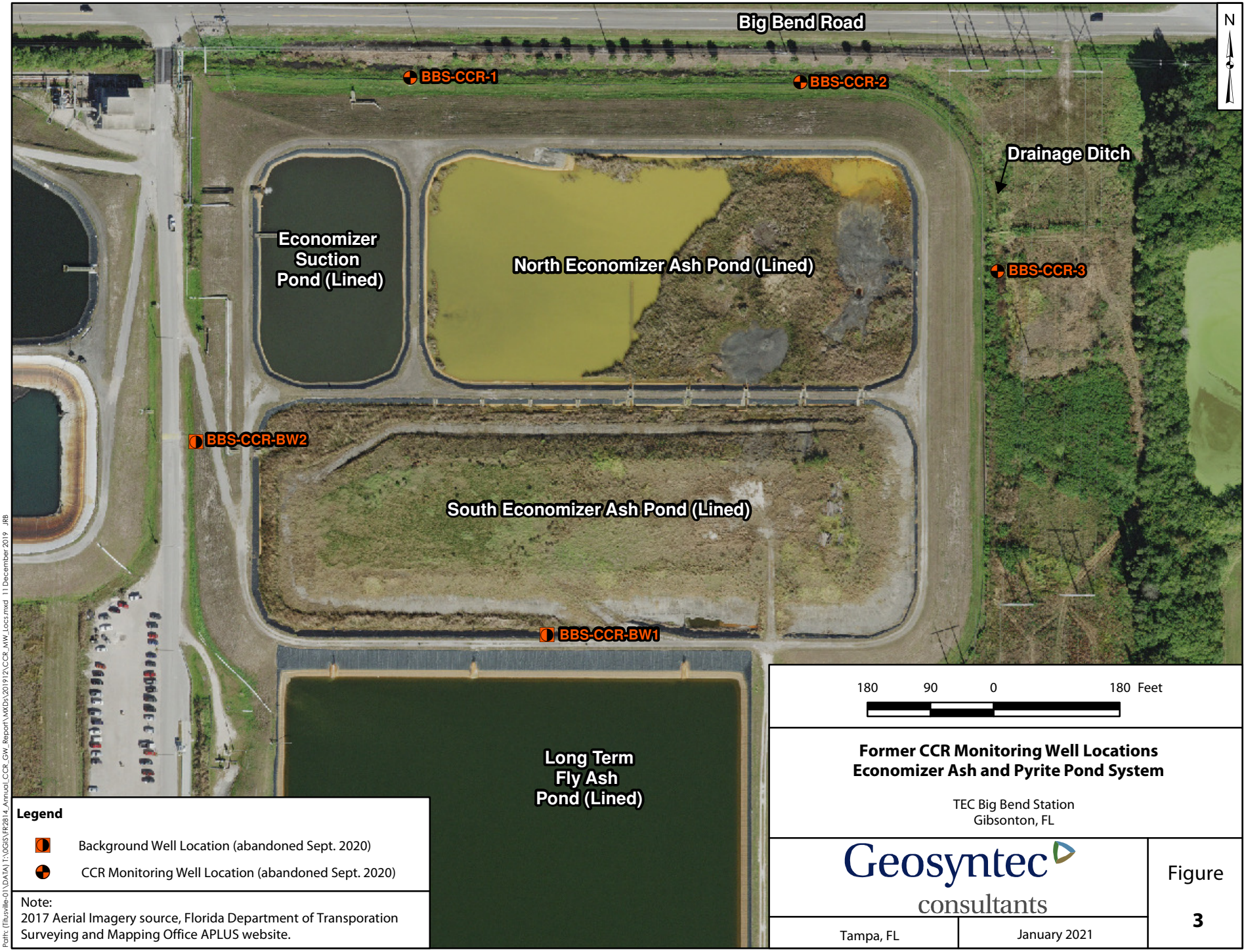
TEC Big Bend Station
Gibsonton, FL

Geosyntec consultants

Tampa, FL | January 2021

Figure 2

Path: (Tlusville-01\Data\T\GIS\FR2814 Annual CCR GW Report\MXDs\20191\EAPPS.mxd 11 Dec 2019 JRB



Legend

- Background Well Location (abandoned Sept. 2020)
- CCR Monitoring Well Location (abandoned Sept. 2020)

Note:
2017 Aerial Imagery source, Florida Department of Transporation Surveying and Mapping Office APLUS website.

Former CCR Monitoring Well Locations
Economizer Ash and Pyrite Pond System

TEC Big Bend Station
Gibsonton, FL

Geosyntec consultants

Tampa, FL | January 2021

Figure 3

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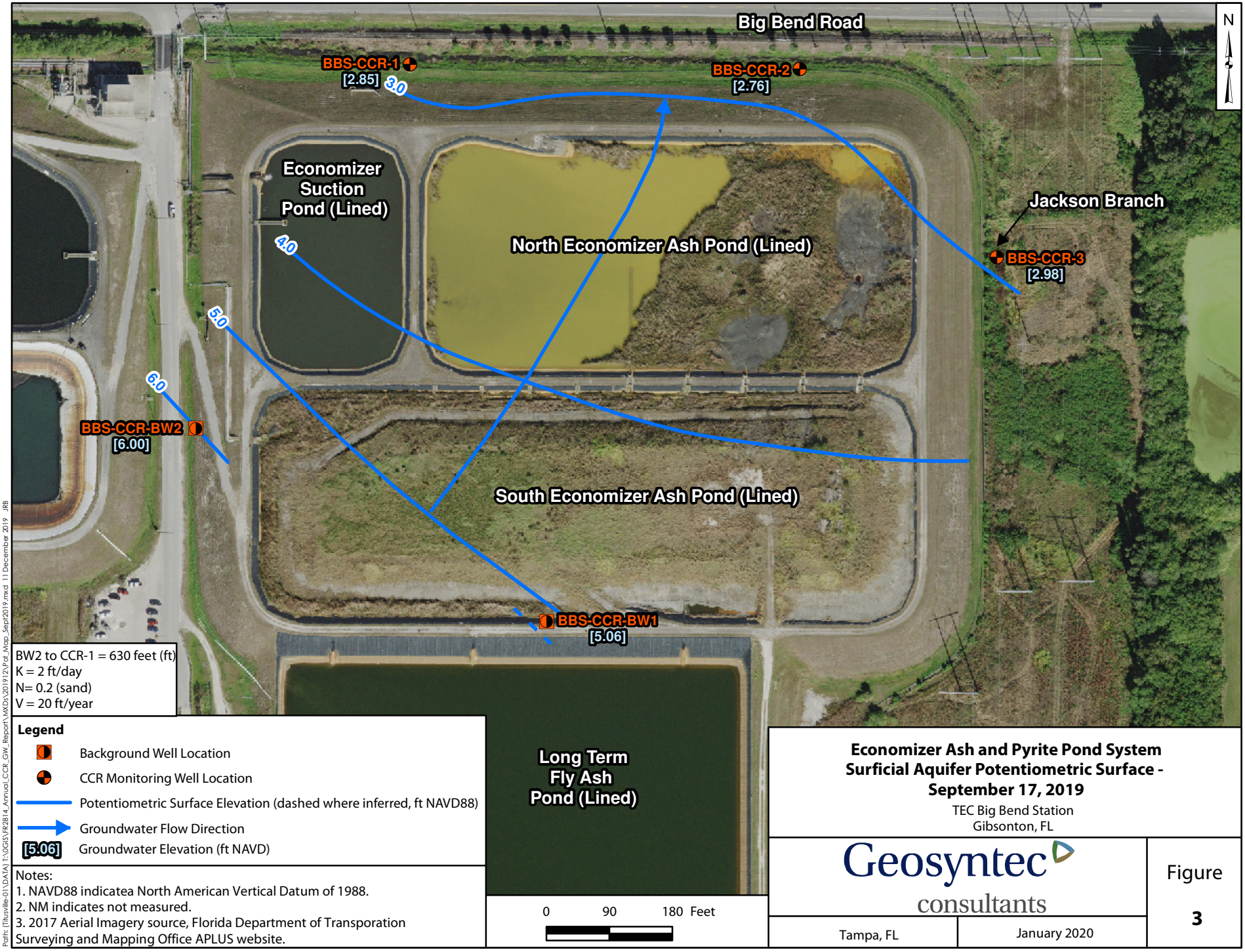
APPENDIX A
September 2019 Surficial Aquifer Potentiometric Surface


Big Bend Road
BBS-CCR-1
[2.85]
3.0
BBS-CCR-2
[2.76]
Economizer
Suction
Pond (Lined)
North Economizer Ash Pond (Lined)
Jackson Branch
BBS-CCR-3
[2.98]
4.0
5.0
6.0
BBS-CCR-BW2
[6.00]
South Economizer Ash Pond (Lined)
BBS-CCR-BW1
[5.06]
Long Term
Fly Ash
Pond (Lined)
N
BW2 to CCR-1 = 630 feet (ft)
K = 2 ft/day
N= 0.2 (sand)
V = 20 ft/year
Legend
Background Well Location
CCR Monitoring Well Location
Potentiometric Surface Elevation (dashed where inferred, ft NAVD88)
Groundwater Flow Direction
[5.06] Groundwater Elevation (ft NAVD)
Notes:
1. NAVD88 indicatea North American Vertical Datum of 1988.
2. NM indicates not measured.
3. 2017 Aerial Imagery source, Florida Department of Transporation Surveying and Mapping Office APLUS website.
0
90
180 Feet
Economizer Ash and Pyrite Pond System
Surficial Aquifer Potentiometric Surface -
September 17, 2019
TEC Big Bend Station
Gibsonton, FL
Geosyntec consultants
Tampa, FL
January 2020
Figure
3
Path: (Tillsville-01\DATA) T:\GIS\FR2814_Annual_CCR_GW_Report\MXDs\2019\2\Pot_Map_Sep12019.mxd 11 December 2019 JRB

APPENDIX B

SWFWMD Monitoring Well Abandonment Permits and Forms

STATE OF FLORIDA PERMIT APPLICATION TO CONSTRUCT, REPAIR, MODIFY, OR ABANDON A WELL

Permit No. 891740
Florida Unique ID
Permit Stipulations Required (See Attached) 04
62-524 Quad No. Q3120 Delineation No.
CUP/WUP Application No.
ABOVE THIS LINE FOR OFFICIAL USE ONLY

☒ 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)

The water well contractor is responsible for completing this form and forwarding the permit application to the appropriate delegated authority where applicable.

1. TAMPA ELECTRIC CO | TECO ENERGY CORP TAX DEPT | TAMPA | FL | 33601 |
*Owner, Legal Name if Corporation | *Address | *City | *State | *ZIP | *Telephone Number

2. BIG BEND RD | APOLLO BEACH
*Well Location - Address, Road Name or Number, City

3. 1931151SF0000000005000U | Lot | Block | Unit
*Parcel ID No. (PIN) or Alternate Key (Circle One)

4. 15 | 31 | 19 | Hillsborough | Subdivision | Check if 62-524: ___ Yes _X_ No
*Section or Land Grant | *Township | *Range | *County

5. Gregory W Campbell | 2613 | (727) 561-7477 | chad@pdsflorida.com
*Water Well Contractor | *License Number | *Telephone Number | E-mail Address

6. 8820 66th St. N. | Pinellas Park | FL | 33782
*Water Well Contractor's Address | City | State | ZIP

7. *Type of Work: ____ Construction ____Repair ____Modification _X_Abandonment | NO LONGER IN USE
*Reason for Repair, Modification, or Abandonment

8. *Number of Proposed Wells 3

9. *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 ____HVAC Return
Remediation: ____Recovery ____Air Sparge ____Other (Describe)
_X_Other (Describe) PLUGGED (Note: Not all types of wells are permitted by a given permitting authority)

Date Stamp
Received:
Jul 21, 2020 8:23 am
Official Use Only

10. *Distance from Septic System if ≤200 ft. 0 | 11. Facility Description UTILITY | 12. Estimated Start Date 07/27/2020

13. *Estimated Well Depth 20 ft. *Estimated Casing Depth 10.0 ft. *Primary Casing Diameter 2 in. Open Hole: From ____ To ____ ft.

14. Estimated Screen Interval: From 10.0 To 20.0 ft.

15. *Primary Casing Material: ____Black Steel ____Galvanized _X_PVC ____Stainless Steel ____Not Cased ____Other:

16. Secondary Casing: ____Telescope Casing ____Liner ____Surface Casing Diameter ____ in.

17. Secondary Casing Material: ____Black Steel ____Galvanized ____PVC ____Stainless Steel ____Other

18. *Method of Construction, Repair, or Abandonment: ____Auger ____Cable Tool ____Jetted ____Rotary ____Sonic ____Combination (Two or More Methods) ____Hand Driven (Well Point, Sand Point) ____Hydraulic Point (Direct Push) ____Horizontal Drilling _X_Plugged by Approved Method ____Other (Describe)

19. Proposed Grouting Interval for the Primary, Secondary, and Additional Casing:
From 0.0 To 20.0 Seal Material (____Bentonite _X_Neat Cement ____Other ____)
From ____ To ____ Seal Material (____Bentonite ____Neat Cement ____Other ____)
From ____ To ____ Seal Material (____Bentonite ____Neat Cement ____Other ____)
From ____ To ____ Seal Material (____Bentonite ____Neat Cement ____Other ____)

20. Indicate total number of existing wells on site 2 List number of existing unused wells on site 2

21. *Is this well or any existing well or water withdrawal on the owner's contiguous property covered under a Consumptive/Water Use Permit (CUP/WUP) or CUP/WUP Application? ____Yes _X_No If yes, complete the following: CUP/WUP No. ____ District Well ID No. ____

22. Latitude 27 47 28.78 Longitude 82 23 35.99

23. Data Obtained From: ____GPS _X_Map ____Survey Datum: ____NAD 27 _X_NAD 83 ____WGS 84

I hereby certify that I will comply with the applicable rules of Title 40, Florida Administration Code, and that a water use permit or artificial recharge permit, if needed, has been or will be obtained prior to commencement of well construction. I further certify that all information provided in this application is accurate and that I will obtain necessary approval from other federal, state, or local governments, if applicable. I agree to provide a well completion report to the District within 30 days after completion of the construction, repair, modification, or abandonment authorized by this permit, or the permit expiration, whichever occurs first.

I certify that I am the owner of the property, that the information provided is accurate, and that I am aware of my responsibilities under Chapter 373, Florida Statutes, to maintain or properly abandon this well; or, I certify that I am the agent for the owner, that the information provided is accurate, and that I have informed the owner of his responsibilities as stated above. Owner consents to allowing personnel of this WMD or Delegated Authority access to the well site during the construction, repair, modification, or abandonment authorized by this permit.

Digitally Signed | 2613 | Digitally Signed | 7/21/2020
*Signature of Contractor | *License No. | *Signature of Owner or Agent | *Date

DO NOT WRITE BELOW THIS LINE - FOR OFFICIAL USE ONLY

Approval Granted By Automatically Issued Issue Date 07/21/2020 Expiration Date 10/19/2020 Hydrologist Approval ____ Initials

Fee Received $.00 Receipt No. ____ Check No. ____

THIS PERMIT IS NOT VALID UNTIL PROPERLY SIGNED BY AN AUTHORIZED OFFICER OR REPRESENTATIVE OF THE WMD OR DELEGATED AUTHORITY. THE PERMIT SHALL BE AVAILABLE AT THE WELL SITE DURING ALL CONSTRUCTION, REPAIR, MODIFICATION, OR ABANDONMENT ACTIVITIES.

This permit is valid for 90 days from the date of Issue.

STATE OF FLORIDA PERMIT APPLICATION TO CONSTRUCT, REPAIR, MODIFY, OR ABANDON A WELL

X 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)

The water well contractor is responsible for completing this form and forwarding the permit application to the appropriate delegated authority where applicable.

Permit No. 891741
Florida Unique ID _____
Permit Stipulations Required (See Attached) 04
62-524 Quad No. Q3120 Delineation No. _____
CUP/WUP Application No. _____

ABOVE THIS LINE FOR OFFICIAL USE ONLY

1. TAMPA ELECTRIC CO (*Owner, Legal Name if Corporation) | TECO ENERGY CORP TAX DEPT (*Address) | TAMPA (*City) | FL (*State) | 33601 (*ZIP) | _____ (*Telephone Number)
2. 490 BIG BEND RD (*Well Location - Address, Road Name or Number, City) | APOLLO BEACH
3. 1931151SF0000000003000U (*Parcel ID No. (PIN) or Alternate Key (Circle One)) | Lot | Block | Unit
4. 15 (*Section or Land Grant) | 31 (*Township) | 19 (*Range) | Hillsborough (*County) | Subdivision | Check if 62-524: ___ Yes X No
5. Gregory W Campbell (*Water Well Contractor) | 2613 (*License Number) | (727) 561-7477 (*Telephone Number) | chad@pdsflorida.com (E-mail Address)
6. 8820 66th St. N. (*Water Well Contractor's Address) | Pinellas Park (City) | FL (State) | 33782 (ZIP)

7. *Type of Work: ____ Construction ____ Repair ____ Modification X Abandonment NO LONGER IN USE (*Reason for Repair, Modification, or Abandonment)
8. *Number of Proposed Wells 5
9. *Specify Intended Use(s) of Well(s):

____Domestic ____Landscape Irrigation ____Agricultural Irrigation ____Site Investigation
____Bottled Water Supply ____Recreation Area Irrigation ____Livestock ____Monitoring
____Nursery Irrigation ____Test
____Public Water Supply (Limited Use/DOH) ____Commercial/Industrial ____Earth-Coupled Geothermal
____Public Water Supply (Community or Non-Community/DEP) ____Golf Course Irrigation ____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) _____
X Other (Describe) PLUGGED (Note: Not all types of wells are permitted by a given permitting authority)

Date Stamp
Received:
Jul 21, 2020 8:25 am
Official Use Only

10. *Distance from Septic System if ≤ 200 ft. 0 | 11. Facility Description UTILITY | 12. Estimated Start Date 07/27/2020
13. *Estimated Well Depth 40 ft. | *Estimated Casing Depth 35.0 ft. | *Primary Casing Diameter 2 in. | Open Hole: From ____ To ____ ft.
14. Estimated Screen Interval: From 35.0 To 40.0 ft.
15. *Primary Casing Material: ____Black Steel ____Galvanized X PVC ____Stainless Steel ____Not Cased ____Other: _____
16. Secondary Casing: ____Telescope Casing ____Liner ____Surface Casing Diameter ____ in.
17. Secondary Casing Material: ____Black Steel ____Galvanized ____PVC ____Stainless Steel ____Other _____
18. *Method of Construction, Repair, or Abandonment: ____Auger ____Cable Tool ____Jetted ____Rotary ____Sonic
____Combination (Two or More Methods) ____Hand Driven (Well Point, Sand Point) ____Hydraulic Point (Direct Push)
____Horizontal Drilling X Plugged by Approved Method ____Other (Describe) _____
19. Proposed Grouting Interval for the Primary, Secondary, and Additional Casing:
From 0.0 To 40.0 Seal Material (____Bentonite X Neat Cement ____Other _____)
From ____ To ____ Seal Material (____Bentonite ____Neat Cement ____Other _____)
From ____ To ____ Seal Material (____Bentonite ____Neat Cement ____Other _____)
From ____ To ____ Seal Material (____Bentonite ____Neat Cement ____Other _____)
20. Indicate total number of existing wells on site 3 | List number of existing unused wells on site 3
21. *Is this well or any existing well or water withdrawal on the owner's contiguous property covered under a Consumptive/Water Use Permit (CUP/WUP) or CUP/WUP Application? ____Yes X No If yes, complete the following: CUP/WUP No. _____ District Well ID No. _____
22. Latitude 27 47 32.20 | Longitude 82 23 42.42
23. Data Obtained From: ____GPS X Map ____Survey | Datum: ____NAD 27 X NAD 83 ____WGS 84

I hereby certify that I will comply with the applicable rules of Title 40, Florida Administration Code, and that a water use permit or artificial recharge permit, if needed, has been or will be obtained prior to commencement of well construction. I further certify that all information provided in this application is accurate and that I will obtain necessary approval from other federal, state, or local governments, if applicable. I agree to provide a well completion report to the District within 30 days after completion of the construction, repair, modification, or abandonment authorized by this permit, or the permit expiration, whichever occurs first.

I certify that I am the owner of the property, that this information provided is accurate, and that I am aware of my responsibilities under Chapter 373, Florida Statutes, to maintain or properly abandon this well, or, I certify that I am the agent for the owner, that the information provided is accurate, and that I have informed the owner of his responsibilities as stated above. Owner consents to allowing personnel of this WMD or Delegated Authority access to the well site during the construction, repair, modification, or abandonment authorized by this permit.

Digitally Signed (*Signature of Contractor) | 2613 (*License No.) | Digitally Signed (*Signature of Owner or Agent) | 7/21/2020 (*Date)

DO NOT WRITE BELOW THIS LINE - FOR OFFICIAL USE ONLY

Approval Granted By Automatically Issued | Issue Date 07/21/2020 | Expiration Date 10/19/2020 | Hydrologist Approval _____ (Initials)
Fee Received $.00 | Receipt No. _____ | Check No. _____

THIS PERMIT IS NOT VALID UNTIL PROPERLY SIGNED BY AN AUTHORIZED OFFICER OR REPRESENTATIVE OF THE WMD OR DELEGATED AUTHORITY. THE PERMIT SHALL BE AVAILABLE AT THE WELL SITE DURING ALL CONSTRUCTION, REPAIR, MODIFICATION, OR ABANDONMENT ACTIVITIES.

This permit is valid for 90 days from the date of Issue.

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 9, 2020 9:59 am
Official Use Only

1. *Permit Number 891740 *CUP/WUP Number ____ *DID Number ____ 62-524 Delineation No. ____

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

3. *Owner's Name TAMPA ELECTRIC CO 4. *Completion Date 09/14/2020 5. Florida Unique ID ____

6. BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ____ *Township 31 *Range 19

8. Latitude 27 47 28.64 Longitude 82 23 36.07

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

10. *Type of Work: ___ Construction ___ Repair ___ Modification X 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
___ Golf Course Irrigation ___ 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) ____
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ___ Stainless Steel ___ Not Cased ___ Other ____

16. *Total Well Depth 17.0 ft. Cased Depth 17.0 ft. *Open Hole: From ___ To ___ ft. *Screen: From ___ To ___ ft. Slot Size ____

17. *Abandonment: X Other (Explain) PLUGGED
2" From 0.00 ft. To 17.00 ft. No. of Bags 0.34 Seal Material (Check One): X 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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET, BROOKSVILLE, FL 34604-6899
PHONE: (352) 796-7211 or (800) 423-1476
WWW.SWFWMD.STATE.FL.US

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
4049 REID STREET, PALATKA, FL 32178-1429
PHONE: (386) 329-4500
WWW.SJRWMD.COM

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

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

***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)

From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________

Comments: Finish: PLUGGED
BBS-CCR-3

***Detailed Site Map of Well Location**

N

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 9, 2020 9:59 am

Official Use Only

1. *Permit Number 891740 *CUP/WUP Number ______ *DID Number ______ 62-524 Delineation No. ______

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

3. *Owner's Name TAMPA ELECTRIC CO 4. *Completion Date 09/14/2020 5. Florida Unique ID ______

6. BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ______ *Township 31 *Range 19

8. Latitude 27 47 24.72 Longitude 82 23 36.79

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

10. *Type of Work: ___ Construction ___ Repair ___ Modification X 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 ___ HVAC Return
Class V Injection: ___ Recharge ___ Commercial/Industrial Disposal ___ Aquifer Storage and Recovery ___ Drainage
Remediation: ___ Recovery ___ Air Sparge ___ Other (Describe) ______
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ___ Stainless Steel ___ Not Cased ___ Other ______

16. *Total Well Depth 17.0 ft. Cased Depth 17.0 ft. *Open Hole: From ___ To ___ ft. *Screen: From ___ To ___ ft. Slot Size ___

17. *Abandonment: X Other (Explain) PLUGGED
2" From 0.00 ft. To 17.00 ft. No. of Bags 0.34 Seal Material (Check One): X 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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

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***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)

From	ft.	To	ft.	Color	Grain Size (F, M, C)	Material

Comments: Finish: PLUGGED

PZ

***Detailed Site Map of Well Location**

N

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 9, 2020 10:28 am

Official Use Only

1. *Permit Number 891741 *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 0

3. *Owner's Name TAMPA ELECTRIC CO 4. *Completion Date 09/14/2020 5. Florida Unique ID ______

6. 490 BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ______ *Township 31 *Range 19

8. Latitude 27 47 32.59 Longitude 82 23 44.80

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

10. *Type of Work: ___ Construction ___ Repair ___ Modification X Abandonment

11. *Specify Intended Use(s) of Well(s):
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___ Bottled Water Supply ___ Recreation Area Irrigation ___ Livestock ___ Monitoring
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___ Class I Injection ___ Golf Course Irrigation ___ HVAC Supply ___ HVAC Return
Class V Injection: ___ Recharge ___ Commercial/Industrial Disposal ___ Aquifer Storage and Recovery ___ Drainage
Remediation: ___ Recovery ___ Air Sparge ___ Other (Describe) ______
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ___ Stainless Steel ___ Not Cased ___ Other ______

16. *Total Well Depth 17.0 ft. Cased Depth 17.0 ft. *Open Hole: From ___ To ___ ft. *Screen: From ___ To ___ ft. Slot Size ___

17. *Abandonment: X Other (Explain) PLUGGED
2" From 0.00 ft. To 17.00 ft. No. of Bags 0.34 Seal Material (Check One): X 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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
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PHONE: (352) 796-7211 or (800) 423-1476
WWW.SWFWMD.STATE.FL.US

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
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9225 CR 49
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*__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)

From (ft.)	To (ft.)	Color	Grain Size (F, M, C)	Material

Comments: Finish: PLUGGED

BBS-CCR-1

***Detailed Site Map of Well Location**

N

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 9, 2020 10:28 am

Official Use Only

1. *Permit Number 891741 *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 0

3. *Owner's Name TAMPA ELECTRIC CO 4. *Completion Date 09/14/2020 5. Florida Unique ID ____

6. 490 BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ____ *Township 31 *Range 19

8. Latitude 27 47 32.59 Longitude 82 23 38.62

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

10. *Type of Work: ____ Construction ____ Repair ____ Modification X 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
____ Golf Course Irrigation ____ 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) ____
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ____ Stainless Steel ____ Not Cased ____ Other ____

16. *Total Well Depth 30.0 ft. Cased Depth 30.0 ft. *Open Hole: From ____ To ____ ft. *Screen: From ____ To ____ ft. Slot Size ____

17. *Abandonment: X Other (Explain) PLUGGED

From	To	No. of Bags	Seal Material (Check One)
2" 0.00 ft.	30.00 ft.	0.60	X Neat Cement ____ Bentonite ____ Other ____
____ ft.	____ ft.	____	____ Neat Cement ____ Bentonite ____ Other ____
____ ft.	____ ft.	____	____ Neat Cement ____ Bentonite ____ Other ____
____ ft.	____ ft.	____	____ Neat Cement ____ Bentonite ____ Other ____
____ ft.	____ ft.	____	____ Neat Cement ____ Bentonite ____ Other ____

18. *Surface Casing Diameter and Depth:

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

19. *Primary Casing Diameter and Depth:

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

20. *Liner Casing Diameter and Depth:

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

21. *Telescope Casing Diameter and Depth:

Dia	From	To	No. of Bags	Seal Material (Check One)
____ in.	____ ft.	____ ft.	____	____ Neat Cement ____ Bentonite ____ Other ____
____ in.	____ ft.	____ ft.	____	____ Neat Cement ____ Bentonite ____ Other ____
____ in.	____ ft.	____ ft.	____	____ 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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

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*__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)

From (ft.)	To (ft.)	Color	Grain Size (F, M, C)	Material

Comments: Finish: PLUGGED

BBS-CCR-2

***Detailed Site Map of Well Location**

N

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

Date Stamp
Received:
Nov 9, 2020 10:28 am

Official Use Only

☒ 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)

1. *Permit Number 891741 *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 0

3. *Owner's Name TAMPA ELECTRIC CO 4. *Completion Date 09/14/2020 5. Florida Unique ID ______

6. 490 BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ______ *Township 31 *Range 19

8. Latitude 27 47 24.83 Longitude 82 23 42.72

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

10. *Type of Work: ___ Construction ___ Repair ___ Modification X 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
___ Golf Course Irrigation ___ 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) ______
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ___ Stainless Steel ___ Not Cased ___ Other ______

16. *Total Well Depth 40.0 ft. Cased Depth 40.0 ft. *Open Hole: From ___ To ___ ft. *Screen: From ___ To ___ ft. Slot Size ___

17. *Abandonment: X Other (Explain) PLUGGED
2" From 0.00 ft. To 40.00 ft. No. of Bags 0.80 Seal Material (Check One): X 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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

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

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From (ft.)	To (ft.)	Color	Grain Size (F, M, C)	Material

Comments: Finish: PLUGGED

-CCR-BW-1

*__Detailed Site Map of Well Location__

N

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
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6. 490 BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ______ *Township 31 *Range 19

8. Latitude 27 47 27.61 Longitude 82 23 48.01

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

10. *Type of Work: ___ Construction ___ Repair ___ Modification X 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
___ Golf Course Irrigation ___ 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) ______
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ___ Stainless Steel ___ Not Cased ___ Other ______

16. *Total Well Depth 17.0 ft. Cased Depth 17.0 ft. *Open Hole: From ___ To ___ ft. *Screen: From ___ To ___ ft. Slot Size ___

17. *Abandonment: X Other (Explain) PLUGGED

From	To	No. of Bags	Seal Material (Check One)
0.00 ft.	17.00 ft.	0.34	X Neat Cement ___ Bentonite ___ Other ___
___ ft.	___ ft.	___	___ Neat Cement ___ Bentonite ___ Other ___
___ ft.	___ ft.	___	___ Neat Cement ___ Bentonite ___ Other ___
___ ft.	___ ft.	___	___ Neat Cement ___ Bentonite ___ Other ___
___ ft.	___ ft.	___	___ Neat Cement ___ Bentonite ___ Other ___

(Row 1 prefixed "2"")

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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

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***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)

From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
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From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________
From________ ft. To________ ft. Color________________ Grain Size (F, M, C)________ Material________________________

Comments: Finish: PLUGGED

CCR-BW-2

***Detailed Site Map of Well Location**

N

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 9, 2020 10:28 am
Official Use Only

1. *Permit Number 891741 *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 0

3. *Owner's Name TAMPA ELECTRIC CO 4. *Completion Date 09/14/2020 5. Florida Unique ID ______

6. 490 BIG BEND RD APOLLO BEACH
*Well Location - Address, Road Name or Number, City, ZIP

7. *County Hillsborough *Section 15 Land Grant ______ *Township 31 *Range 19

8. Latitude 27 47 31.73 Longitude 82 23 47.59

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

10. *Type of Work: ___ Construction ___ Repair ___ Modification X 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
___ Golf Course Irrigation ___ 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) ______
X Other (Describe) PLUGGED

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

13. *Measured Static Water Level 6.0 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 X PVC ___ Stainless Steel ___ Not Cased ___ Other ______

16. *Total Well Depth 17.0 ft. Cased Depth 17.0 ft. *Open Hole: From ___ To ___ ft. *Screen: From ___ To ___ ft. Slot Size ___

17. *Abandonment: X Other (Explain) PLUGGED
2" From 0.00 ft. To 17.00 ft. No. of Bags 0.34 Seal Material (Check One): X 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 *Driller's Name (Print or Type) Brian Ehrhart
(I certify that the information provided in this report is accurate and true.)

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

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET, BROOKSVILLE, FL 34604-6899
PHONE: (352) 796-7211 or (800) 423-1476
WWW.SWFWMD.STATE.FL.US

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
4049 REID STREET, PALATKA, FL 32178-1429
PHONE: (386) 329-4500
WWW.SJRWMD.COM

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

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

***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)

From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
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From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____
From____ ft. To____ ft. Color____ Grain Size (F, M, C)____ Material____

Comments: Finish: PLUGGED

PZ

***Detailed Site Map of Well Location**

N

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