



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

- Southwest
Northwest
St. Johns River
South Florida
Suwannee River

THIS FORM MUST BE FILLED OUT COMPLETELY. The water well contractor is responsible for completing this form and forwarding the permit to the appropriate delegated county where applicable.

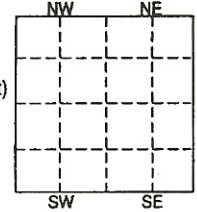
Permit No.
Florida Unique I.D.
Permit Stipulations Required (See attached)
62-524 well
CUP/WUP Application No.

CHECK BOX FOR APPROPRIATE DISTRICT. ADDRESS ON BACK OF PERMIT FORM.

ABOVE THIS LINE FOR OFFICIAL USE ONLY

Fold at this line in order that address is visible through envelope window

1. Owner, Legal Name of Entity if Corporation
Address City Zip Telephone Number
2. Well Location - Address, Road Name or Number, City
3. Florida Well Drilling, Inc. 2725 321-727-1809
Well Drilling Contractor License No. Telephone No.
1729 Agora Cir. SE
Address (smallest) 1/4 of (biggest) 1/4 of Section
Palm Bay FL 32909 (Indicate Well on Chart)
City State Zip 5. Township Range
6. Brevard
County Subdivision Name Lot Block Unit

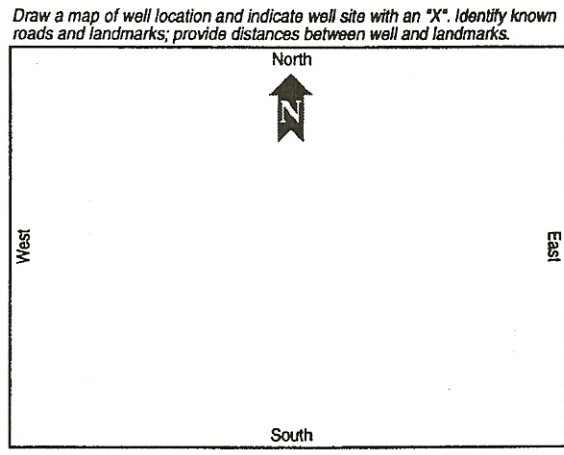


7. Number of proposed wells Check the use of well: (See back of permit for additional choices) Domestic Monitor (type)
Irrigation (type) Public Water Supply (type) List Other
Distance from septic system ft. Description of facility Estimated start of construction date

8. Application for: New Construction Repair/Modify Abandonment
9. Estimated: Well Depth Casing Depth Screen Interval from to
Casing Material: Blk-Steel / Gal / PVC Casing Diameter Seal Material Bentonite
10. If applicable: Proposed From to Seal Material
Grouting Interval From to Seal Material

11. Telescope Casing or Liner (check one) Diameter
Blk-Steel / Galvanized / PVC Other (specify:
12. Method of Construction: Rotary Cable Tool X Combination
Auger Other (specify:)

13. Indicate total No. of wells on site List number of unused wells on site
14. Is this well or any other well or water withdrawal on the owner's contiguous property covered under a Consumptive/Water Use Permit (CUP/WUP) or CUP/WUP Application? No Yes
District well I.D. No.
Latitude Longitude
Data obtained from GPS or map or survey (map datum NAD 27 NAD 83)



15. I hereby certify that I will comply with the applicable rules of Title 40, Florida Administrative Code... 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...
Signature of Contractor License No. 2725 Owner's or Agent's Signature Date

DO NOT WRITE BELOW THIS LINE - FOR OFFICIAL USE ONLY

Approval Granted By: Issue Date: Hydrologist Approval
Owner Number: Fee Received: \$ Receipt No.: Check No.:

THIS PERMIT NOT VALID UNTIL PROPERLY SIGNED BY AN AUTHORIZED OFFICER OR REPRESENTATIVE OF THE WMD. IT SHALL BE AVAILABLE AT THE WELL SITE DURING ALL DRILLING OPERATIONS. This permit is valid for 90 days from date of issue.

WHITE: ORIGINAL FILE
YELLOW: DRILLING CONTRACTOR
PINK: OWNER