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via: e-mail (michael@urstrong.com)

May 17, 2024
File: 1483.01-100

Michael Kerford
712223 N.B. Ltd.
Uxbridge, ON
(905) 904-3755

Subject: Shore and Dug Well Evaluation for the proposed Half-Moon Bay development, Prince Edward County, ON

Dear Mr. Kerford:

Following our recent discussions with Cambium Inc. (Cambium) regarding the feasibility of using shore and dug wells to supply potable water for the proposed Half-Moon Bay development (the site), we have conducted a cursory review of the area's water well data and surface water quality. A summary of our findings is provided in the following sections:

1.0 Review of Nearby Well Records

- Using well records obtained from the MECP water well database (see attached), we have identified several dug wells both along the shore and inland in the vicinity of the proposed development (see Figure 1 for mapped locations, Table 1 for well construction and reported water levels).
- Recommended pumping rates for wells in the area were reported between 10 and 15 gallons/ minute.
- A previous study completed by Malroz for the property in 2021^[1] included monitoring of a dug well present on-site (Well Tag #A276029). The monitoring data indicated a well depth of approximately 5.6 metres below grade (mbg) with a water level of approximately 1.0 mbg.
- The data from surrounding domestic supply wells suggests that shore wells are present and actively used in the area.

2.0 Water Quality Assessment

- Water quality data from a nearby Ministry of Environment Conservation and Parks, Lake Ontario monitoring station was evaluated and compared against the Ontario Drinking Water Standards (ODWS) Schedule 2 criteria.

[1] Hydrogeological Assessment, Halfmoon Bay. Prince Edward County, Ontario, Malroz Engineering Inc., file 1483-101.00, dated June 2, 2021.

- The concentrations of various parameters met the ODWS criteria, indicating that the water quality in the vicinity is suitable for potable use (see Table 2 for details).
- Each water treatment system should be equipped with appropriate treatment including a UV unit with two cartridge-style prefilters at 5 µm and 1 µm. The additional 1 µm filter assists with removing spores and cysts that come from surface water and which are resistant to UV light. This is above what would be typically recommended for a dug or drilled well which may have only 5 µm filtration and ultraviolet treatment recommended.

3.0 Feasibility Considerations

- While shore wells are commonly used for seasonal purposes, there are multiple existing shore wells supporting permanent residences in the area, and the presence of these functional dug wells and the water quality results reported for the nearby surface water station indicate that shore wells can be a reliable and permanent solution for potable water supply for the proposed development.
- Shore wells can access water from Lake Ontario at this site and as a result would have a sustainable yield of water, if properly designed, with no interference to other users.
- As dug and shore wells are permitted by in Ontario, the wells must be installed in accordance with O. Reg. 903.
- Inland dug wells though farther from the lake, can still benefit from the lake level being a boundary condition for the groundwater table. Dug wells should be installed to and into the soil bedrock interface to access the groundwater that may occur in the upper weathered bedrock. Considering the nearby water well records this appears to be a common water supply aquifer.
- Considering historic fluctuations in the Lake Ontario water levels it is recommended that the bottom of the well be completed to 73 meters above sea level, which is below the low water level identified by the International Lake Ontario-St. Lawrence River Board^[2].

4.0 Summary

In conclusion, the analysis of well records and water quality data supports the feasibility of using shore wells to supply potable water for the proposed development. In addition to the recommendations above, we recommend that each new well should be the subject of a pumping test, water quality analyses, and evaluation for interference under the supervision of a qualified hydrogeologist as conditions incorporated into the approval and/or in the Subdivision Agreement.

As with other subdivisions the hydrogeologic evaluation on a lot by lot basis can be conducted as a condition to be cleared prior to building permit issuance.

[2] Recorded Water Levels, International Lake Ontario-St. Lawrence River Board, <https://ijc.org/en/loslr/b/watershed/water-levels>, last updated May 14, 2024.

5.0 Closure

The findings reported in this document are based on the tasks completed by Malroz under the mutually agreed scope of work. Professional judgement, experience with similar investigations, and available data collected within the scope of work, form the basis for this opinion letter. Malroz has prepared this letter using information understood to be factual and correct, and shall not be responsible for conditions arising from information or facts that were inaccurate, concealed, or not fully disclosed at the time of investigation.

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Please contact us if you have any questions, comments, or concerns with respect to this document or the appended data.

Should you require further information, or have any questions, please do not hesitate to contact the undersigned.

Respectfully submitted,

MALROZ ENGINEERING INC.



The image shows a handwritten signature in blue ink that reads "John Pyke". To the right of the signature is a circular blue ink seal. The seal contains a stylized flower logo at the top, followed by the text "PROFESSIONAL GEOSCIENTIST" around the inner edge. In the center, it says "JOHN ROBERT PYKE", "PRACTISING MEMBER", and "1855". At the bottom of the seal, it says "ONTARIO".

John Pyke, P. Geo.
Principal/Environmental Geoscientist

Encl: Nearby Water Well Records
Figure 1 Site Location Plan
Table 1 Summary of Dug Supply Wells
Table 2 Lake Ontario Surface Water Analytical Results

Print only in spaces provided.
Mark correct box with a checkmark, where applicable.

11

5306545

Municipality Con. 53006 RPEB
SURVEY # 47R-2006

County or District: COUNTY OF PRINCE EDWARD
Township/Borough/City/Town/Village: SOUTH MARYSBURGH TWP.
Con block tract survey, etc.: CRPEB
Lot: PT. L4
Address: R.R.#3, PILTON, ONT. K0K 2T0
Date completed: 13 / 04 / 99

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LOG OF OVERBURDEN AND BEDROCK MATERIALS (see instructions)					
General colour	Most common material	Other materials	General description	Depth - feet	
				From	To
Grey	Topsoil			0	2
Yellow	Clay			2	6
Blue	SHALE			6	7
White	Limestone			1	3 1/2
					12 1/2 FT.

31
32

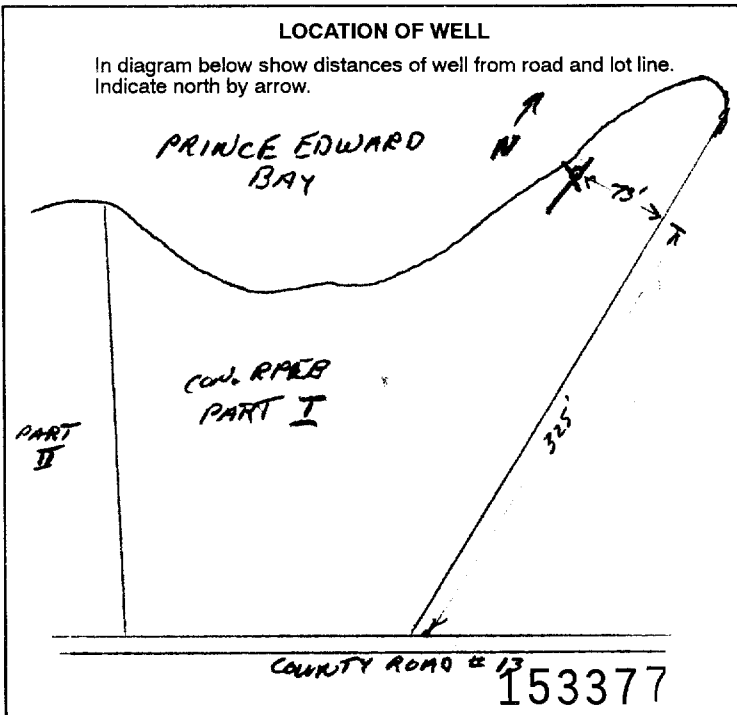
WATER RECORD	
Water found at - feet	Kind of water
9 1/2 FT	<input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Salty <input type="checkbox"/> Sulphur <input type="checkbox"/> Minerals <input type="checkbox"/> Gas

CASING & OPEN HOLE RECORD				
Inside diam inches	Material	Wall thickness inches	Depth - feet	
			From	To
3 1/2"	Concrete	4"	0	12 1/2 FT.

SIZES OF OPENING (Slot No.)	Diameter inches	Length feet
3/4	Clear Stone	6

PLUGGING & SEALING RECORD	
<input type="checkbox"/> Annular space	<input type="checkbox"/> Abandonment
Depth set at - feet	Material and type (Cement grout, bentonite, etc.)
From To	SEALER TAPE

PUMPING TEST	
Pumping test method	Pumping rate
<input checked="" type="checkbox"/> Pump	50 GPM
Static level	Water level end of pumping
9 feet	9 feet
Water levels during pumping	Water at end of test
15 min: 9 feet, 30 min: 9 feet, 45 min: 9 feet, 60 min: 9 feet	Clear
Recommended pump type: Shallow	Recommended pump setting: 12 feet



FINAL STATUS OF WELL

Water supply
 Observation well
 Test hole
 Recharge well

WATER USE

Domestic
 Stock
 Irrigation
 Industrial

METHOD OF CONSTRUCTION

Cable tool
 Rotary (conventional)
 Rotary (reverse)
 Rotary (air)

Name of Well Contractor: BRIND O'NEIL
 Well Contractor's Licence No.: 16831
 Address: RR#8 Pilton
 Name of Well Technician: BRIAN O'NEIL
 Well Technician's Licence No.: 23783
 Signature of Technician/Contractor: BRIND O'NEIL
 Submission date: day 13 mo 04 yr 99

MINISTRY USE ONLY

6658
 MAY 03 1999
 CSS.ES9



Measurements recorded in: Metric Imperial

A223572

Page _____ of _____

Well Location

Address of Well Location (Street Number/Name): 3366 City Rd 13
 Township: South Marysburg
 Lot: Pt of Lot 1
 Concession: _____

County/District/Municipality: Prince Edward County
 City/Town/Village: Picton
 Province: Ontario
 Postal Code: _____

UTM Coordinates Zone: Easting: Northing: NAD 83 18 339063 4066473
 Municipal Plan and Sublot Number: Part 4 47R-4116
 Other: _____

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
Brown	topsoil			0	1
Grey	Shale			1	3
Grey	Limestone			3	22

Annular Space

Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)
From: 0 To: 10	Non-toxic caulking	

Method of Construction

Cable Tool Diamond Public Commercial Not used
 Rotary (Conventional) Jetting Domestic Municipal Dewatering
 Rotary (Reverse) Driving Livestock Test Hole Monitoring
 Boring Digging Irrigation Cooling & Air Conditioning
 Air percussion Industrial Other, specify _____
 Other, specify _____

Construction Record - Casing

Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		Status of Well
			From	To	
36	Concrete	4	0	22	<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____

Construction Record - Screen

Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details

Water found at Depth (m/ft)	Kind of Water:	Depth (m/ft)	Diameter (cm/in)
15 (m/ft) <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____	<input checked="" type="checkbox"/> Fresh <input checked="" type="checkbox"/> Untested	From: _____ To: _____	_____
(m/ft) <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____	<input type="checkbox"/> Fresh <input type="checkbox"/> Untested		
(m/ft) <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____	<input type="checkbox"/> Fresh <input type="checkbox"/> Untested		

Well Contractor and Well Technician Information

Business Name of Well Contractor: Q-Logic Ltd
 Well Contractor's Licence No.: 6151214
 Business Address (Street Number/Name): 352 Marsh Rd.
 Municipality: Belleville
 Province: Ont Postal Code: K8N4Z7 Business E-mail Address: qlogicwater@live.ca

Bus. Telephone No. (inc. area code): 613 885 8696
 Name of Well Technician (Last Name, First Name): Quigley, Jamie
 Well Technician's Licence No.: 3191113
 Signature of Technician and/or Contractor: [Signature]
 Date Submitted: 2019/11/18

Results of Well Yield Testing

After test of well yield, water was:
 Clear and sand free
 Other, specify _____

If pumping discontinued, give reason: test complete

Pump intake set at (m/ft): 20

Pumping rate (l/min / GPM): 132

Duration of pumping: 1 hrs + 0 min

Final water level end of pumping (m/ft): 20

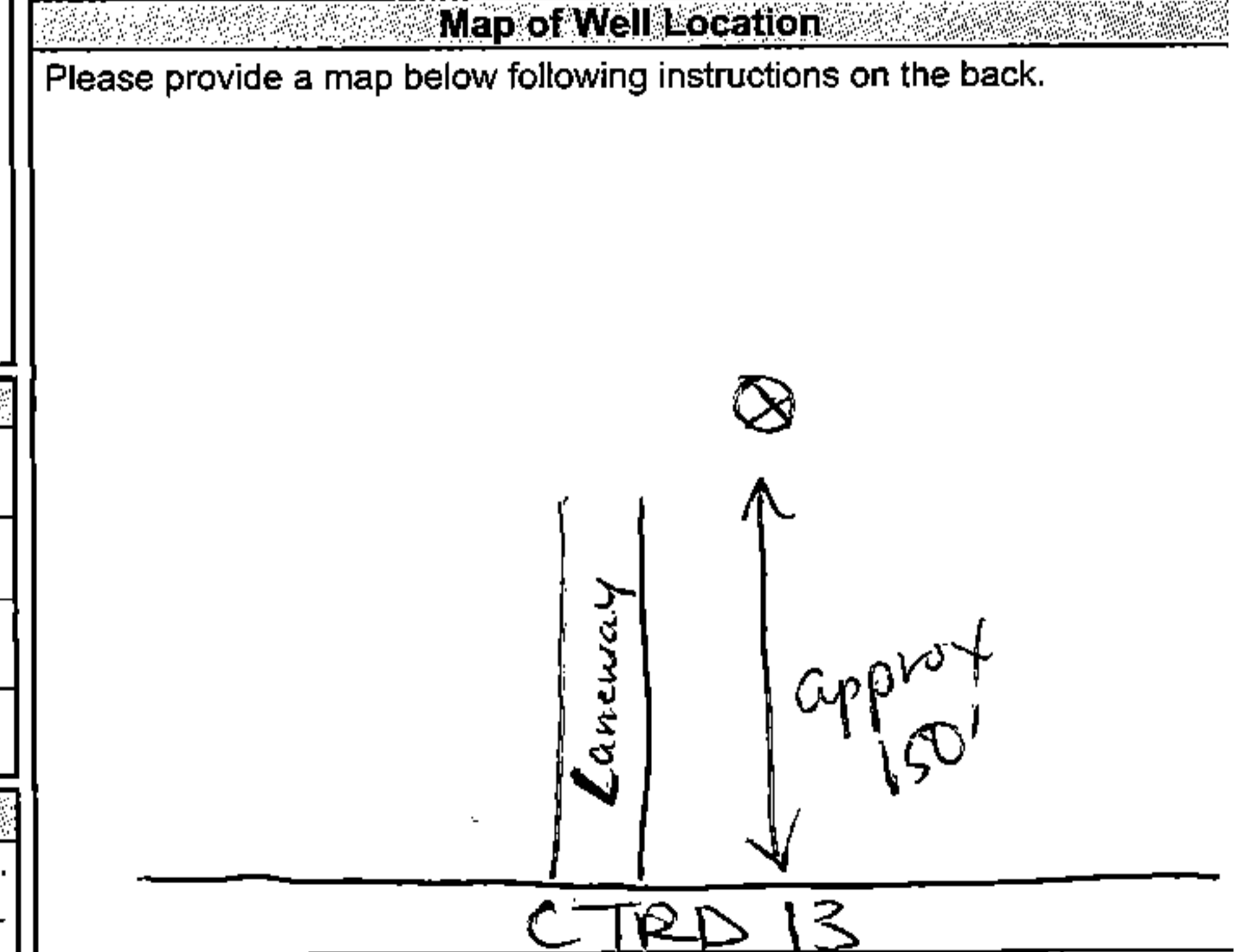
If flowing give rate (l/min / GPM): _____

Recommended pump depth (m/ft): 21

Recommended pump rate (l/min / GPM): 10

Well production (l/min / GPM): > 20 gpm

Disinfected? Yes No



Comments: _____

Well owner's information package delivered: Yes No

Date Package Delivered: YYY Y MM DD: 2019/11/24

Date Work Completed: 2019/11/24

Ministry Use Only

Audit No.: 318369

Received: DEC 04 2019

Measurements recorded in: Metric Imperial

A148270

Page _____ of _____

Address of Well Location (Street Number/Name) #3486 County Rd #13 South Marysburgh Pts 1+2 RPEIB P+L+1
 County/District/Municipality Prince Edward County City/Town/Village
 Township Township Concession
 Province Ontario Postal Code
 UTM Coordinates Zone Easting Northing NAD 83 18 33 75544866102 Municipal Plan and Sublot Number RP 47R2105
 Other

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
Black	Topsoil			0	0.3
Brown	Shale			0.3	0.6
Grey	Limestone			0.6	6.5

Annular Space

Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m ³ /ft ³)
0 to 2.5	Clay	20

Results of Well Yield Testing

After test of well yield, water was:	Draw Down		Recovery	
	Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
<input checked="" type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, specify				
If pumping discontinued, give reason:	Static Level	2.2		6.0
	1		1	
Pump intake set at (m/ft)	2	DUG WELL		
Pumping rate (l/min / GPM)	3		3	
	4	RESERVE		
Duration of pumping	5	7500 GALS		
	10		10	
Final water level end of pumping (m/ft)	15	RECOVERY		
	20	11	20	6 GPM
If flowing give rate (l/min / GPM)	25		25	
	30		30	
Recommended pump depth (m/ft)	40		40	
Recommended pump rate (l/min / GPM)	50		50	
Well production (l/min / GPM)	60	6.0	60	5.7
Disinfected?				
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Method of Construction

Cable Tool Diamond Public Commercial Not used
 Rotary (Conventional) Jetting Domestic Municipal Dewatering
 Rotary (Reverse) Driving Livestock Test Hole Monitoring
 Boring Digging Irrigation Cooling & Air Conditioning
 Air percussion Industrial
 Other, specify

Construction Record - Casing

Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		Status of Well
			From	To	
90	Concrete	3	0		<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify <input type="checkbox"/> Other, specify

Construction Record - Screen

Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details

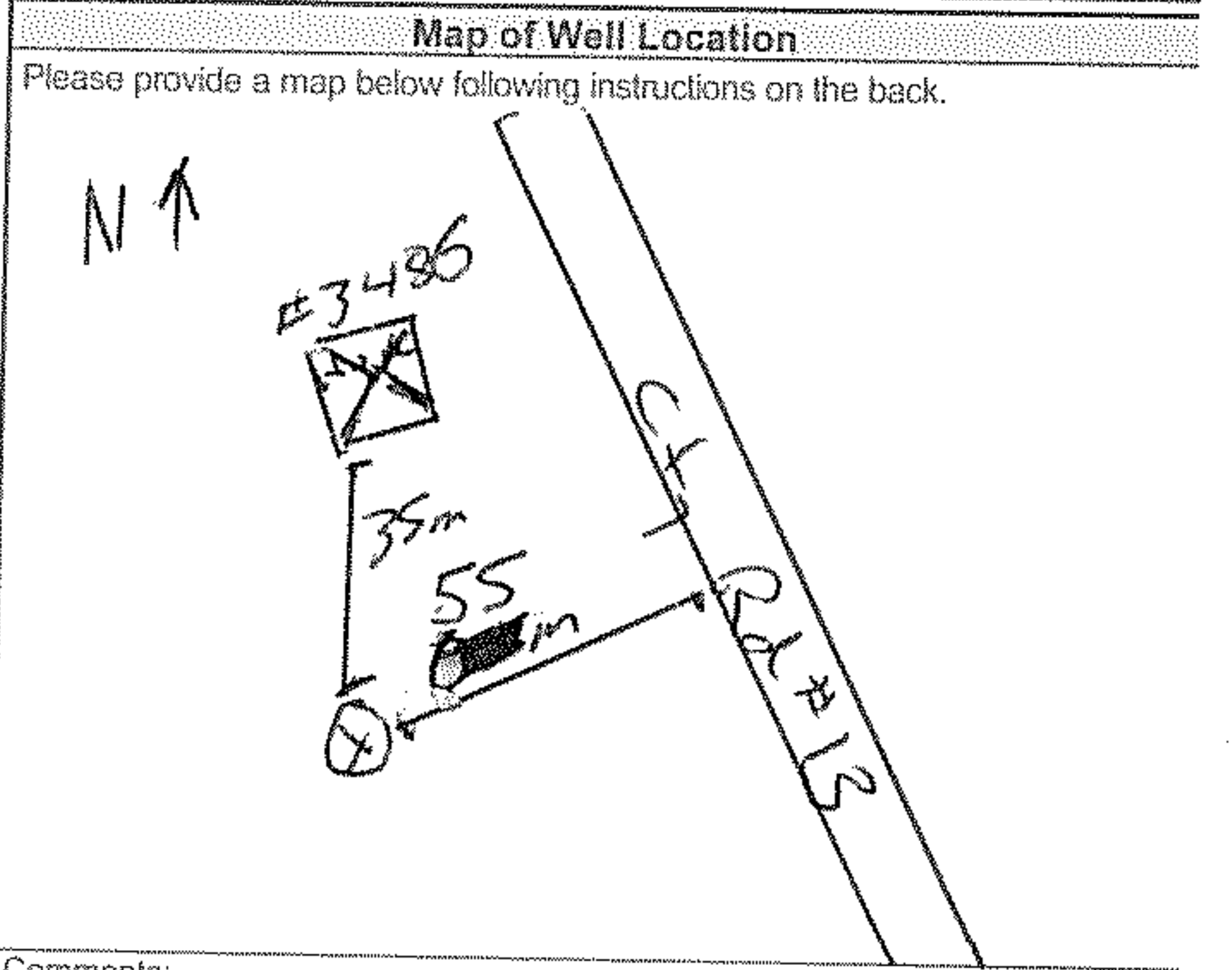
Water found at Depth (m/ft)	Kind of Water:
3.5 (m/ft)	<input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Untested <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify
	<input type="checkbox"/> Fresh <input type="checkbox"/> Untested <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify
	<input type="checkbox"/> Fresh <input type="checkbox"/> Untested <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify

Hole Diameter

Depth (m/ft)	Diameter (cm/in)		
		From	To

Well Contractor and Well Technician Information

Business Name of Well Contractor: Frank's Drilling & Blasting Ltd. Well Contractor's Licence No.: 6881
 Business Address (Street Number/Name): Box 100 Municipality: Newburgh
 Province: Ontario Postal Code: K0K2S0 Business E-mail Address: info@fdbltd.com
 Business Telephone No. (inc. area code): 4133782178 Name of Well Technician (Last Name, First Name): Greg Duce
 Well Technician's Licence No.: 2603 Signature: [Signature] Date Submitted: 2015 07 27



Well owner's information package delivered: Yes No

Date Package Delivered: 2015 06 30

Date Work Completed: 2015 06 30

Ministry Use Only

Audit No.: Z209326

Received: MAR 14 2016

Measurements recorded in: Metric Imperial

Tag#: A307956

Page _____ of _____

Address of Well Location (Street Number/Name): **3294 CTY RD #13**
 Township: **SOUTH MARYSBURGH** Lot: **PLOT 1** Concession: **Kawatawetafawabam**
 County/District/Municipality: **PRINCE EDWARD COUNTY** City/Town/Village: **MILFORD** Province: **Ontario** Postal Code: **K0K2P0**
 UTM Coordinates: Zone: **18** Easting: **18339172** Northing: **4866382** Municipal Plan and Sublot Number: **44R40A7**

Overburden and Bedrock Materials/Abandonment Sealing Record (See instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft) From	Depth (m/ft) To
DARK BROWN	TOPSOIL	GRASS → DIRT		0	15
GREY	LIMESTONE			15	6.99

Annular Space

Depth Set at (m/ft) From	Depth Set at (m/ft) To	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)
0	2.5	CLAY	20

Results of Well Yield Testing

Time (min)	Draw Down		Recovery	
	Water Level (m/ft)	Time (min)	Water Level (m/ft)	Time (min)
Static Level	3.07		6.6	
1		1		
2				
3				
4				
5		5		
10		10		
15		15		
20		20		
25		25		
30		30		
40	6.6	40		
50		50		
60		60	6.22	

After test of well yield, water was:
 Clear and sand free
 Other, specify _____
 If pumping discontinued, give reason: _____
 Pump intake set at (m/ft): **6.99**
 Pumping rate (l/min / GPM): **675**
 Duration of pumping: **40** min
 Final water level end of pumping (m/ft): **6.6**
 If flowing give rate (l/min/GPM): _____
 Recommended pump depth (m/ft): **6.99**
 Recommended pump rate (l/min/GPM): **50**
 Well production (l/min/GPM): **50**
 Disinfected? Yes No

Method of Construction

Cable Tool Diamond Public Commercial Not used
 Rotary (Conventional) Jetting Domestic Municipal Dewatering
 Rotary (Reverse) Driving Livestock Test Hole Monitoring
 Boring Digging Irrigation Cooling & Air Conditioning
 Air percussion Industrial Other, specify _____

Construction Record - Casing

Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		Status of Well
			From	To	
90	CONCRETE	7.6	0	6.99	<input checked="" type="checkbox"/> Water Supply <input checked="" type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____

Construction Record - Screen

Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details

Water found at Depth (m/ft)	Kind of Water: <input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Untested <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____	Hole Diameter	
		Depth (m/ft) From	Depth (m/ft) To
		Diameter (cm/in)	Diameter (cm/in)
4			

Well Contractor and Well Technician Information

Business Name of Well Contractor: **FRANK'S DRILLING & BLASTING LTD** Well Contractor's Licence No.: **6081811**
 Business Address (Street Number/Name): **P.O. BOX 100** Municipality: **NEWBURGH**
 Province: **ON** Postal Code: **K0K2S0** Business E-mail Address: **info@fdbhd.com**

Bus. Telephone No. (inc. area code): **613 348 2178** Name of Well Technician (Last Name, First Name): **PAUL GREG**
 Well Technician's Licence No.: **216103** Signature of Technician: _____ Date Submitted: **2021 07 12**

Map of Well Location

Please provide a map below following instructions on the back.

Comments:

Well owner's information package delivered: Yes No
 Date Package Delivered: **2021 07 12**
 Date Work Completed: **2021 07 12**

Ministry Use Only
 Audit No.: **Z358047**
 Received: **SEP 07 2021**

Instructions for Completing Form

- For use in the Province of Ontario only. This document is a permanent legal document. Please retain for future reference.
- All Sections must be completed in full to avoid delays in processing. Further instructions and explanations are available on the back of this form.
- Questions regarding completing this application can be directed to the Water Well Management Coordinator at 416-235-6203.
- All metre measurements shall be reported to 1/10th of a metre.
- Please print clearly in blue or black ink only.

Well Owner's Information and Location of Well Information

Ministry Use Only									
MUN								CON	LOT

RR#/Street Number/Name: **PRINCE EDWARD 3312 CTY RD 13**
 City/Town/Village: **SOUTH NEWBURN ON**
 Site/Compartment/Block/Tract etc.: **RPER**
 GPS Reading: NAD **83** Zone **18** Easting **532900** Northing **5866500**
 Unit Make/Model: **BAERMAN** Mode of Operation: Undifferentiated Averaged Differentiated, specify

Log of Overburden and Bedrock Materials (see instructions)

General Colour	Most common material	Other Materials	General Description	Depth From	Metres To
BROWN	TOP SOIL			0	0.3
GREY	SHALE			0.3	1.2
GREY	LIMESTONE			1.2	7.6

Handwritten note: (A) RATE OF PUMPING (A)

Hole Diameter

Depth From	Metres To	Diameter Centimetres

Construction Record

Inside diam centimetres	Material	Wall thickness centimetres	Depth Metres	
			From	To
91	<input checked="" type="checkbox"/> Concrete	9	0	7.6

Casing
 Steel Fibreglass
 Plastic Concrete
 Galvanized

Screen
 Outside diam Steel Fibreglass Plastic Concrete Galvanized

No Casing or Screen
 Open hole

Test of Well Yield

Pumping test method	Draw Down		Recovery	
	Time min	Water Level Metres	Time min	Water Level Metres
Pump intake set at - (metres) 7.6	Static Level	5.2		7.4
Pumping rate (litres/min) 585	1		1	
Duration of pumping hrs + 25 min	2		2	
Final water level end of pumping 7.4 metres	3		3	
Recommended pump type <input checked="" type="checkbox"/> Shallow <input type="checkbox"/> Deep	4		4	
Recommended pump depth 7.6 metres	5		5	
Recommended pump rate (litres/min) 58	10		10	
If flowing give rate (litres/min)	15	6.5	15	7.3
If pumping discontinued, give reason.	20		20	
	25	7.4	25	
	30		30	7.2
	40		40	
	50		50	7.15
	60		60	7.1

Water Record

Water found at **5** Metres / Kind of Water

Fresh Sulphur
 Gas Salty Minerals
 Other:

After test of well yield, water was Clear and sediment free Other, specify

Chlorinated Yes No

Plugging and Sealing Record Annular space Abandonment

Depth set at - Metres From	To	Material and type (bentonite slurry, neat cement slurry) etc.	Volume Placed (cubic metres)
0	2.5	CLAY	40

Method of Construction

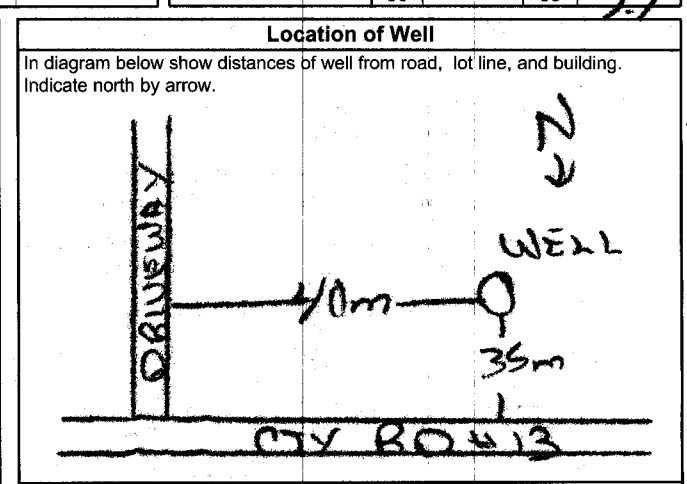
Cable Tool Rotary (air) Diamond Digging
 Rotary (conventional) Air percussion Jetting Other
 Rotary (reverse) Boring Driving

Water Use

Domestic Industrial Public Supply Other
 Stock Commercial Not used
 Irrigation Municipal Cooling & air conditioning

Final Status of Well

Water Supply Recharge well Unfinished Abandoned, (Other)
 Observation well Abandoned, insufficient supply Dewatering
 Test Hole Abandoned, poor quality Replacement well



Audit No. **Z 43451** Date Well Completed **2006 04 17**
 Was the well owner's information package delivered? Yes No Date Delivered **2006 05 01**

Well Contractor/Technician Information

Name of Well Contractor: **CRANKS DRILLING BLASTING** Well Contractor's Licence No.: **6881**
 Business Address (street name, number, city etc.): **Box 100 NEWBURN ON, K0K 2J0**
 Name of Well Technician (last name, first name): **TARR GERVÉ** Well Technician's Licence No.: **7-2603**
 Signature of Technician/Contractor: *[Signature]* Date Submitted: **2006 05 01**

Ministry Use Only

Data Source: Contractor **6881**
 Date Received: **JUN 06 2006** Date of Inspection: **2006 04 17**
 Remarks: Well Record Number

A311444

Measurements recorded in: Metric Imperial

Page _____ of _____

Address of Well Location (Street Number/Name) 3280 County Rd 13		Township	Lot	Concession	
County/District/Municipality Prince Edward County		City/Town/Village		Province Ontario	Postal Code K1G2T0
UTM Coordinates Zone, Easting, Northing NAD 83 18 338 725 486 6585		Municipal Plan and Sublot Number		Other	

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)				
General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft) From To
Brown	Topsoil			0 1
Grey	Flat Rock			1 20

Annular Space			
Depth Set at (m/ft) From To	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)	
0 10	Non Toxic Caulking		

Method of Construction		Well Use	
<input type="checkbox"/> Cable Tool	<input type="checkbox"/> Diamond	<input type="checkbox"/> Public	<input type="checkbox"/> Commercial
<input type="checkbox"/> Rotary (Conventional)	<input type="checkbox"/> Jetting	<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Municipal
<input type="checkbox"/> Rotary (Reverse)	<input type="checkbox"/> Driving	<input type="checkbox"/> Livestock	<input type="checkbox"/> Test Hole
<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Digging	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Cooling & Air Conditioning
<input type="checkbox"/> Air percussion		<input type="checkbox"/> Industrial	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Other, specify		<input type="checkbox"/> Other, specify	

Construction Record - Casing				Status of Well	
Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify <input type="checkbox"/> Other, specify
			From	To	
36	Concrete	4	0	20	

Construction Record - Screen				
Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details		Hole Diameter	
Water found at Depth 12 (m) <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify	Kind of Water: <input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Untested	Depth (m/ft) From To	Diameter (cm/in)
Water found at Depth (m/ft) <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify	Kind of Water: <input type="checkbox"/> Fresh <input type="checkbox"/> Untested		
Water found at Depth (m/ft) <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify	Kind of Water: <input type="checkbox"/> Fresh <input type="checkbox"/> Untested		

Well Contractor and Well Technician Information			
Business Name of Well Contractor QLogic Water LTD		Well Contractor's Licence No. 6524	
Business Address (Street Number/Name) 352 Marsh Rd		Municipality Belleville	
Province ON	Postal Code K8N4Z7	Business E-mail Address	

Bus. Telephone No. (inc. area code) 6138858696	Name of Well Technician (Last Name, First Name) Quigley, Jamie	Date Submitted 20210511
Well Technician's Licence No. 3913	Signature of Technician and/or Contractor	

Results of Well Yield Testing			
Time (min)	Water Level (m/ft)	Recovery	
		Time (min)	Water Level (m/ft)
1		1	
2			
3			
4			
5			
10			
15			
20			
25			
30			
40			
50			
60			

After test of well yield, water was:
 Clear and sand free
 Other, specify

If pumping discontinued, give reason:
Test Complete

Pump intake set at (m/ft): 19

Pumping rate (l/min / GPM): 115

Duration of pumping: 1 hrs + 0 min

Final water level end of pumping (m/ft): 16.5

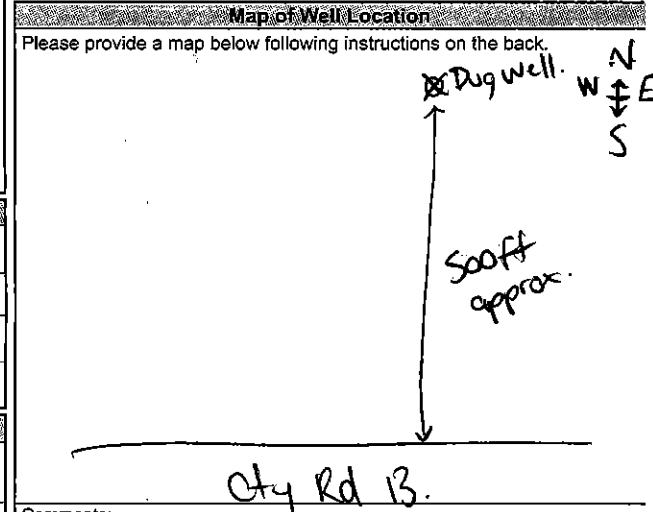
If flowing give rate (l/min/GPM):

Recommended pump depth (m/ft): 19

Recommended pump rate (l/min/GPM): 10

Well production (l/min/GPM): 16

Disinfected? Yes No



Comments: City Rd 13.

Well owner's information package delivered <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Package Delivered Y Y Y Y M M D D	Ministry Use Only Audit No. 2353459 Received: MAY 17 2021
	Date Work Completed 20210607	

A143 944

Measurements recorded in: Metric Imperial

Page _____ of _____

Address of Well Location (Street Number/Name) 3252 County Rd 13		Township South Margsbury	Lot P+Lot1	Concession RPEB
County/District/Municipality Prince Edward County		City/Town/Village Picton	Province Ontario	Postal Code K0K 2T0
UTM Coordinates NAD 83 18338594486659	Zone Easting 18338594	Northing 4486659	Municipal Plan and Sublot Number	

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
Black	Topsoil			0	0.9
Grey	Limestone			0.9	7.4

Annular Space

Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)
From: 0 To: 2.5	Clay	20

Results of Well Yield Testing

After test of well yield, water was: <input type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, specify _____	Draw Down		Recovery	
	Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
If pumping discontinued, give reason:	Static Level	4.2		4.87
	1		1	
Pump intake set at (m/ft) 7.4	2	DUG WELL		
Pumping rate (l/min / GPM) 585	3		3	
Duration of pumping hrs + 60 min	4	RESERVE		
Final water level end of pumping (m/ft) 4.8	5	7700 GALS		
If flowing give rate (l/min / GPM)	10		10	
	15	RECOVERY		
Recommended pump depth (m/ft)	20		20	
Recommended pump rate (l/min / GPM)	25	12	25	6 GPM
Well production (l/min / GPM) 58	30		30	
Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	40		40	
	50		50	
	60	4.87	60	4.81

Method of Construction

Well Use

<input type="checkbox"/> Cable Tool	<input type="checkbox"/> Diamond	<input type="checkbox"/> Public	<input type="checkbox"/> Commercial	<input type="checkbox"/> Not used
<input type="checkbox"/> Rotary (Conventional)	<input type="checkbox"/> Jetting	<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Rotary (Reverse)	<input type="checkbox"/> Driving	<input type="checkbox"/> Livestock	<input type="checkbox"/> Test Hole	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Digging	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Cooling & Air Conditioning	
<input type="checkbox"/> Air percussion		<input type="checkbox"/> Industrial		
<input type="checkbox"/> Other, specify _____		<input type="checkbox"/> Other, specify _____		

Construction Record - Casing

Status of Well

Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		Status of Well
			From	To	
90	Concrete	1.3	0	7.4	<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____

Construction Record - Screen

Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details

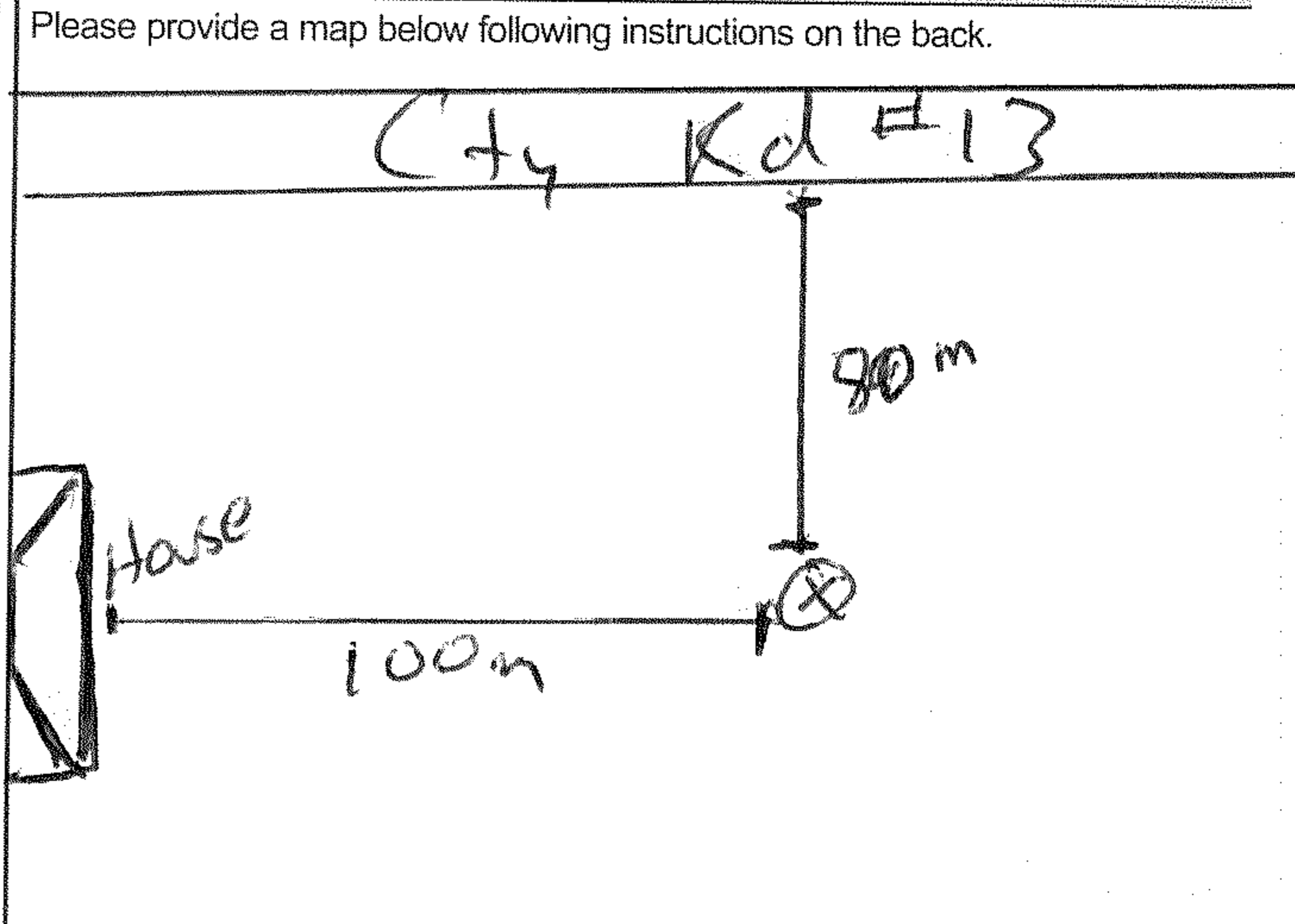
Hole Diameter

Water found at Depth (m/ft)	Kind of Water: <input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Untested	Depth (m/ft)		Diameter (cm/in)
		From	To	
5	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____			
	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____			
	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____			

Well Contractor and Well Technician Information

Business Name of Well Contractor Frank's Drilling & Blasting		Well Contractor's Licence No. 6881
Business Address (Street Number/Name) Box 100		Municipality Newburgh
Province Ontario	Postal Code K0K 2S0	Business E-mail Address info@fdh.com
Bus. Telephone No. (inc. area code) 6133782178	Name of Well Technician (Last Name, First Name) Pam Gae	
Well Technician's Licence No. 21603	Signature of Technician and/or Contractor	Date Submitted 20130910

Map of Well Location



Comments:

Well owner's information package delivered <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date Package Delivered 20130225	Ministry Use Only Audit No. 2171747 FEB 24 2014
Date Work Completed 20130228	Received	

A325205

Measurements recorded in: Metric Imperial

Address of Well Location (Street Number/Name) 3668 County Rd 13		Township Milford	Lot	Concession
County/District/Municipality Prince Edward County		City/Town/Village		Province Ontario
Postal Code K1K 2P0		Municipal Plan and Sublot Number		Other
UTM Coordinates Zone	Easting	Northing		
NAD 83	1183403974	8166145		

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
Brown/Grey	Shaley Topsoil			0	1
Grey	Rock			1	21

Annular Space		
Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)
From	To	
0	Non Toxic Caulking	

Method of Construction		Well Use		
<input type="checkbox"/> Cable Tool	<input type="checkbox"/> Diamond	<input type="checkbox"/> Public	<input type="checkbox"/> Commercial	<input type="checkbox"/> Not used
<input type="checkbox"/> Rotary (Conventional)	<input type="checkbox"/> Jetting	<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Rotary (Reverse)	<input type="checkbox"/> Driving	<input type="checkbox"/> Livestock	<input type="checkbox"/> Test Hole	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Digging	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Cooling & Air Conditioning	
<input type="checkbox"/> Air percussion		<input type="checkbox"/> Industrial		
<input type="checkbox"/> Other, specify _____		<input type="checkbox"/> Other, specify _____		

Construction Record - Casing				Status of Well	
Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____
			From	To	
36	Concrete	4	0	21	

Construction Record - Screen				
Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details		Hole Diameter	
Water found at Depth (m/ft)	Kind of Water: <input type="checkbox"/> Fresh <input checked="" type="checkbox"/> Untested	Depth (m/ft)	Diameter (cm/in)
	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____	From	To
11			
17			

Well Contractor and Well Technician Information			
Business Name of Well Contractor Ologic Water Ltd.		Well Contractor's Licence No. 7717	
Business Address (Street Number/Name) 352 Marsh Rd		Municipality Belleville	
Province ON	Postal Code K8N 4Z7	Business E-mail Address	

Well Contractor and Well Technician Information		
Bus. Telephone No. (inc. area code) 613 885 8696	Name of Well Technician (Last Name, First Name) Quigley, James	
Well Technician's Licence No. 3913	Signature of Technician and/or Contractor	Date Submitted 20210929

Results of Well Yield Testing					
After test of well yield, water was:		Draw Down		Recovery	
<input checked="" type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, specify _____		Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
If pumping discontinued, give reason: Test Complete		Static Level			
Pump intake set at (m/ft) 19		1			
Pumping rate (l/min / GPM) 128		2			
Duration of pumping 1 hrs + 0 min		3			
Final water level end of pumping (m/ft) 18.5		4			
If flowing give rate (l/min/GPM)		5			
Recommended pump depth (m/ft) 19		10			
Recommended pump rate (l/min/GPM) 10		15			
Well production (l/min/GPM) 4		20			
Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		25			
		30			
		40			
		50			
		60			

Handwritten notes:
This is a Dog well with a flow rate of approx 4 gpm. Fan approx reserve of 700 g/L.

Map of Well Location	
Please provide a map below following instructions on the back.	
Comments: City Rd 13.	

Well owner's information package delivered		Date Package Delivered		Ministry Use Only	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Y Y Y Y	M M D D	Audit No:	2361846
		Date Work Completed		Received:	NOV 12 2021
		20210928			

Instructions for Completing Form

- For use in the **Province of Ontario** only. This document is a permanent **legal** document. Please retain for future reference.
- All Sections **must** be completed in full to avoid delays in processing. Further instructions and explanations are available on the back of this form.
- Questions regarding completing this application can be directed to the Water Well Management Coordinator at 416-235-6203.
- **All metre measurements shall be reported to 1/10th of a metre.**
- Please print clearly in blue or black ink only.

Well Owner's Information and Location of Well Information

Ministry Use Only											
MUN										CON	LOT

PRINCE EDWARD City/Town/Village **LONG POINT** Site/Compartment/Block/Tract etc. **LOTA SPEB**
 RR#/Street Number/Name **3598 QTY RD 13**
 GPS Reading NAD Zone Easting Northing Unit Make/Model Mode of Operation:
 8.3 18 339990 3866019 BARRM Undifferentiated Averaged
 Differentiated, specify

Log of Overburden and Bedrock Materials (see instructions)

General Colour	Most common material	Other Materials	General Description	Depth Metres	
				From	To
BROWN	TOPSOIL			0	0.3
GREY	SHALE			0.3	0.9
GREY	LIMESTONE			0.9	6.9

Hole Diameter		
Depth	Metres	Diameter
From	To	Centimetres

Construction Record					
Inside diam centimetres	Material	Wall thickness centimetres	Depth Metres		
			From	To	
Casing					
91	<input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Galvanized	9	0	6.9	
Screen					
Outside diam	<input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Galvanized	Slot No.			
No Casing or Screen					
<input type="checkbox"/> Open hole					

Test of Well Yield				
Pumping test method	Draw Down		Recovery	
	Time min	Water Level Metres	Time min	Water Level Metres
Pump				
Pump intake set at (metres)	6.9	3.3	6.3	
Pumping rate (litres/min)	585			
Duration of pumping hrs + min	2		2	
Final water level end of pumping (metres)	6.3		3	
Recommended pump type	Deep		4	
Recommended pump depth (metres)	6.9		5	
Recommended pump rate (litres/min)	59	4.6	15	6.0
If flowing give rate (litres/min)	20		20	
If pumping discontinued, give reason.	30	5.9	30	5.9
	40	6.3	40	5.85
	50		50	5.8
	60		60	5.8

Water Record
 Water found at **4** Metres / Kind of Water
 Fresh Sulphur
 Gas Salty Minerals
 Other:
 Fresh Sulphur
 Gas Salty Minerals
 Other:
 After test of well yield, water was
 Clear and sediment free
 Other, specify
 Chlorinated Yes No

Plugging and Sealing Record			<input checked="" type="checkbox"/> Annular space	<input type="checkbox"/> Abandonment
Depth set at - Metres	Material and type (bentonite slurry, neat cement slurry) etc.	Volume Placed (cubic metres)		
From	To			
0	2.5 CLAY	40		

Method of Construction
 Cable Tool Rotary (air) Diamond Digging
 Rotary (conventional) Air percussion Jetting Other
 Rotary (reverse) Boring Driving

Water Use
 Domestic Industrial Public Supply Other
 Stock Commercial Not used
 Irrigation Municipal Cooling & air conditioning

Final Status of Well
 Water Supply Recharge well Unfinished Abandoned, (Other)
 Observation well Abandoned, insufficient supply Dewatering
 Test Hole Abandoned, poor quality Replacement well

Well Contractor/Technician Information
 Name of Well Contractor **FRANKS DRILLING BLASTING** Well Contractor's Licence No. **6881**
 Business Address (street name, number, city etc.) **Box 100 NEWBURGH, ONT. L9K 2S0**
 Name of Well Technician (last name, first name) **FRANK ORSBY** Well Technician's Licence No. **2-2003**
 Signature of Technician/Contractor **[Signature]** Date Submitted **2006 05 23**

Location of Well
 In diagram below show distances of well from road, lot line, and building. Indicate north by arrow.

CTY RD 13
 Audit No. **Z 43456** Date Well Completed **2006 05 09**
 Was the well owner's information package delivered? Yes No Date Delivered **2006 05 23**

Ministry Use Only
 Data Source Contractor **6881**
 Date Received **JUN 06 2006** Date of Inspection **2006 05 23**
 Remarks Well Record Number

A325205

Measurements recorded in: Metric Imperial

Address of Well Location (Street Number/Name) 3668 County Rd 13		Township Milford	Lot	Concession
County/District/Municipality Prince Edward County		City/Town/Village		Province Ontario
Postal Code K6K 2P0		Municipal Plan and Sublot Number		Other
UTM Coordinates Zone	Easting	Northing		
NAD 83	1183403974	8166145		

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
Brown/Grey	Shaley Topsoil			0	1
Grey	Rock			1	21

Annular Space		
Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)
From	To	
0	Non Toxic Caulking	

Method of Construction		Well Use		
<input type="checkbox"/> Cable Tool	<input type="checkbox"/> Diamond	<input type="checkbox"/> Public	<input type="checkbox"/> Commercial	<input type="checkbox"/> Not used
<input type="checkbox"/> Rotary (Conventional)	<input type="checkbox"/> Jetting	<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Dewatering
<input type="checkbox"/> Rotary (Reverse)	<input type="checkbox"/> Driving	<input type="checkbox"/> Livestock	<input type="checkbox"/> Test Hole	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Digging	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Cooling & Air Conditioning	
<input type="checkbox"/> Air percussion		<input type="checkbox"/> Industrial		
<input type="checkbox"/> Other, specify _____		<input type="checkbox"/> Other, specify _____		

Construction Record - Casing				Status of Well	
Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____
			From	To	
36	Concrete	4	0	21	

Construction Record - Screen				
Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details		Hole Diameter	
Water found at Depth (m/ft)	Kind of Water: <input type="checkbox"/> Fresh <input checked="" type="checkbox"/> Untested	Depth (m/ft)	Diameter (cm/in)
		From	To
11	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____		
17	<input checked="" type="checkbox"/> Fresh <input checked="" type="checkbox"/> Untested		
	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____		

Well Contractor and Well Technician Information			
Business Name of Well Contractor Ologic Water Ltd.		Well Contractor's Licence No. 7717	
Business Address (Street Number/Name) 352 Marsh Rd		Municipality Belleville	
Province ON	Postal Code K8N 4Z7	Business E-mail Address	

Bus. Telephone No. (inc. area code) 613 885 8696	Name of Well Technician (Last Name, First Name) Quigley, James	Well Technician's Licence No. 3913	Signature of Technician and/or Contractor <i>[Signature]</i>	Date Submitted 20210929
---	---	---------------------------------------	---	----------------------------

Results of Well Yield Testing					
After test of well yield, water was:		Draw Down		Recovery	
<input checked="" type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, specify _____		Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
If pumping discontinued, give reason: Test Complete		Static Level			
Pump intake set at (m/ft) 19		1			
Pumping rate (l/min / GPM) 128		2			
Duration of pumping 1 hrs + 0 min		3			
Final water level end of pumping (m/ft) 18.5		4			
If flowing give rate (l/min/GPM)		5			
Recommended pump depth (m/ft) 19		10			
Recommended pump rate (l/min/GPM) 10		15			
Well production (l/min/GPM) 4		20			
Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		25			
		30			
		40			
		50			
		60			

Handwritten notes:
 This is a Dog well with a flow rate of approx 4 gpm. Fan approx reserve of 700 g/L.

Map of Well Location	
Please provide a map below following instructions on the back.	
Comments:	

Well owner's information package delivered	Date Package Delivered	Ministry Use Only	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Y Y Y Y M M D D 20210928	Audit No:	3361846
	Date Work Completed	Received	NOV 12 2021

Measurements recorded in: Metric Imperial

A075912

Page _____ of _____

Address of Well Location (Street Number/Name): **4039 COUNTY RD 13**
 Township: **SOUTH MARYSBURGH** Lot: **PT LOT F+G** Concession: _____
 County/District/Municipality: **PRINCE EDWARD COUNTY** City/Town/Village: _____ Province: **Ontario** Postal Code: **K0K2P0**
 UTM Coordinates: Zone: **18** Easting: **341999** Northing: **4866893** Municipal Plan and Sublot Number: **47R 5275**

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)	
				From	To
Gray	STONE			0	2
Gray	Limestone			2	12

Annular Space

Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m ³ /ft ³)
0 to 8	NON TOXIC CAULKING	

Method of Construction

Cable Tool Diamond Public Commercial Not used
 Rotary (Conventional) Jetting Municipal Dewatering
 Rotary (Reverse) Driving Livestock Test Hole Monitoring
 Boring Digging Irrigation Cooling & Air Conditioning
 Air percussion Industrial Other, specify _____
 Other, specify _____

Construction Record - Casing

Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)		Status of Well
			From	To	
36"	CONCRETE	4"	0	12'	<input checked="" type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify _____ <input type="checkbox"/> Other, specify _____

Construction Record - Screen

Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)	
			From	To

Water Details

Water found at Depth (m/ft)	Kind of Water: <input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Untested
4	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____
	<input type="checkbox"/> Fresh <input type="checkbox"/> Untested
	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____
	<input type="checkbox"/> Fresh <input type="checkbox"/> Untested
	<input type="checkbox"/> Gas <input type="checkbox"/> Other, specify _____

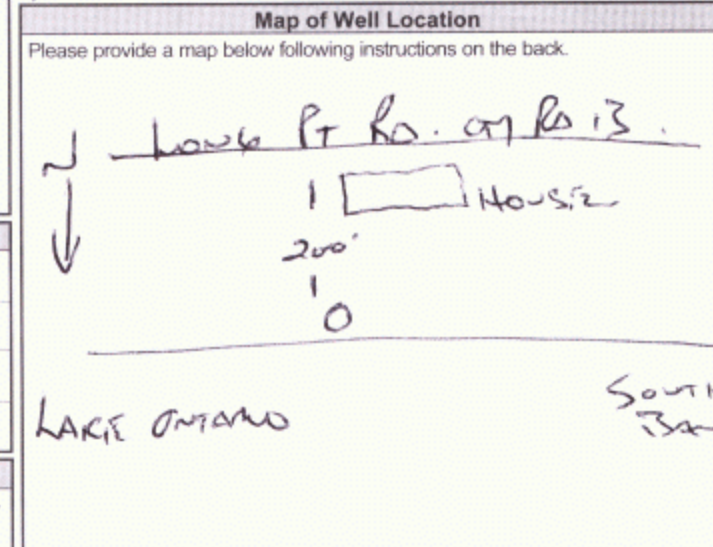
Well Contractor and Well Technician Information

Business Name of Well Contractor: **QUOLIC WATER SOLUTIONS** Well Contractor's Licence No.: **6524**
 Business Address (Street Number/Name): **352 MARKET ROAD** Municipality: **BRUNSWICK**
 Province: **ONT.** Postal Code: **K8N4Z7** Business E-mail Address: _____
 Bus. Telephone No. (inc. area code): **613 922 7474** Name of Well Technician (Last Name, First Name): **Kim Dill**
 Well Technician's Licence No.: **T1850** Signature of Technician and/or Contractor: _____ Date Submitted: **2008 10 31**

Results of Well Yield Testing

After test of well yield, water was: <input checked="" type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, specify _____	Draw Down		Recovery	
	Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
If pumping discontinued, give reason: TEST COMPLETE Pump intake set at (m/ft): 12 Pumping rate (l/min / GPM): 10 Duration of pumping: 1 hrs + _____ min Final water level end of pumping (m/ft): 10 FT If flowing give rate (l/min / GPM): 10 Recommended pump depth (m/ft): 12 Recommended pump rate (l/min / GPM): 10 Well production (l/min / GPM): 10 Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Static Level			
	1			
	2			
	3			
	4			
	5			
	10		10	
	15		15	
	20		20	
	25		25	
	30		30	
	40		40	
	50		50	
	60		60	

THIS IS A DUB WELLS WITH A RESERVE OF 2100 GALLONS AND A FLOW RATE OF 10 GPM



Comments: _____

Well owner's information package delivered: Yes No

Date Package Delivered: **2008 10 17**

Date Work Completed: _____

Ministry Use Only

Audit No. **Z 82365**

Received **NOV 07 2008**

1. PRINT ONLY IN SPACES PROVIDED
2. CHECK CORRECT BOX WHERE APPLICABLE

11

5306099

MUNICIPALITY 53006

CON. BR. N

COUNTY OR DISTRICT: [REDACTED] TOWNSHIP, BOROUGH, CITY, TOWN, VILLAGE: MARYSBURG NBR. PART 15
DATE COMPLETED: DAY 25 MO 11 YR 94
FITZPATRICK ST ORLEANS ONT K1E 3L7

LOG OF OVERBURDEN AND BEDROCK MATERIALS (SEE INSTRUCTIONS)

GENERAL COLOUR	MOST COMMON MATERIAL	OTHER MATERIALS	GENERAL DESCRIPTION	DEPTH - FEET	
				FROM	TO
BROWN	TOP SOIL		SOFT	0	2
GREY	LIMESTONE		HARD	2	125

31
32

41 WATER RECORD

WATER FOUND AT - FEET	KIND OF WATER
10-13	1 <input type="checkbox"/> FRESH 3 <input type="checkbox"/> SULPHUR 2 <input type="checkbox"/> SALTY 4 <input type="checkbox"/> MINERALS 6 <input type="checkbox"/> GAS
15-18	1 <input type="checkbox"/> FRESH 3 <input type="checkbox"/> SULPHUR 2 <input type="checkbox"/> SALTY 4 <input type="checkbox"/> MINERALS 6 <input type="checkbox"/> GAS
20-23	1 <input type="checkbox"/> FRESH 3 <input type="checkbox"/> SULPHUR 2 <input type="checkbox"/> SALTY 4 <input type="checkbox"/> MINERALS 6 <input type="checkbox"/> GAS
25-28	1 <input type="checkbox"/> FRESH 3 <input type="checkbox"/> SULPHUR 2 <input type="checkbox"/> SALTY 4 <input type="checkbox"/> MINERALS 6 <input type="checkbox"/> GAS
30-33	1 <input type="checkbox"/> FRESH 3 <input type="checkbox"/> SULPHUR 2 <input type="checkbox"/> SALTY 4 <input type="checkbox"/> MINERALS 6 <input type="checkbox"/> GAS

51 CASING & OPEN HOLE RECORD

INSIDE DIAM INCHES	MATERIAL	WALL THICKNESS INCHES	DEPTH - FEET	
			FROM	TO
8	1 <input type="checkbox"/> STEEL 2 <input type="checkbox"/> GALVANIZED 3 <input type="checkbox"/> CONCRETE 4 <input type="checkbox"/> OPEN HOLE 5 <input type="checkbox"/> PLASTIC		0	20
6 1/4	1 <input type="checkbox"/> STEEL 2 <input type="checkbox"/> GALVANIZED 3 <input type="checkbox"/> CONCRETE 4 <input type="checkbox"/> OPEN HOLE 5 <input type="checkbox"/> PLASTIC	.188	0	20
6 1/8	1 <input type="checkbox"/> STEEL 2 <input type="checkbox"/> GALVANIZED 3 <input type="checkbox"/> CONCRETE 4 <input type="checkbox"/> OPEN HOLE 5 <input type="checkbox"/> PLASTIC		20	125

SCREEN

SIZE OF OPENING (SLOT NO.)	DIAMETER INCHES	LENGTH FEET

61 PLUGGING & SEALING RECORD

DEPTH SET AT - FEET	MATERIAL AND TYPE	CEMENT GROUT LEAD PACKER, ETC.
0-20	CEMENT GROUT	

71 PUMPING TEST

PUMPING TEST METHOD: 1 PUMP 2 BAILER

PUMPING RATE: _____ GPM

DURATION OF PUMPING: 15-16 HOURS 17-18 MINS

STATIC LEVEL: _____ FEET

WATER LEVELS DURING PUMPING: 19-21, 22-24, 25-28, 29-31, 32-34, 35-37 FEET

IF FLOWING, GIVE RATE: _____ GPM

PUMP INTAKE SET AT: _____ FEET

WATER AT END OF TEST: _____ FEET

RECOMMENDED PUMP TYPE: 1 CLEAR 2 CLOUDY

RECOMMENDED PUMP SETTING: _____ FEET

RECOMMENDED PUMPING RATE: _____ GPM

LOCATION OF WELL

IN DIAGRAM BELOW SHOW DISTANCES OF WELL FROM ROAD AND LOT LINE INDICATE NORTH BY ARROW

3350 COUNTY RD 17

1540

BLACK RIVER 147296

FINAL STATUS OF WELL

1 WATER SUPPLY 5 ABANDONED, INSUFFICIENT SUPPLY
2 OBSERVATION WELL 6 ABANDONED POOR QUALITY
3 TEST HOLE 7 UNFINISHED
4 RECHARGE WELL DEWATERING

WATER USE

1 DOMESTIC 5 COMMERCIAL
2 STOCK 6 MUNICIPAL
3 IRRIGATION 7 PUBLIC SUPPLY
4 INDUSTRIAL 8 COOLING OR AIR CONDITIONING
 OTHER 9 NOT USED

METHOD OF CONSTRUCTION

1 CABLE TOOL 6 BORING
2 ROTARY (CONVENTIONAL) 7 DIAMOND
3 ROTARY (REVERSE) 8 JETTING
4 ROTARY (AIR) 9 DRIVING
5 AIR PERCUSSION DIGGING OTHER

CONTRACTOR

NAME OF WELL CONTRACTOR: PRINCE EDWARD WELL DRILLERS
ADDRESS: RR. 3 PILTON KOK 2 T O
NAME OF WELL TECHNICIAN: Ross Bronson
SIGNATURE OF TECHNICIAN/CONTRACTOR: [Signature]

WELL CONTRACTOR'S LICENSE NUMBER: 6005
WELL TECHNICIAN'S LICENSE NUMBER: 621
SUBMISSION DATE: DAY 26 NO 11 YR 94

OFFICE USE ONLY

DATA SOURCE: 58 CONTRACTOR: 59-62 DATE RECEIVED: 63-66

6005 DEC 12 1994

DATE OF INSPECTION: _____ INSPECTOR: _____

REMARKS: _____



A046584
A046584

Instructions for Completing Form

- For use in the Province of Ontario only. This document is a permanent legal document. Please retain for future reference.
- All Sections must be completed in full to avoid delays in processing. Further instructions and explanations are available on the back of this form.
- Questions regarding completing this application can be directed to the Water Well Management Coordinator at 416-235-6203.
- All metre measurements shall be reported to 1/10th of a metre.
- Please print clearly in blue or black ink only.

Ministry Use Only

Address of well Location (County/District/Municipality) **PRINCE EDWARD** Township **SOUTH MARYSBURGH TND** Lot **SPE B** Concession

RR#/Street Number/Name **3853 CTY RD 13** City/Town/Village Site/Compartment/Block/Tract etc.

GPS Reading NAD **83** Zone **18** Easting **342189** Northing **586622** Unit Make/Model **GARMIN** Mode of Operation: Undifferentiated Averaged Differentiated, specify

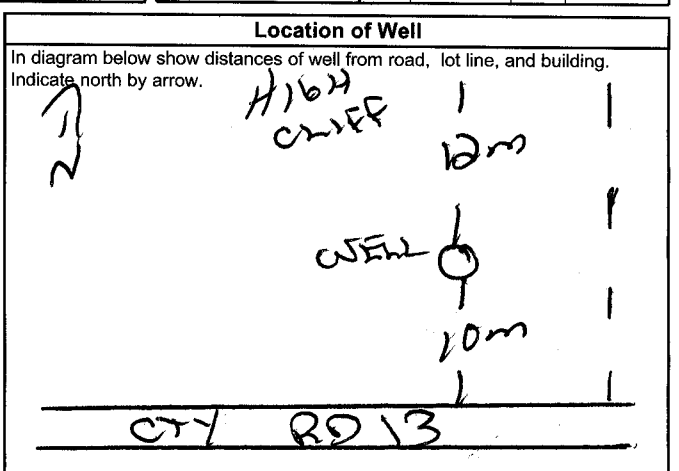
Log of Overburden and Bedrock Materials (see instructions)

General Colour	Most common material	Other Materials	General Description	Depth Metres	
				From	To
	BLACK TOPSOIL			0	-3
	GRAY LIMESTONE			-3	6.4

Hole Diameter			Construction Record				Test of Well Yield					
Depth From	Metres To	Diameter Centimetres	Inside diam centimetres	Material	Wall thickness centimetres	Depth From	Metres To	Pumping test method	Draw Down Time min	Water Level Metres	Recovery Time min	Water Level Metres
				91	<input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Galvanized	9	0	Pump		4.9		
Water Record			Casing				Test of Well Yield					
Water found at 4 metres	Kind of Water		<input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Galvanized				Pump intake set at - (metres) 6.4 Static Level 4.9					
<input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Sulphur <input type="checkbox"/> Gas <input type="checkbox"/> Salty <input type="checkbox"/> Minerals <input type="checkbox"/> Other:			<input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Galvanized				Pumping rate - (litres/min) 585					
<input type="checkbox"/> m <input type="checkbox"/> Fresh <input type="checkbox"/> Sulphur <input type="checkbox"/> Gas <input type="checkbox"/> Salty <input type="checkbox"/> Minerals <input type="checkbox"/> Other:			<input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Galvanized				Duration of pumping hrs + 20 min					
<input type="checkbox"/> m <input type="checkbox"/> Fresh <input type="checkbox"/> Sulphur <input type="checkbox"/> Gas <input type="checkbox"/> Salty <input type="checkbox"/> Minerals <input type="checkbox"/> Other:			Screen				Final water level end of pumping 6.3 metres					
After test of well yield, water was <input checked="" type="checkbox"/> Clear and sediment free <input type="checkbox"/> Other, specify			Outside diam <input type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Galvanized Slot No.				Recommended pump type <input checked="" type="checkbox"/> Shallow <input type="checkbox"/> Deep					
Chlorinated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			No Casing or Screen				Recommended pump depth. 6.4 metres					
			<input type="checkbox"/> Open hole				Recommended pump rate. (litres/min) 15					
							If flowing give rate - (litres/min) 6-3					
							If pumping discontinued, give reason.					

Plugging and Sealing Record Annular space Abandonment

Depth set at - Metres From	To	Material and type (bentonite slurry, neat cement slurry) etc.	Volume Placed (cubic metres)
0	2.5	CLAY	40



Method of Construction

Cable Tool Rotary (air) Diamond Digging

Rotary (conventional) Air percussion Jetting Other

Rotary (reverse) Boring Driving

Water Use

Domestic Industrial Public Supply Other

Stock Commercial Not used

Irrigation Municipal Cooling & air conditioning

Final Status of Well

Water Supply Recharge well Unfinished Abandoned, (Other)

Observation well Abandoned, insufficient supply Dewatering

Test Hole Abandoned, poor quality Replacement well

Audit No. **2 52445** Date Well Completed **2006 07 28**

Was the well owner's information package delivered? Yes No Date Delivered **2006 08 14**

Well Contractor/Technician Information

Name of Well Contractor **FRANK DREILING & SEASTING** Well Contractor's Licence No. **6881**

Business Address (street name, number, city etc.) **Box 100 NEWBURGH, K0K-2J0**

Name of Well Technician (last name, first name) **JARR BRUB** Well Technician's Licence No. **7-2803**

Signature of Technician/Contractor **[Signature]** Date Submitted **2006 08 14**

Ministry Use Only

Data Source Contractor **6881**

Date Received **AUG 21 2006** Date of Inspection **2006 07 28**

Remarks **Date of Well Completed via fax 2006/07/28** Well Record Number

Print only in spaces provided.
Mark correct box with a checkmark, where applicable.

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5306690

Municipality
53006

Con
PEB S

County or District: **PRINCE EDWARD COUNTY** Township/Borough/City/Town/Village: **SOUTH MARYSBURGH** Con block tract survey, etc.: **SPEB** Lot: **D**
Address: **RR# 3 PICTON** Date completed: **08 06 00**
day month year

LOG OF OVERBURDEN AND BEDROCK MATERIALS (see instructions)

General colour	Most common material	Other materials	General description	Depth - feet	
				From	To
BLACK	TOPSOIL			0	1
GREY	LIME STONE		HARD	1	20

31
32

41 WATER RECORD

Water found at - feet	Kind of water
10'	<input checked="" type="checkbox"/> Fresh <input type="checkbox"/> Salty
	<input type="checkbox"/> Sulphur <input type="checkbox"/> Minerals <input type="checkbox"/> Gas
	<input type="checkbox"/> Fresh <input type="checkbox"/> Salty
	<input type="checkbox"/> Sulphur <input type="checkbox"/> Minerals <input type="checkbox"/> Gas
	<input type="checkbox"/> Fresh <input type="checkbox"/> Salty
	<input type="checkbox"/> Sulphur <input type="checkbox"/> Minerals <input type="checkbox"/> Gas
	<input type="checkbox"/> Fresh <input type="checkbox"/> Salty
	<input type="checkbox"/> Sulphur <input type="checkbox"/> Minerals <input type="checkbox"/> Gas

51 CASING & OPEN HOLE RECORD

Inside diam inches	Material	Wall thickness inches	Depth - feet	
			From	To
36"	<input type="checkbox"/> Steel <input checked="" type="checkbox"/> Galvanized <input type="checkbox"/> Concrete <input type="checkbox"/> Open hole <input type="checkbox"/> Plastic	3"	0	20
	<input type="checkbox"/> Steel <input type="checkbox"/> Galvanized <input type="checkbox"/> Concrete <input type="checkbox"/> Open hole <input type="checkbox"/> Plastic			
	<input type="checkbox"/> Steel <input type="checkbox"/> Galvanized <input type="checkbox"/> Concrete <input type="checkbox"/> Open hole <input type="checkbox"/> Plastic			

SCREEN

Sizes of opening (Slot No.)	Diameter inches	Length feet
Material and type		Depth at top of screen feet

61 PLUGGING & SEALING RECORD

Annular space Abandonment

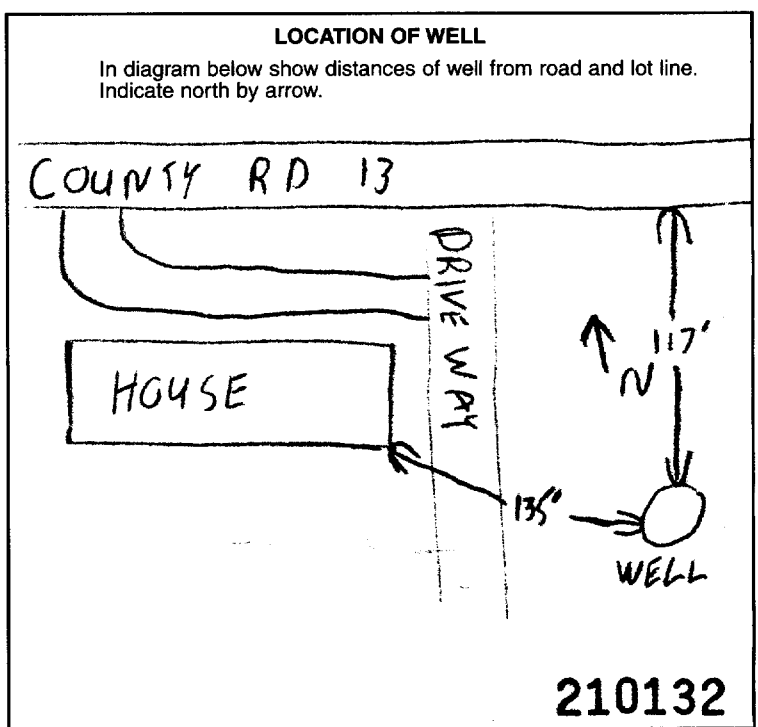
Depth set at - feet		Material and type (Cement grout, bentonite, etc.)
From	To	
0	8	CLAY

71 PUMPING TEST

Pumping test method: Pump Bailor
Pumping rate: **130** GPM
Duration of pumping: **45** Mins

Static level	Water level end of pumping	Water levels during			
6'5"	19'8"	15 minutes	30 minutes	45 minutes	60 minutes
		10'4"	14'5"	19'8"	

If flowing give rate: **20** GPM
Pump intake set at: **19'6"** feet
Water at end of test: Clear Cloudy
Recommended pump type: Shallow Deep
Recommended pump setting: **11** GPM



FINAL STATUS OF WELL

Water supply
 Observation well
 Test hole
 Recharge well

Abandoned, insufficient supply
 Abandoned, poor quality
 Abandoned (Other)
 Dewatering

Unfinished
 Replacement well

WATER USE

Domestic
 Stock
 Irrigation
 Industrial

Commercial
 Municipal
 Public supply
 Cooling & air conditioning

Not use
 Other

METHOD OF CONSTRUCTION

Cable tool
 Rotary (conventional)
 Rotary (reverse)
 Rotary (air)

Air percussion
 Boring
 Diamond
 Jetting

Drilling
 Digging
 Other

Name of Well Contractor: **FRANK'S DRILLING + PLASTING** Well Contractor's Licence No.: **6881**
Address: **BOX 100 NEWBURGH ONT**

Name of Well Technician: **WAYNE KENNEDY** Well Technician's Licence No.: **T-2605**
Signature of Technician/Contractor: *Wayne Kennedy* Submission date: **04 06 00**
day mo yr

MINISTRY USE ONLY

Data source: **6881** Date received: **JUN 20 2000**

Date of inspection: Inspector: **CSS.ES0**

Remarks:



- Legend**
- - - approximate site boundary
 - approximate location of dug supply well
 - approximate location of drilled supply well
 - approximate location of dry / abandoned supply well

Data Sources: Figure based on Malroz field observations, Google Earth imagery and MECP water well records.

D0	2024-05-17	issued in final	BB	JMP
Rev	Date	Description	By	Chkd

Site Location Plan

Shore and Dug Well Evaluation
Half Moon Bay, Prince Edward County, ON

Table 1
Summary of Dug Supply Wells

Well ID	5306545	5307560	7216754	7348720	7348731	7378367	7387378	7396556	7259207	5307559	7402955	5306690	5307611	7114578
Year Completed	1999	2006	2013	2019	2019	2021	2021	2021	2015	2006	2021	2000	2006	2008
Depth to Water (m)	2.89	5.00	5.00	4.57	4.57	2.74	3.65	4.00	3.50	4.00	3.35	3.04	4.00	1.21
Depth to Bottom (m)	3.81	7.60	7.40	6.71	6.86	5.49	6.10	6.99	6.50	6.90	6.40	6.10	6.40	3.66
Distance and Direction From Property Boundary	1408 m SW	216 m SW	328 m SW	117 m SW	249 m SW	On-Site	262 m SW	56 m SW	452 m SE	820 m SE	1174 m SE	1947 m E	1952 m E	2775 m E
Recommend Pumping Rate (L/min)	37.85	58.00	-	37.85	37.85	37.85	37.85	-	-	59.00	37.85	41.64	-	37.85
Well Construction	Dug (Shoreline)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Shoreline)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Inland)	Dug (Shoreline)
Well Completed In	White Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone	Grey Limestone

Data Input: BB
 Data Check: JMP

Table 2
Lake Ontario Surface Water Analytical Results

Parameter Name	Units	Concentration	ODWQS "TABLE 2" Chemical Standards (mg/L)	
			Objective	Type of Objective
Alkalinity; total fixed endpt	mg/L	109	30-500	OG
Calcium	mg/L	34.9		
Carbon; dissolved organic	mg/L	4.9		
Chloride	mg/L	15.2	250	AO
Conductivity	Siemens/cm	272		
Copper	mg/L	0.0012	1	AO
Hardness	mg/L	110	500,80-100	ODWO,OG
Iron	mg/L	0.39	0.3	AO
Magnesium	mg/L	4.37		
Manganese	mg/L	0.0949	0.05	AO
Nitrogen; ammonia+ammonium	mg/L	0.011		
Nitrogen; nitrite	mg/L	0.003	1.0	MAC
pH	pH Units	8.14	6.5-8.5	OG
Potassium	mg/L	1.23		
Silicon; reactive silicate	mg/L	1.32		
Sodium	mg/L	9.76	200,20	AO,WL
Sulphate	mg/L	6.1	500	AO
Turbidity	FTU	20.5	5	AO
Zinc	mg/L	0.0048	5	AO

Data Input: BB

Data Check: JMP

Notes: ODWQS Ontario Drinking Water Quality Standards
 ODWO Ontario Drinking Water Objective
 OG - Operational Guideline AO - Aesthetic Objective MAC - Maximum Allowable Concentration WL - Warning Level
 FTU - Formazin Turbidity Units

Table information was sourced from the Ministry of Environment Nearshore Great Lakes Water Chemistry dataset which collected readings from samples GL185958 and GL185959 at station number 1700010462 with latitude 44.08831 and longitude -77.54383, located in the Bay of Quinte, Trenton on November 7th, 2018.