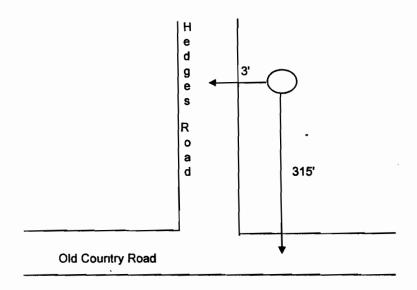


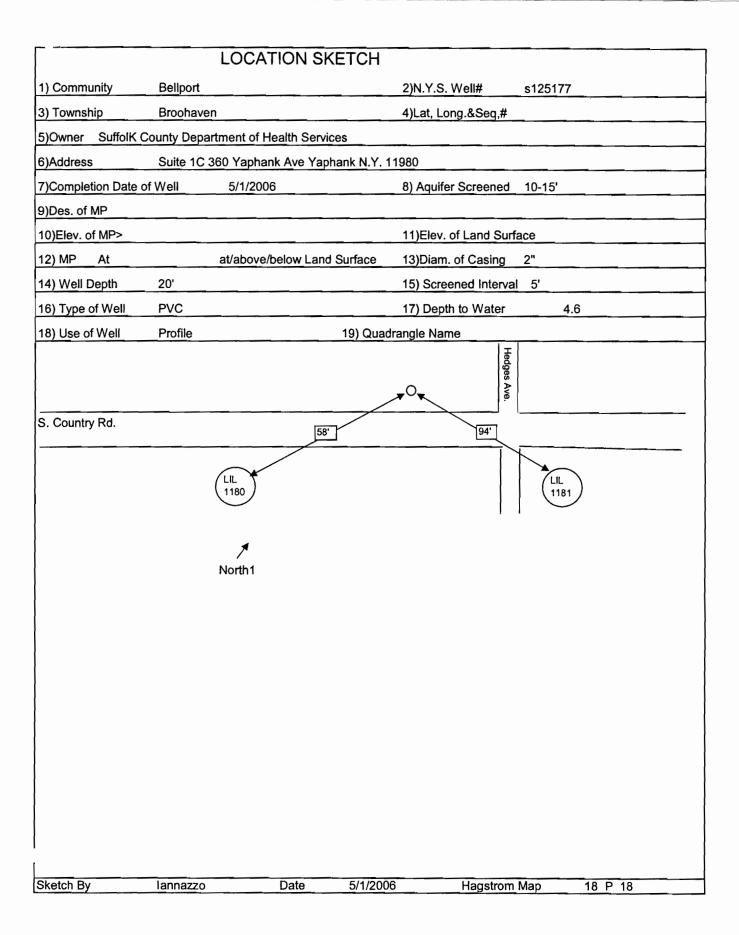
Well Number S-126018 Suffolk County **COMPLETION REPORT-LONG ISLAND WELL** OWNER LOG Suffolk County Department of Health Services Ground Surface ADDRESS 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea LOCATION OF WELL Hedges Road, Patchouge Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 60, 5' CASING Diameter 2 in. in. in. in. Length 55 ft. ft. ft. ft. SEALING **OPENINGS** SCREEN Make **OPENINGS** Johnson 10slot Diameter 55' 2 in. in. in. in. Length 5 ft. ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING 55' **PUMP TEST** DATE TEST OR PERMANENT PUMP DURATION OF TEST MAXIMUM DISCHARGE 60' days hours gallons per min. STATIC LEVEL PRIOR TO TEST LEVEL DURING MAXIMUM PUMPING ft. in. ft. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' DROP LINE SUCTION LINE DIAMETER DIAMETER е in. in. n Length Length in. METHOD OF DRILLING USE OF WATER other Geoprobe Test cable tool rotory s WORK STARTED COMPLETED u 6/6/2006 6/6/2006 m DATE DRILLER REGISTRATION NO. Frank Basile 1/3/2007 1834 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

		LOCATIO	N SKETCH		WO3D	
1) Community				2)N.Y.S. W	el# <i>Si</i>	125516
3) Township	East Patch	ogue		4)Lat, Long	.&Seq,#	
5)Owner SuffolK (County Depart	ment of Healt	h Services			
6)Address	220Rabro	Drive East	Hauppauge	N.Y.		
7)Completion Date	of Well	6/6/2006	8) Aquife	r Screened	50' to 55'	
9)Des. of MP					<u>.</u>	
10)Elev. of MP>			11)Elev.	of Land Surfa	ce	
12) MP At		at/above/belo	ow Land Surface	13)Diam. o	f Casing	
14)_Well Depth	60'			15) Screen	ed Interv	al 5'
16) Type of Well	PVC_			17) Depth	to Water	5'
18) Use of Well	Profile		19) Qua	drangle Name		



Sketch By F. Basile Date 6/29/2006 Hagstrom Map

Suffolk County Well Number **\$125177** COMPLETION REPORT-LONG ISLAND WELL OWNER LOG Suffolk County Department of Health Services Ground Surface ADDRESS 360 yaphank Ave. Suite 1C yaphank N.Y. 11980 Ft. above sea LOCATION OF WELL South Country Rd. Bellport Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 20' 4.6' 0-4' Loam dark CASING brown to black Diameter 2 in. in. in. in. 15 ft. ft. ft. ft. SEALING **OPENINGS** SCREEN **OPENINGS** Make Johnson 10slot Diameter 2 in. in. in. in. 10' Length ft. ft. 5 ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP 20' DURATION OF TEST MAXIMUM DISCHARGE hours gallons per min. days LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST ft. in. MAXIMUM DRAWDOWN Approx, time of return level after of pumping hours **PUMPING INSTALLED** TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5 SUCTION LINE DROP LINE DIAMETER DIAMETER е in. in. n Length Length ft. in. USE OF WATER METHOD OF DRILLING rotory Cable tool other Auger Test S 4- 20' menium sand WORK STARTED COMPLETED u tan and a fine 5/1/2006 5/1/2006 5' m gravel DRILLER REGISTRATION NO. DATE р 5/1/2006 Farnik lannazzo 1658 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



County	Suffolk		WO-	5			Well Numb	er		
	COMPLI	ETION REPOR	RT-L	ONO	3 ISL	_AN	ID WELL			
OWNER						_		\top		.OG
	Suffolk Co	unty Departmen	t of H	ealth	Serv	<u>ices</u>	3	Grou	und Sur	face
ADDRESS	200 Vanh	and Arra Orden	10.1/-				W1 44000	7		
LOCATION	360 Yapna	ank Ave ~ Suite	IC Ya	ipna	ik, N	<u>ew</u>	York 11980	EL		Ft. above sea
	untry Road, Ea	st Patchoque						1		ft.
Depth of We	Il Below Surface	- Inches	Depth	to Gro	undwat	er Fro	m Surface	+	TOP	OF WELL
	40'				4.65'					Γ
Diameter		CASING						-		
	2 in.	in.			in.		in.∤		1	
Length								7		1 1
) ft.	ft.		Loos	ft.		ft.	4		
SEALING				OPE	NINGS					
		SCREEN		<u> </u>				┨ ╎		
Make				OPI	NINGS			7		
Johnson Diameter				_ _	10slo	<u>t </u>		-		,
	! in.	in.			in.		in.		30'	
Length								7 [
	ft. FOP FROM TOP	ft.			ft.		ft.	_		
40'	TOP FROM TOP	OF CASING		1						
		PUMP TES	r					\dashv		
DATE				TEST	OR PE	RMAN	IENT PUMP	1		
DURATION (NE TEST			NAX VI	иом ог	еспу	BOE -	40'	\neg l	
DONATION	days		hours	IVIZA	VIOIVI DI	SUNA	gallons per min.	40	_	
STATIC LEV	EL PRIOR TO TE	ST	110010	LEVE			AXIMUM PUMPING	┨ ╽	1	
	ft.		in.			ft.	in.	4 1	1	
MAXIMUM D	RAWDOWN		ft.	Appro	x. time o	of retu	rn level after of pumping		Ì	
		PUMPING INSTALLED	π.				hours min.	\mathbf{I}		
TYPE		MAKE				MOD	EL NUMBER	7		
MOTIVE PO	WER	MAKE				H.P.		1		
Capacity								-		
		g.p.m.ag	gainst				ft. of discharge head			
NUMBER OF	BOWLS OR STA		<u> </u>					7		
							ft. of total head	4	*	-s
										-C -
	DROP LINE						TION LINE	1	5'	-
DIAMETER					DIAME	TER		1		e
ength				in.	Length		in.	-		n l
Lengui				ft.	Lengui		in.	11		
JETHOD OF	DRILLING				USE O	F WA		1	T	
rotory VORK STAR	cable too	other_	Geop	robe		CYCE		4		s
WORK STAR	5/15/2006		5/15	2006	COMPI	LEIEL	,		5'	u
DATE	DRILLER		1 0/ 10/				REGISTRATION NO.	1	۲J	m
2/7/2007	Fr	ank Basile					1834			P
NOTE: Show	log of well mater	ials encountered with de	pth belo	w grou	nd surfa	ce wat	ter bearing beds	+▼		
	_	screen pump additional	-	-			_			

	LOCATION SP	KEICH	WO-5
1) Community	East Patchogue		2)N.Y.S. Well#
3) Township	Brookhaven		4)Lat, Long.&Seq,#
5)Owner Suffolk Co	ounty Department of Health Servi	ces	
6)Address	360 Yaphank Ave ~ Suite 1C	Yaphank,	NY 11980
7)Completion Date of	Well 5/5/2006	8) Aquife	r Screened
9)Des. of MP			
10)Elev. of MP>		11)Elev.	of Land Surface
12) MP At	at/above/below Land	d Surface	13)Diam. of Casing 2"
14) Well Depth	40"		15) Screened Interval 30-35"
16) Type of Well	PVC		17) Depth to Water 4.65'
18) Use of Well	Profile	19) Quad	Irangle Name
	South Country Road	29	114' A V e d y e s

Date

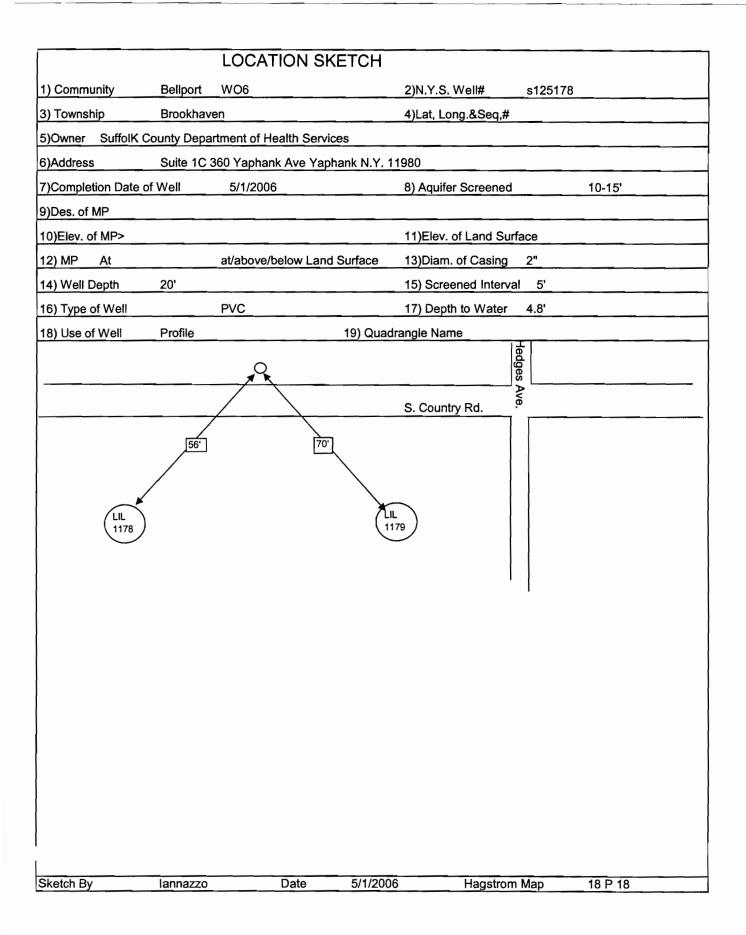
F. Basile

Sketch By

2/7/2007

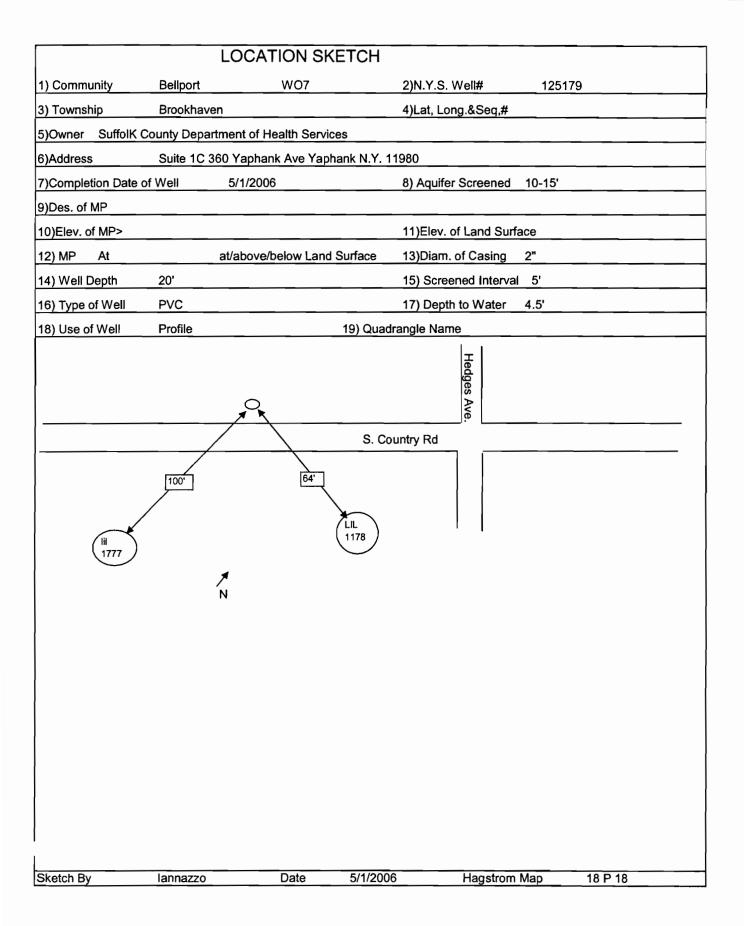
Hagstrom Map

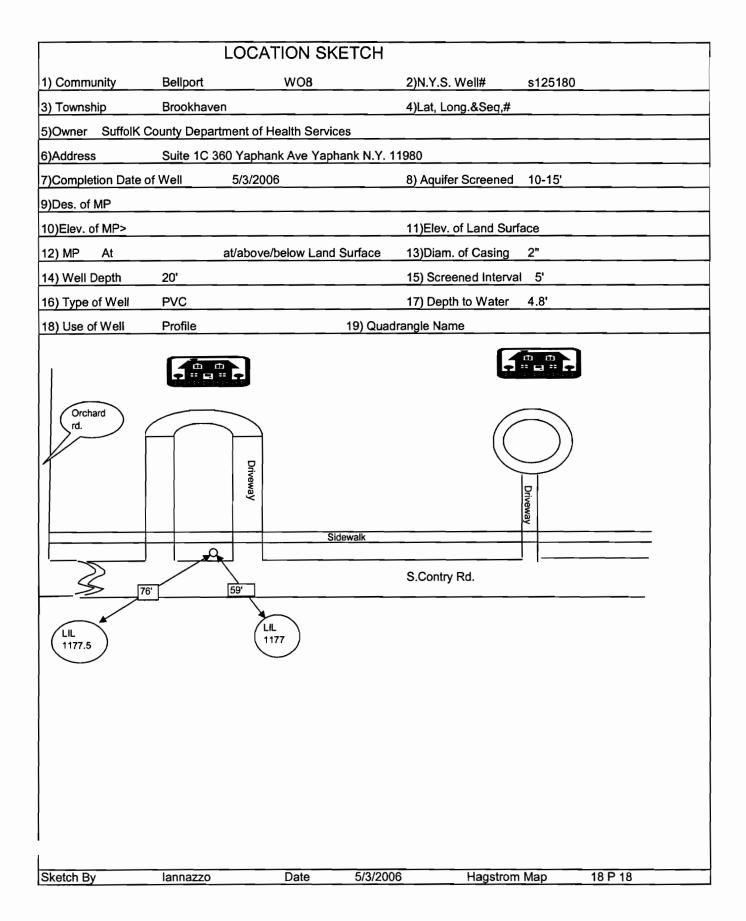
'NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



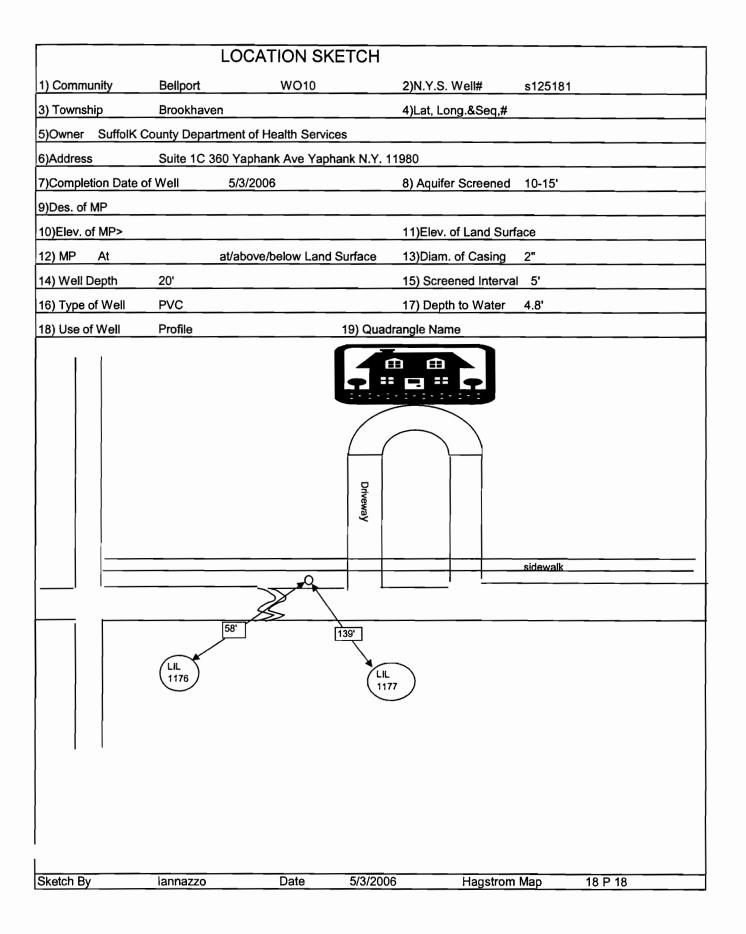
Suffolk

Well Number \$125179 _County **COMPLETION REPORT-LONG ISLAND WELL** OWNER LOG Suffolk County Department of Health Services Ground Surface ADDRESS 360 yaphank Ave. Suite 1C yaphank N.Y. 11980 EL Ft. above sea LOCATION OF WELL South Country Rd. Bellport Depth of Weil Below Surface Depth to Groundwater From Surface TOP OF WELL 4.6' 20' 0-4' Loam dark CASING brown to black Diameter 2 in. in. in. in. 15 ft. ft. ft. ft. **OPENINGS** SEALING SCREEN OPENINGS Make Johnson 10slot Diameter 2 in. in. in. in. 10' Length ft. ft. 5 ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP 20' DURATION OF TEST MAXIMUM DISCHARGE gallons per min. hours LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST ft. in. Approx. time of return level after of pumping MAXIMUM DRAWDOWN ft. hours **PUMPING INSTALLED** MODEL NUMBER TYPE MAKE MOTIVE POWER MAKE H.P. Capacity ft. of discharge head g.p.m.against NUMBER OF BOWLS OR STAGES ft. of total head 5' **SUCTION LINE** DROP LINE DIAMETER DIAMETER Length Length ft. in. METHOD OF DRILLING USE OF WATER Test 7 rotory Cable tool other Auger 4- 20' menium sand WORK STARTED COMPLETED tan and a fine 5/1/2006 5/1/2006 5' m gravel DRILLER REGISTRATION NO. DATE р 5/1/2006 Farnik lannazzo 1658 NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.





Suffolk Well Number **\$125181 Gounty COMPLETION REPORT-LONG ISLAND WELL** OWNER LOG Suffolk County Department of Health Services Ground Surface ADDRESS 360 yaphank Ave. Suite 1C yaphank N.Y. 11980 Ft. above sea LOCATION OF WELL South Country Rd. Bellport Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 4.6' 20 0-4' Loam dark CASING brown to black Diameter in. 2 in. in. in. ft. ft. 15 ft. ft. SEALING OPENINGS SCREEN Make **OPENINGS** Johnson 10slot Diameter 2 in. in. in. in. 30' Length ft. 5 ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** TEST OR PERMANENT PUMP DATE 40 MAXIMUM DISCHARGE DURATION OF TEST gallons per min. hours LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST ft. in. MAXIMUM DRAWDOWN Approx. time of return level after of pumping hours PUMPING INSTALLED MODEL NUMBER TYPE MAKE MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' **SUCTION LINE** DROP LINE DIAMETER DIAMETER in. in. n Length Length in. USE OF WATER METHOD OF DRILLING other Auger **Test** Cable tool 7 rotory s COMPLETED WORK STARTED u 5/3/2006 5/3/2006 5 4- 20' menium sand m DRILLER REGISTRATION NO. DATE tan and a fine р 5/3/2006 Farnik lannazzo 1658 gravel NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



Sounty Suffolk		- WO-10P			Well Numbe		
COMPL	ETION REPOR	RT-LOI	NG ISI	AND WE	LL		
OWNER	-		-			Т	LOG
Suffolk Co	ounty Department	t of Hea	lth Serv	rices		Ground	Surface
ADDRESS						1	
220 Rabro	o Dr. East Hau	ppauge	N.Y. 1	1788		EL	Ft. above sea
	act Patchouge						
South Country Road, E Depth of Well Below Surface		Depth to	Groundwat	er From Surface		├	OP OF WELL
30'		Doptii to	4.15			A	†
	CASING					1	
Diameter			:		: <u></u>		
2 in.	in.		in.		in.	1	
25 ft.	ft.		ft.	•	ft.		
SEALING		OF	PENINGS			1	
						1	
Make	SCREEN	- 1 7	PENINGS	<u>-</u>			
Johnson			10slc				
Diameter					. 1	25	5
2 in.	in.		in.		in.	┨┤└─	귀
Length 5 ft.	ft.		ft.		ft.		
DEPTH TO TOP FROM TOP			10.			1	
						1	
	PUMP TES		CT OR BE	DMANIENT DUM	D.	4	
DATE		' '	51 OR PE	RMANENT PUM	P		
DURATION OF TEST		M/	XIMUM D	SCHARGE		30'	
days		hours		ga	allons per min.	┢┯┙	i
STATIC LEVEL PRIOR TO T	EST		EVEL DUR	ING MAXIMUM F		1	
ft. MAXIMUM DRAWDOWN		in.	nrov time	ft. of return level aft	in.	1	
WAXIIVIOW DRAVVDOVVN		ft.	prox. ume	hours	er or pumping min.		
	PUMPING INSTALLED			110470	******	j	
TYPE	MAKE			MODEL NUMB	ER	1	
						1	
MOTIVE POWER	MAKE			H.P.			
Capacity						1	
,	g.p.m.a	gainst		ft. of disc	harge head		
NUMBER OF BOWLS OR S	TAGES					1	
				ft	of total head	1	<u> </u>
						$ \cdot $	
DROP LINE				SUCTION LINE		1 Ľ	5'
DIAMETER			DIAME	TER		1	e e
I amount		ii	1.		in.	1	
Length		ft.	Length	•	in.		} ``
METHOD OF DRILLING		10.		F WATER		1	
rotory cable to	ool d other	Geoprol					s
WORK STARTED				LETED			<u> </u>
7/19/2006 DATE IDRILLER			//19	/2006 IREGISTE	RATION NO.	1 L	m
- '	Frank Basile			I	334		p
						. ↓	↓
*NOTE: Show log of well mate							
and water levels in each casin					rest.		
Describe repair job. See instru	actions as to Well Driller's	Regulation	and Report	S			

1) Community East Patchougue 2)N.Y.S. Well# 3) Township 4)Lat, Long.&Seq,# 5)Owner Suffolk County Department of Health Services 6)Address 220Rabro Drive East Hauppauge N.Y. 7)Completion Date of Well 7/18/2006 8) Aquifer Screened 25' to 30' 9)Des. of MP 10)Elev. of MP> 11)Elev. of Land Surface 12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15' 18) Use of Well Profile 19) Quadrangle Name
5)Owner Suffolk County Department of Health Services 6)Address 220Rabro Drive East Hauppauge N.Y. 7)Completion Date of Well 7/18/2006 8) Aquifer Screened 25' to 30' 9)Des. of MP 10)Elev. of MP> 11)Elev. of Land Surface 12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
6)Address 220Rabro Drive East Hauppauge N.Y. 7)Completion Date of Well 7/18/2006 8) Aquifer Screened 25' to 30' 9)Des. of MP 10)Elev. of MP> 11)Elev. of Land Surface 12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
7)Completion Date of Well 7/18/2006 8) Aquifer Screened 25' to 30' 9)Des. of MP 10)Elev. of MP> 11)Elev. of Land Surface 12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
9)Des. of MP 10)Elev. of MP> 11)Elev. of Land Surface 12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
10)Elev. of MP> 11)Elev. of Land Surface 12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
12) MP At at/above/below Land Surface 13)Diam. of Casing 2" 14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
14) Well Depth 30' 15) Screened Interval 5' 16) Type of Well PVC 17) Depth to Water 4.15'
16) Type of Well PVC 17) Depth to Water 4.15'
18) Use of Well Profile 19) Quadrangle Name
South Country Road South Country Road 25' L a n

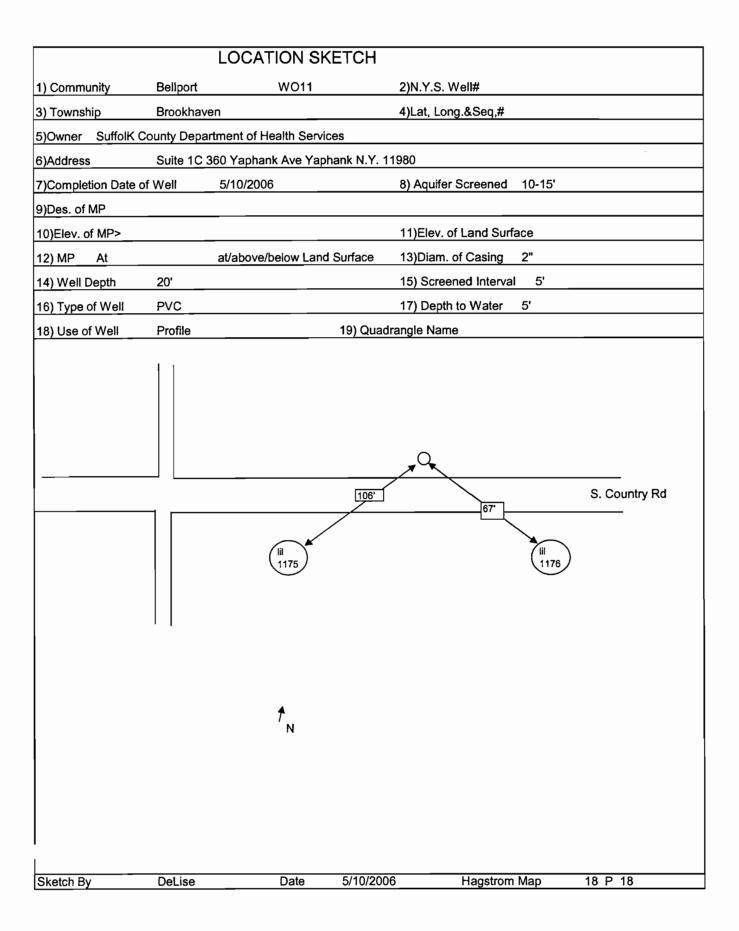
Sketch By F. Basile Date Hagstrom Map

Well Number

county

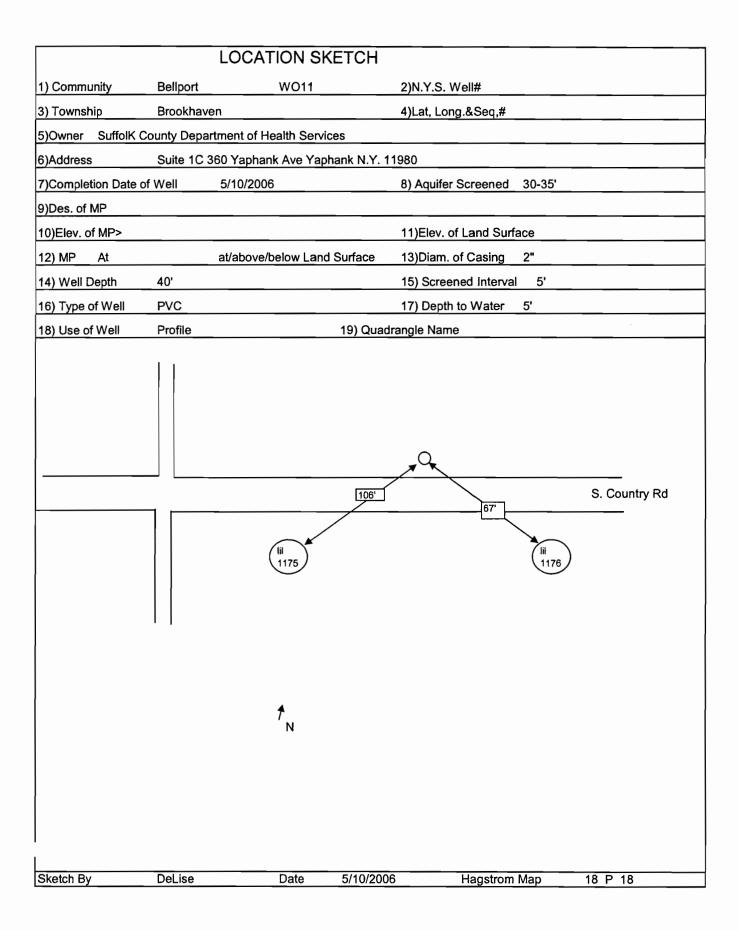
Suick

COMPLETION REPORT-LONG ISLAND WELL WNER LOG Suffolk County Department of Health Services Ground Surface DDRESS 360 yaphank Ave. Suite 1C yaphank N.Y. 11980 Ft. above sea OCATION OF WELL South Country Rd. Bellport Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 5' 20' CASING Diameter 2 in. in. in. 15 ft. ft. ft. ft. OPENINGS SEALING SCREEN **OPENINGS** Make 10slot Johnson Diameter in. in. 2 in. in. 10' Length ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING PUMP TEST TEST OR PERMANENT PUMP DATE MAXIMUM DISCHARGE 20' DURATION OF TEST hours gallons per min. days LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST in. ft. ft. Approx. time of return level after of pumping MAXIMUM DRAWDOWN ft. hours PUMPING INSTALLED MODEL NUMBER TYPE MAKE MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' SUCTION LINE DROP LINE DIAMETER DIAMETER in. in. Length n Length in. METHOD OF DRILLING USE OF WATER other Test Cable tool Auger rotory s WORK STARTED COMPLETED 11 5/10/2006 5/10/2006 5 m REGISTRATION NO. DRILLER DATE р Jim DeLise 1853 5/10/2006 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

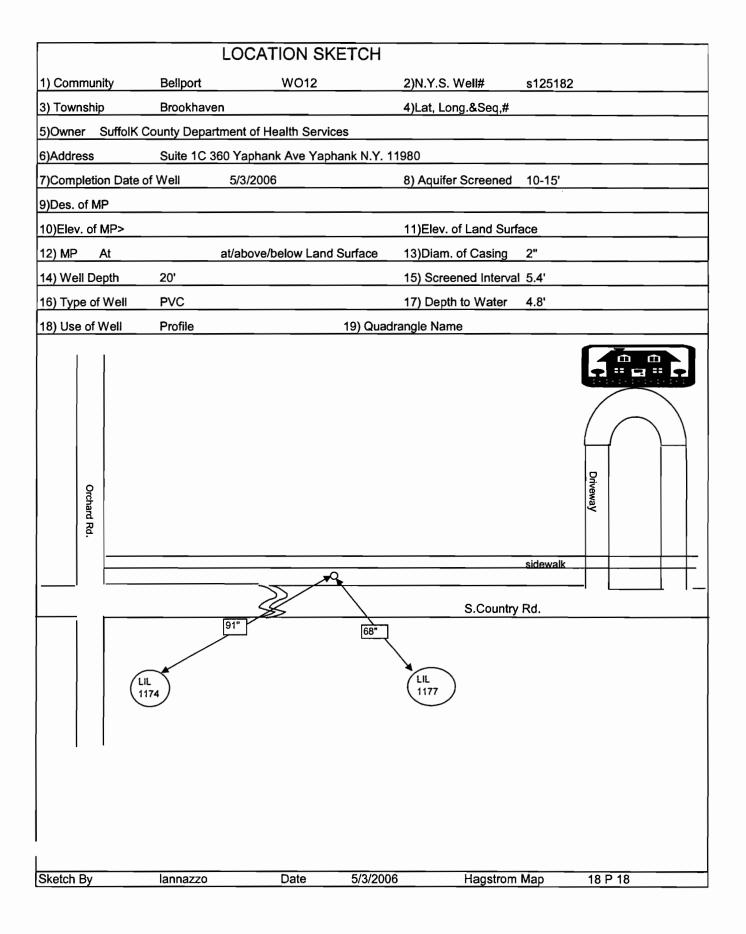


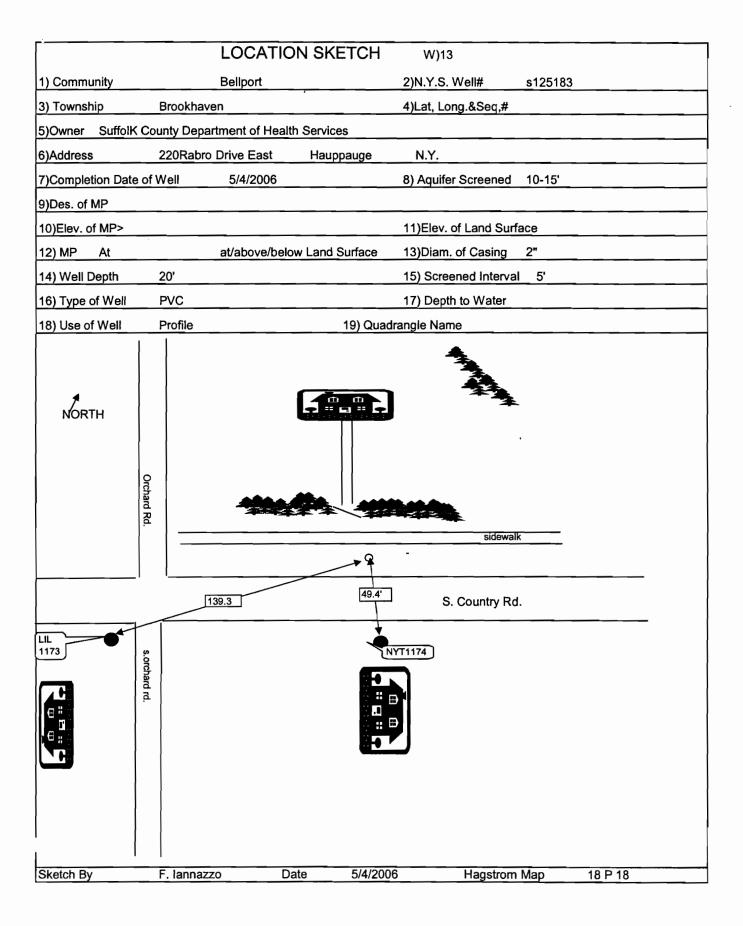
REGISTRATION NO. р Jim DeLise 1853 NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest. Describe repair job. See instructions as to Well Driller's Regulation and Reports. **ORIGINAL- Environmental Conservation Copy**

5/10/2006

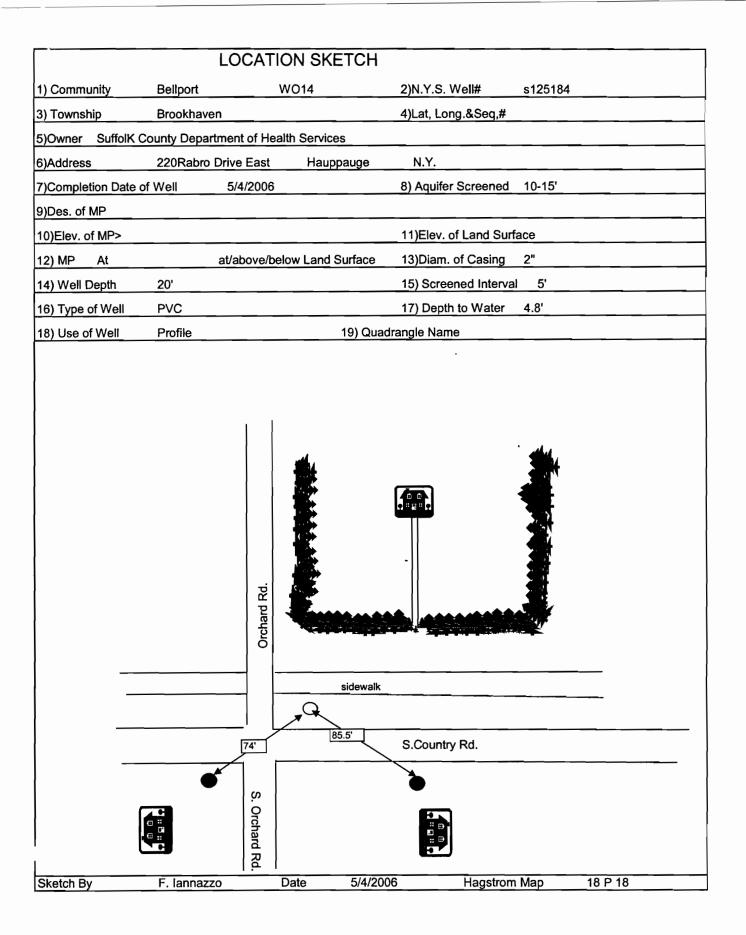


County -	Suffolk					Well Number	∍r s12	5182			
	COMPLE	TION REPO	RT-L	ONG IS	LAND WE	ELL					
OWNER							Т	LC	G		
	Suffolk Co	unty Departmer	nt of He	ealth Ser	vices		Grou	nd Surfa	ice		
ADDRESS							1				
COATION O	360 yapha	nk Ave. Suite 1	C yaph	<u>nank N.Y</u>	<u>. 11980</u>		EL	F	t. above	e sea	
OCATION O		ntn, Dd		Dal	loort					_	
Denth of Well	South Cou Below Surface	Buy Ku.	Denth		lport iter From Surface		+-	TOP O		ft.	
•	20'		Бери	5.4'	ites i form ourrace	•		A	, VVEL		
		CASING			_		1			11	oam dark to black
Diameter		. 1					7			DIOWI	to black
2	in.	in.		in.		in.	4 1				
15	ft	ft.		ft.	I	ft.					
SEALING		16.		OPENINGS		11.	+				
				l			\mathbf{I}				
		SCREEN		7555]				
Make Jahasan				OPENING 10sl			\mathbf{I}				
Johnson Diameter	_			1 108	<u> </u>		-				
	in.	in.		in.		in.					
ength.	- 1		_		-	-	7	30'			
	ft.	ft.		ft.		ft	4				
JEPIH IO I	OP FROM TOP (JF CASING									
		PUMP TES	ST -				┨ │				
DATE				TEST OR P	ERMANENT PUN	и <u>Р</u>	1				
							ــــــــــــــــــــــــــــــــــــــ	ا ا			
DURATION O					DISCHARGE		 40				
STATIC LEVE	days EL PRIOR TO TE	·st	hours		9 RING MAXIMUM	allons per min.	$+$ \Box	_			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ft.	.01	in.		ft.	in.					
MAXIMUM DF		_		Approx. time	of return level af		┫ │				
			ft.		hours	min.					
		PUMPING INSTALLED]				
YPE		MAKE			MODEL NUME	BER					
MOTIVE POV	VED	MAKE			H.P.		-				
NOTIVE POV	VER	IMAKE			n.e.						
Capacity	-						┨╎				
		g.p.m.	against		ft. of dis	charge head	!	11			
IUMBER OF	BOWLS OR STA	AGES	- 1				7				
						ft. of total head	4	*	<u>s</u>		
								4			
	DROP LINE				SUCTION LIN	F	+ $+$	5'		·	
DIAMETER	<u> </u>			DIAN	METER	<u> </u>	┨ │		е	1	
			_	in.		in.	.		е		
ength				Leng	th			↓	n]	
METHOD OF	DRILLING			ft.	OF WATER	in.	-	1			
rotory	Cable too	ol other	Auge	I					s		
VORK STAR		Carer	7.090	COM	PLETED		┨ │		s u		
	5/3/2006			5/3	3/2006			5'	m	4- 20'	menium sa
	DRILLER				I	RATION NO.	1		p		d a fine
5/3/2006	Fa	arnik lannazzo			1	658			Ρ.	gravel	
NOTE: Show	log of well mate	rials encountered with o	lenth hels	w ground com	face water beening	na hada	- _	₩			
		a screen pump addition	•	_		-					

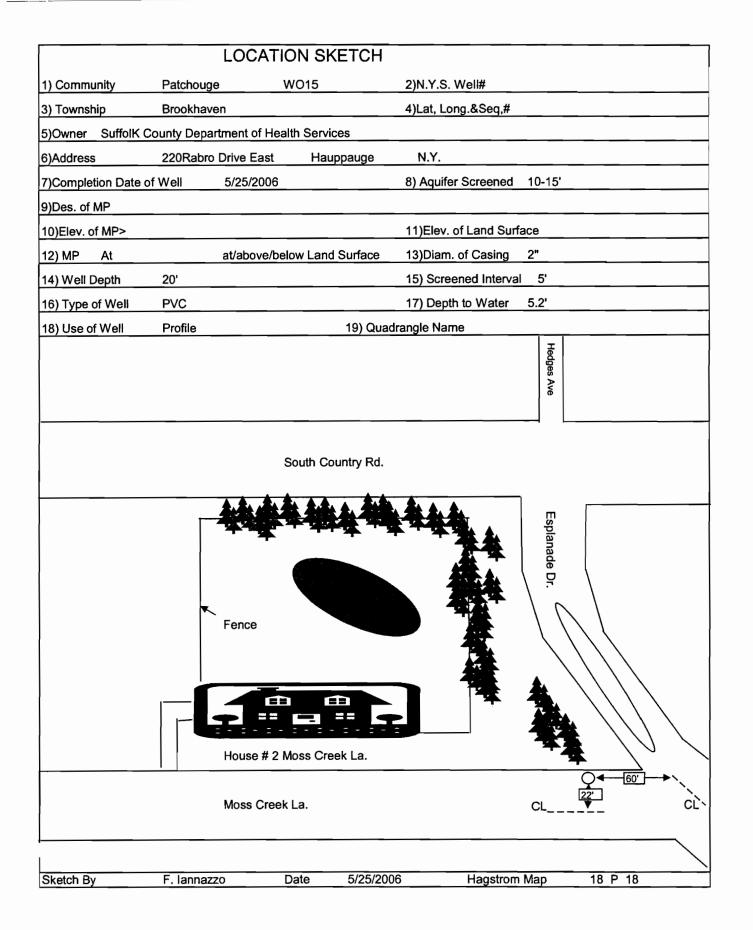




Suffolk **Ccunty** Well Number **COMPLETION REPORT-LONG ISLAND WELL** OWNER LOG Suffolk County Department of Health Services **Ground Surface ADDRESS** 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea LOCATION OF WELL South Country Rd. Bellport Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 20' 4.8' CASING Diameter 2 in. in. in. in. Length 15 ft. ft. ft. ft. **OPENINGS** SEALING SCREEN **OPENINGS** Make Johnson 10slot Diameter 10 2 in. in. in. in. Length ft. ft. ft. 5 ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP DURATION OF TEST MAXIMUM DISCHARGE 20 days hours gallons per min. STATIC LEVEL PRIOR TO TEST LEVEL DURING MAXIMUM PUMPING ft. ft. in. in. Approx. time of return level after of pumping MAXIMUM DRAWDOWN ft. hours min. PUMPING INSTALLED TYPE MODEL NUMBER MAKE MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' DROP LINE SUCTION LINE DIAMETER DIAMETER e in. in. n Length Length in. METHOD OF DRILLING USE OF WATER ☐ rotory WORK STARTED cable tool other Test s COMPLETED u 5/4/2006 5/4/2006 5' m DATE DRILLER REGISTRATION NO. р 5/4/2006 Frank lannazzo 1658 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



Suffolk -County Well Number \$125345 COMPLETION REPORT-LONG ISLAND WELL OWNER LOG Suffolk County Department of Health Services Ground Surface ADDRESS 360 Yaphank Ave Suite C Yaphank NY. 11980 Ft. above sea LOCATION OF WELL Moss Creek La. Bellport Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 40' 5.4. CASING Diameter 2 in. in. in. in. Length 35 ft. ft. ft. SEALING **OPENINGS** SCREEN Make **OPENINGS** Johnson 10slot Diameter 10' 2 in. in. in. in. Length 5 ft. ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** TEST OR PERMANENT PUMP DATE 20' DURATION OF TEST MAXIMUM DISCHARGE hours gallons per min. LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST in. ft. in. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours PUMPING INSTALLED TYPE MODEL NUMBER MAKE MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' **DROP LINE SUCTION LINE** DIAMETER DIAMETER in. in. Length Length n in. USE OF WATER METHOD OF DRILLING other Auger Test rotory cable tool S COMPLETED WORK STARTED u 5/25/2006 5/25/2006 5' m DRILLER REGISTRATION NO. DATE р 5/25/2006 Frank lannazzo 1658 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



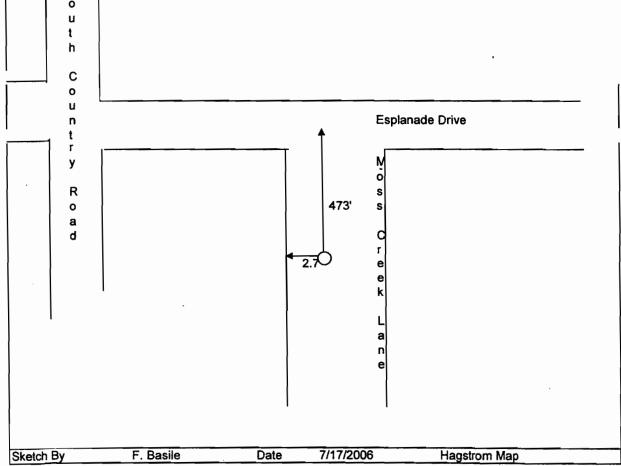
Suffolk Well Number County---**COMPLETION REPORT-LONG ISLAND WELL JWNER** Suffolk County Department of Health Services Ground Surface DDRESS Hauppauge N.Y. 11788 220 Rabro Dr. East Ft. above sea OCATION OF WELL Moss Creek Lane, east patghogue Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 40' 3.69 CASING Diameter 2 in. in. in. in. ength ft. ft. ft. 35' ft. SEALING **OPENINGS** SCREEN OPENINGS Vlake 10slot Johnson Diameter 30' 2 in. in. in. in. ength 5 ft. ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING 30' PUMP TEST TEST OR PERMANENT PUMP DATE MAXIMUM DISCHARGE 40' DURATION OF TEST gallons per min. days hours LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST in. MAXIMUM DRAWDOWN Approx, time of return level after of pumping hours PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity ft. of discharge head g.p.m.against NUMBER OF BOWLS OR STAGES ft. of total head 5' **SUCTION LINE DROP LINE** DIAMETER DIAMETER in. in. n Length Length in. USE OF WATER METHOD OF DRILLING Geoprobe | TEST other rotory s COMPLETED WORK STARTED П 6/8/2006 6/8/2006 5' m REGISTRATION NO. DATE DRILLER р Frank Basile 1834 7/17/2006 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

	LOCA	TION SKETCH	WO-16	
1) Community	East Patchouge		2)N.Y.S. Well#	
3) Township	Brookhaven		4)Lat, Long.&Seq,#	N40.75849
5)Owner Suffolk C	ounty Department of I	Health Services		W072.97028
6)Address	220Rabro Drive Eas	stHauppauge	N.Y.	
7)Completion Date o	f Well 6/8/200	06 8) Aquife	r Screened 35' to 40'	
9)Des. of MP				
10)Elev. of MP>		11)Elev.	of Land Surface	
12) MP _At	at/above	/below Land Surface	13)Diam. of Casing	
14) Well Depth	40'		15) Screened Interva	1 5'
16) Type of Well	PVC		17) Depth to Water	3.69'
18) Use of Well	Profile	19) Quad	Irangle Name	
ESPLANA	ADE DR.	190'	M O S S C R E E K L A N E	
Sketch By	F. Basile	Date	Hagstrom	Мар

County	Suffolk			17			Well Numbe	r S-12551	3	
	COMPLE	TION REPO	RT-L	ONO	3 ISL/	AND WEL	.L			
OWNER								I	LOG	
	Suffolk Co	unty Departmer	nt of H	ealth	Servic	es		Ground S	Surface	
ADDRESS	000 D	D F / 11				700				
LOCATION	220 Rabro	Dr. East Hau	ıppau	ge i	N.Y. 11	<u> 788 </u>	-	EL _.	Ft. above se	ea
	ek Lane, east j	natahogue						l _	ft.	
	li Below Surface	Jaighogae	Depti	n to Gro	undwater	From Surface		TC	OP OF WELL	
	40'		·		2.70'			A 4		
Diameter		CASING]		
	? in.	in.			in.		in.			
Length								1		
35'	ft.	ft.			ft.		ft.]		
SEALING				OPE	NINGS					
		SCREEN		l				-		
Make				OPI	ENINGS			1		
Johnson					10slot]		
Diameter	! in.	in.			in.		in.	30'	· [
Length	. 111.	111.			111.		нь	1 ¬		
	ft.	ft.			ft.		ft.	<u> </u>		
DEPTH TO T	OP FROM TOP (OF CASING]		
	30'	PUMP TES	ξT					4 !		
DATE		101111120	<u> </u>	TEST	OR PERM	MANENT PUMP		1		
								<u> </u>		
DURATION (MUM DISC			 40' 		
STATIC LEV	days EL PRIOR TO TE	st	hours		EL DURIN	gallo G MAXIMUM PU	ons per min.	-		
0.71110 2221	ft.		in.		ft		in.			
MAXIMUM D	RAWDOWN			Appro	x. time of	return level after	of pumping	1		
			ft.			hours	min.]		
TYPE		PUMPING INSTALLED MAKE				MODEL NUMBER	-	$ \cdot $		
IIFE		IVIANE			"	NODEL NOMBER	`			
MOTIVE PO	WER	MAKE				1.P.		1		
]		
Capacity			1			és sé lissa				
NUMBER OF	BOWLS OR STA		against			ft. of discha	arge nead	1		
, , o , , , , , , , , , , , , , , , , ,	201120 011 011					ft. c	of total head		, ,	
			•					1 1		
					T			5	▔╢╌┯┈┤	
DIAMETER	DROP LINE				S DIAMETI	SUCTION LINE ER		4 5	 	
J II 1111 - 1 - 2 1 1				in.			in.		e	
Length					Length			1 ↓	, <u>n</u>	
METIOD OF	DELLINO.			ft.	HEE OF	MATER	<u>in.</u>] 1		
METHOD OF	Cable too	other	Geor	nrohe	USE OF TEST	VVAIER				
rotory WORK STAR		, oulei		יי טאפ	COMPLE	TED		i	_ S	
6/8/2006					6/8/20			5		
DATE	DRILLER					REGISTRA		▍│└┐	n	
7/17/2006	Fr	ank Basile				183	4			
*NOTE: Show	log of well mater	rials encountered with d	epth belo	ow grou	nd surface	water bearing t	eds -	 * *	<u>'</u>	
F	•	screen pump additiona	•	_		=				

<u>:</u>		LOCATIO	N SKETCH		-17
1) Community	East Patch	ogue		2)N.Y.S. Well#	S125513
3) Township	Brookhaver	ı		4)Lat, Long.&Se	eq,# N40.75841
5)Owner Suffolk C	County Depart	ment of Health	Services		W072.96983
6)Address	220Rabro [Orive East	Hauppauge	N.Y.	
7)Completion Date of	of Well	6/8/2006	8) Aquifer	Screened 30' t	o 35'
9)Des. of MP					
10)Elev. of MP>			11)Elev. c	of Land Surface	
12) MP At		at/above/belo	w Land Surface	13)Diam. of Cas	sing 2"
14) Well Depth	40'			15) Screened In	terval 5'
16) Type of Well	PVC			17) Depth to W	ater 3.69'
18) Use of Well	Profile		19) Quad	rangle Name	
t h C o u n t r y R o a d			338'	Esplanade Driv	e
Sketch By	F. Basile	D	l ate 7/17/200	l 06 На	gstrom Map

ີວເ"າty	Suffolk		WO-1	8			Well Number) 	455
		TION REPO	RT-L	ONG	ISLAN) WELI		_	,	
WNER									L	OG.
DDDCCC	Suffolk Co	<u>unty Departmen</u>	t of H	<u>ealth</u>	Services			Grou	nd Surf	ace
DDRESS	220 Pahro	Dr. East Hau	nnau	10 N	IV 11788	ł		EL.		Et abovo co
CATION	OF WELL	Dr. East Hau	ppau	je iv	1.1. 11/00			┟┖┶	<u> </u>	t. above se
oss Cre	ek Lane, east p	oatghogue						l		ft.
	ell Below Surface	•	Depth	to Gro	undwater From	Surface			TOP (F WELL
	40'	CASING			2.21'			1 ↑	1	
iameter		CASING						1]		
	2 in.	in.			in.		in.]		
ength	<u>т</u>	"			a 1		A	1]
5' EALING	ft.	ft.		OPEN	ft.		ft.	1		
LALING										
		SCREEN		1855	WINDS	-		1		
lake				OPE	NINGS 10slot					
ohnson lameter				1	105101			1	30'	
	2 in.	in.			in.		in.] [
ength	- #	<u> </u>			# I		ft.			
ЕРТН ТО	5 ft. TOP FROM TOP (ft. OF CASING		T	ft.		IL.	1		
	30']		
T.		PUMP TES	T	T=0=	OD DEDIMANT	NT DULL		1		
TE				IEST	OR PERMANE	INT PUMP				
JRATION	OF TEST	-		MAXIN	NUM DISCHAR	RGE		40'	$\neg \vdash$	
	days		hours		T BUBBLE		ns per min.			
ATIC LEV	VEL PRIOR TO TE ft.	:51	in.	LEVE	L DURING MA ft.	XIMUM PUN	IPING in.			
AXIMUM I	DRAWDOWN		п.	Approx	x. time of return	n level after o		1		
			ft.			hours	min.			
		PUMPING INSTALLED			1					
'PE		MAKE			MODE	L NUMBER				
OTIVE PO	OWER	MAKE			H.P.					
apacity						A of dischar	ma ha-d			
JMBER O	F BOWLS OR STA	g.p.m.a	igainst			ft. of dischar	ge nead			
						ft. of	total head		<u> </u>	s
										6
	DROBLINE				SHOT	ION LINE			5'	r
AMETER	DROP LINE				DIAMETER	OI LINE			\top	е
				in.			in.			e
ength				£4	Length		:		*	n
ETHOD O	F DRILLING			ft.	USE OF WAT	ER	in.		Ī	
rotory	cable too	other	Geo	orobe	TEST					s
ORK STA					COMPLETED				E	u
					6/8/2006	REGISTRAT	TON NO.		5'	m
6/8/2006 ATE	IDRILLER								1	ı n l
6/8/2006 ATE 7/17/2006	DRILLER 6 Fr	rank Basile				1834	1			P



Suffolk Well Number WO-19 **County** COMPLETION REPORT-LONG ISLAND WELL **DWNER** Suffolk County Department of Health Services Ground Surface ADDRESS 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea OCATION OF WELL Moss Creek Lane, east patghogue Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 40' 2.90' CASING Diameter 2 in. in. in. in. _ength ft. ft. ft. 35' ft. SEALING **OPENINGS** SCREEN Make OPENINGS Johnson 10slot Diameter 30' 2 in. in. in. in. Length 5 ft. ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING 30' PUMP TEST DATE TEST OR PERMANENT PUMP 40' MAXIMUM DISCHARGE DURATION OF TEST hours gallons per min. days STATIC LEVEL PRIOR TO TEST LEVEL DURING MAXIMUM PUMPING ft. in. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours min. PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' DROP LINE SUCTION LINE DIAMETER DIAMETER е in. in. Length Length in. USE OF WATER METHOD OF DRILLING rotory other Geoprobe TEST cable tool s WORK STARTED COMPLETED u 6/8/2006 5' 6/8/2006 m REGISTRATION NO. DRILLER DATE p 7/17/2006 Frank Basile 1834 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

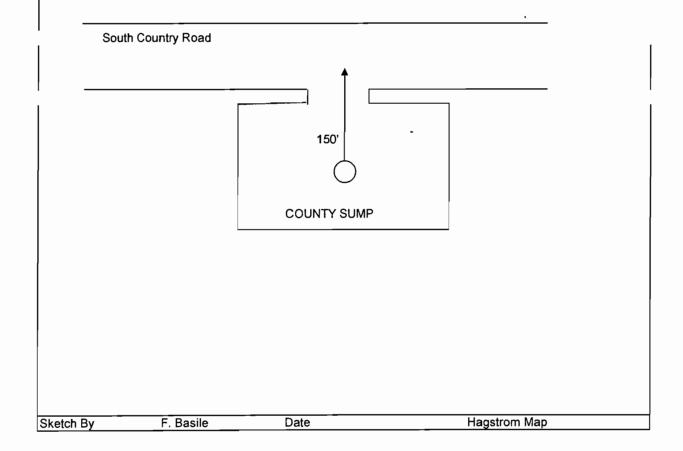
	LOCATI	ON SKETCH	WO-19	6
1) Community	East Patchogue		2)N.Y.S. Well# 51	5515
3) Township	Brookhaven		4)Lat, Long.&Seq,#	N40.75849
5)Owner Suffolk C	ounty Department of Hea	alth Services		W072.97076
6)Address	220Rabro Drive East	Hauppauge	N.Y	
7)Completion Date of	of Well 6/8/2006	8) Aquife	r Screened 30' to 35'	
9)Des. of MP				
10)Elev. of MP>		11)Elev.	of Land Surface	
12) MP At	at/above/be	elow Land Surface	13)Diam. of Casing	2"
14) Well Depth	40'		15) Screened Interva	l <u>5</u> '
16) Type of Well	PVC		17) Depth to Water	2.90'
18) Use of Well	Profile	19) Quad	frangle Name	
C			Esplanade Drive	
R o a d		610° 3.5	oss Creek Lane	
Sketch By	F. Basile	Date 7/17/20	06 Hagstror	п Мар

- - - - -

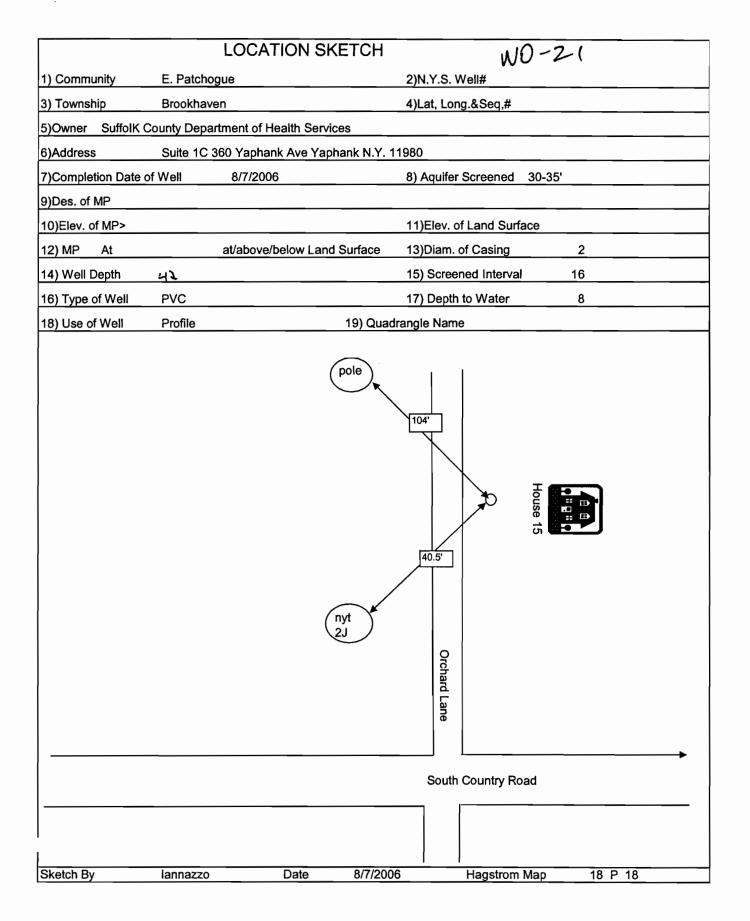
county	Suffolk		₩O-2				Well Numbe	<u> </u>	14	WU
	COMPLE	ETION REPOF	RT-L	ONC	3 ISL	LAND WE	LL		i	_ ,
WNER								Т	LC	OG
	Suffolk Co	unty Department	t of H	ealth	Serv	rices		Groun	d Surfa	асе
IDDRESS								1		
	220 Rabro	Dr. East Hau	ppaug	<u>ge 1</u>	<u> 1.Y. 1</u>	1788		EL	F	t. above sea
OCATION C										
South Cou	intry Road, Ea	st Patchouge						 ;		ft.
Depth of Wel	Il Below Surface		Depth	to Gro	undwate	er From Surface		-	TOP O	F WELL
	60'	CASING				2.79		┨┋	T	
Diameter		CASING						┨ │		
2	! in.	in.			in.		in.			
.ength	_	1						1		
	ft.	ft.			ft.		ft.	_		
SEALING				OPEN	IINGS		•			
				<u> </u>				4		
Лаке		SCREEN		IOPE	NINGS			4		
Johnson					10slo					
Diameter					10010			1 5	<u>io'</u>	
2	in. │	in.			in.		in.		<u> </u>	
<u>ength</u>	- 1	- I					- I	1		
	ft. OP FROM TOP (ft.			ft.		ft.	4		
JEPIN IO I	OF FROM TOP (JF CASING								
		PUMP TEST	т					- 		
DATE		101111 1201		TEST	OR PE	RMANENT PUN	1P	1		
									_	. 1
DURATION (OF TEST			MAXII	MUM DI	ISCHARGE		60'	71	
	days		hours				allons per min.	┷┰	-	
STATIC LEVI	EL PRIOR TO TE	ST		LEVE		ING MAXIMUM I				
447/144114	ft.	,	in.	0		ft.	in.	4		
MAXIMUM DI	RAWDOWN		£4	Appro	x. time (of return level aft hours				
		PUMPING INSTALLED	ft.	Ь——		Hours	min.	1		
TYPE		MAKE				MODEL NUMB	ER	1		
MOTIVE POV	VER	MAKE				H.P.		1		
Capacity				,				1		
		g.p.m.ag	gainst			ft. of disc	charge head	1		
NUMBER OF	BOWLS OR STA	√GES	1							
							t. of total head	4	Y	s
								_	<u>_</u>	
	DROP LINE					SUCTION LINE	=	┨│┟	5'	
DIAMETER	DIOI LINE				DIAME		-	1 -	\top	-e-
				in.			in.		1 1	е
ength.			•		Length	i		1	↓ ↑	n
				ft.			in.]	\blacksquare	
METHOD OF		. 💻	_			F WATER				
_l rotory VORK STAR	cable too	other other	Geop	orobe		LETED		4	1 1	s
NORK STAR	7/18/2006					/2006		IIг	5'	u
DATE	DRILLER				11101		RATION NO.	1 [الب	m
1/3/2007		ank Basile					834			Р
] ↓	↓	
NOTE: Show	log of well mater	rials encountered with de	pth belo	w grou	nd surfa	ace water bearing	g beds	 		
ad water love	ala in aaah aasina	s coroon numn additional	Loumoir	a toct	and othe	ar matters of inte	root			l

 ${\color{blue} \textbf{Describe repair job. See instructions as to Well Driller's Regulation and Reports.} \\$

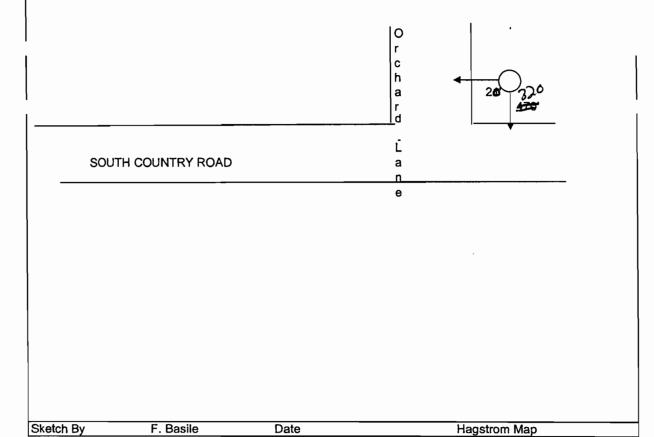
		LOCATIO	N SKETCH		WO-20	<u>51</u>	260	19
1) Community	East Patch	ougue		2)N.Y.S. V	Vell#			
3) Township				4)Lat, Lon	g.&Seq,#			
5)Owner SuffolK Co	ounty Depar	tment of Healt	h Services					
6)Address	220Rabro	Drive East	Hauppauge	N.Y.				
7)Completion Date of	Well	7/18/2006	8) Aquife	r Screened	50' to 55'			
9)Des. of MP								
10)Elev. of MP>		_	11)Elev.	of Land Surf	ace			
12) MP At		at/above/belo	w Land Surface	13)Diam.	of Casing	2"		
14) Well Depth	60'			15) Scree	ned Interval	l 5'		
16) Type of Well	PVC			17) Depth	to Water	2.79'		
18) Use of Well	Profile		19) Quad	rangle Name	9			



Suffolk County Well Number **COMPLETION REPORT-LONG ISLAND WELL** OW:\IER LOG Suffolk County Department of Health Services Ground Surface **ADDRESS** 360 yaphank Ave. Suite 1C yaphank N.Y. 11980 Ft. above sea LOCATION OF WELL ORCHAND Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL CASING Diameter 2 in. in. in. in. Length ft. ft. ft. ft. 32' SEALING **OPENINGS** SCREEN **OPENINGS** Make Johnson 10slot Diameter in. 2 in. in. in. Length ft. ft. ft. 5 ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP MAXIMUM DISCHARGE 42' DURATION OF TEST hours gallons per min. days STATIC LEVEL PRIOR TO TEST LEVEL DURING MAXIMUM PUMPING ft. ft. in. in. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head s 5' DROP LINE SUCTION LINE DIAMETER DIAMETER е in. in. Length $\overline{\mathsf{n}}$ Length METHOD OF DRILLING USE OF WATER other Auger Test cable tool rotory S WORK STARTED COMPLETED u 8/7/2006 8/7/2006 m DATE DRILLER REGISTRATION NO. р 8/7/2006 Farnik lannazzo 1658 NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

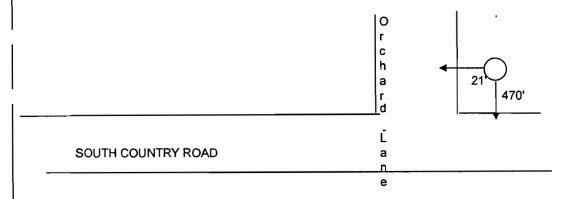


		LOCATIO	N SKETCH	V	VO-22	
1) Community	East Patcl	nougue		2)N.Y.S. We) # -	126023
3) Township		_		4)Lat, Long.	&Seq,#	
5)Owner SuffolK (County Depar	tment of Healt	h Services	_		
6)Address	220Rabro	Drive East	Hauppauge	N.Y.		
7)Completion Date	of Well	7/24/2006	8) Aquife	r Screened 3	30' to 35	5'
9)Des. of MP						
10)Elev. of MP>			11)Elev.	of Land Surfac	е	
12) MP At		at/above/beld	ow Land Surface	13)Diam. of	Casing	2"
14) Well Depth	40*			15) Screene	d Inten	val 5'
16) Type of Well	PVC		<u> </u>	17) Depth to	Water	4.15'
18) Use of Well	Profile		19) Quad	Irangle Name		



Suffolk Well Number ∋ot ty-COMPLETION REPORT-LONG ISLAND WELL **DWNER** Suffolk County Department of Health Services Ground Surface ADDRESS 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea OCATION OF WELL South Country Road, East Patchouge TOP OF WELL Depth of Well Below Surface Depth to Groundwater From Surface 40' 4.15 CASING Diameter 2 in. in. in. in. Length 30 ft. ft. ft. ft. **OPENINGS** SEALING SCREEN **OPENINGS** Make Johnson 10slot Diameter 30' 2 in. in. in. in. Length ft. ft. ft. 5 ft. DEPTH TO TOP FROM TOP OF CASING PUMP TEST DATE TEST OR PERMANENT PUMP MAXIMUM DISCHARGE 40' **DURATION OF TEST** gallons per min.
LEVEL DURING MAXIMUM PUMPING days hours STATIC LEVEL PRIOR TO TEST ft. in. ft. in. MAXIMUM DRAWDOWN Approx, time of return level after of pumping ft. hours min. PUMPING INSTALLED MODEL NUMBER **TYPE** MAKE MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' SUCTION LINE DROP LINE DIAMETER DIAMETER е in. in. Length n Length in. METHOD OF DRILLING USE OF WATER other Geoprobe Test cable tool rotory s WORK STARTED COMPLETED u 7/24/2006 7/24/2006 5' m REGISTRATION NO. DATE DRILLER 1/3/2007 Frank Basile 1834 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

		LOCATIO	N SKETCH	wo	-23
1) Community	East Patch	ougue		2)N.Y.S. Well#	5126021
3) Township				4)Lat, Long.&S	eq,#
5)Owner Suffolk Co	ounty Depar	tment of Healtl	n Services		
6)Address	220Rabro	Drive East	Hauppauge	N.Y.	
7)Completion Date of	Well	7/24/2006	8) Aquifer	Screened 30'	to 35'
9)Des. of MP					
10)Elev. of MP>			11)Elev. d	of Land Surface	
12) MP At		at/above/belo	w Land Surface	13)Diam. of Ca	sing 2"
14) Well Depth	40'			15) Screened I	nterval 5'
16) Type of Well	PVC			17) Depth to W	ater 4.15'
18) Use of Well	Profile		19) Quad	rangle Name	



Date

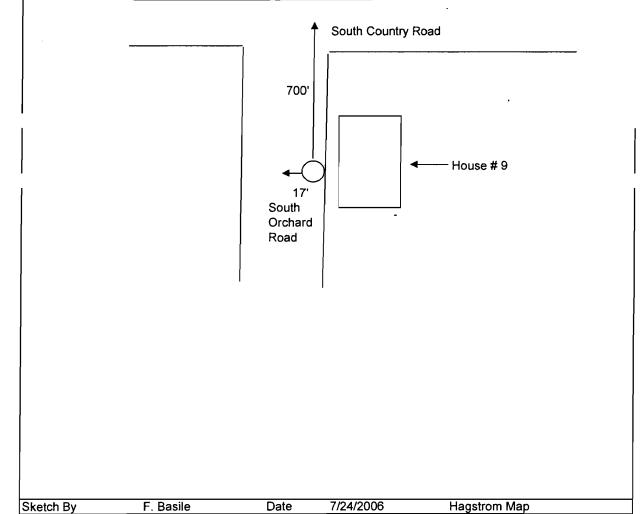
Hagstrom Map

Sketch By

F. Basile

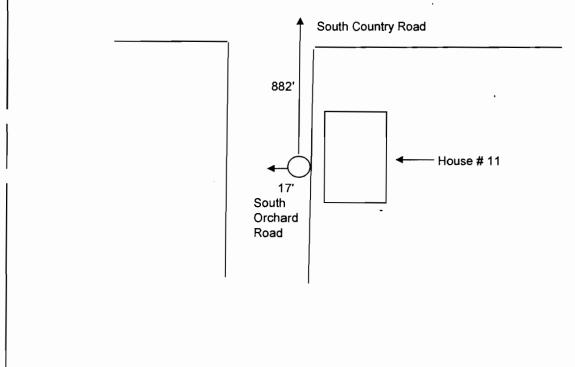
County	Suffolk		WO-24				Well Numbe	<u> </u>			
	COMPL	ETION REPOR	RT-LC	NC	3 ISL	AND WEL	_				
OWNER								$\overline{}$	LO	G	
	Suffolk Co	ounty Departmen	t of He	alth	Serv	rices		Groun	nd Surfac		
DDRESS								1			
	220 Rabro	<u>Dr. East Hau</u>	ppauge	<u>1 e</u>	<u> 1.Y. 1</u>	1788		EL	Ft.	above	sea
OCATION		hard Dood Cook	Detek		_						
Depth of Wel	Below Surface	hard Road, East				er From Surface		₩	TOP OF	- WELL	
Septil of wei	50"		9.61'	o Gio	unuwat	er From Sunace		 _	<u>10</u> 0 0 0	VVELL	_
		CASING	0.01					1 ⊺			
Diameter	. 1							1		ľ	
_ength	in.	in.			in.		in.]			
	ft.	ft.			ft.		ft.		1 1		
SEALING	16.	16.		OPEN	IINGS		11.	1			
										ľ	
		SCREEN						1			
Make Johnson				OPE	NINGS						
Diameter				<u>' </u>	10slc	<u> </u>		1 [40'		
	in.	in.			in.		in.	<u> </u>			
Length	- 1	- 1			- 1		- 1	1			
	ft. OP FROM TOP	ft.			ft.		ft.	1	1		
40'	OF FROIVITOF	OF CASING									
		PUMP TES	- '					1			
DATE				rest	OR PE	RMANENT PUMP		1			
									_		
DURATION C				MAXII	MUM DI	SCHARGE		50'			
STATIC LEVE	days EL PRIOR TO TI	EST	hours	LEVE	L DUR	gallor ING MAXIMUM PUN	ns per min. IPING		⁻		
	ft.		in.			ft.	in.			1	
MAXIMUM DF	RAWDOWN		1	Appro	x. time (of return level after of	f pumping				
		S. I. S. S. A. I. A. S.	ft.			hours	min.				
TYPE		PUMPING INSTALLED MAKE				MODEL NUMBER					
ITPE		MAKE				MODEL NUMBER			11		
MOTIVE POV	VER	MAKE	<u> </u>			H.P.					
Capacity			1					1			
	201110020	g.p.m.a	gainst			ft. of dischar	ge head				
NUMBER OF	BOWLS OR ST	AGES	1			# of	total head	1		ĺ	
						11. 01	total fieau		*	-s	
									5'	-6	
	DROP LINE					SUCTION LINE			<u>ا</u> لِبُ	<u>e</u>	
DIAMETER				in	DIAME	TER	•_			<u>е</u>	
_ength				in.	Length		in.		1 +	<u>n</u>	
-011g			1	ft.	Longin		in.		X		
METHOD OF	DRILLING				USE O	F WATER					
rotory	cable to	ol d other	Geopre	obe			_			s	
NORK STAR	7/24/2006				7/24/				<u> </u>	u	
DATE	DRILLER		1		11241	ZUUO REGISTRAT	ION NO.		5'	m	
1/25/2007		rank Basile				1834				Р	
								\downarrow	↓		
	-	rials encountered with de				=		_			
		g screen pump additional							L		
repai escribe	ır job.See instruc	ctions as to Well Driller's	Regulation	n and	Reports	5.					

	LOCATION	SKETCH	WO-24
1) Community	East Patchogue	2	2)N.Y.S. Well#
3) Township	Brookhaven	4	l)Lat, Long.&Seq,#
5)Owner SuffolK Co	unty Department of Health Se	ervices	
6)Address	220Rabro Drive East	Hauppauge	N.Y.
7)Completion Date of	Well 7/24/2006	8) Aquifer Se	creened 40-45'
9)Des. of MP			
10)Elev. of MP>		11)Elev. of L	and Surface
12) MP At	at/above/below L	and Surface 1	3)Diam. of Casing 1"
14) Well Depth	50'	1	5) Screened Interval 5'
16) Type of Well	PVC	1	7) Depth to Water 9.61
18) Use of Well	Profile	19) Quadran	gle Name



County	Suffolk		- WO-2	25			Well Number	r			
	COMPLE	TION REPO	RT-L	ONO	ISI É	LAND W	ELL				
WNER								Т	L	OG	
	Suffolk Co	unty Departmer	t of H	<u>ealth</u>	Serv	rices		Gro	und Surf	ace	
DDRESS	220 Pobro	Dr East Hai	mnall	70 N		11700		 		- . ,	
OCATION (ZZU Kabio	Dr. East Hau	EL.		t. above se	ea —					
		hard Road, East	Patcl	noau	е						
Depth of We	ll Below Surface	·	Depth	to Gro	undwat	er From Surfac	ce		TOP (OF WELL	
	50"			12.42	•			♪ ↑	,		
Diameter		CASING				•		1			
	in.	in.			in.		in.				
ength		s.					5.]		1	
SEALING	ft.	ft.		LODEN	ft.		ft.	1			
SEALING				OPE	IIIVGS						
		SCREEN		r				┫ │			
Vlake				OPE	NINGS			1			
Johnson Diameter				ı	10slc	<u> </u>		-	40'		
	in.	in.			in.		in.		40		
ength	·	<i>a.</i>						1			
	ft. OP FROM TOP	ft.		T	ft.		ft.	┨ │			
40'		01 0/10/110									
		PUMP TES	Ť					1			
DATE				TEST	OR PE	RMANENT PL	JMP				
OURATION (OF TEST			MAXI	MUM D	SCHARGE		50'	\neg		
	days		hours				gallons per min.	-			
STATIC LEV	EL PRIOR TO TE	ST		LEVE	E DUR	ING MAXIMUN		1			
MAXIMUM D	ft.		in.	Annra	v timo	ft.	in. after of pumping	1			
	RAVIDOVIN		ft.	Appro	x. ume	hours					
		PUMPING INSTALLED	72,			nourc	, , , , , , , , , , , , , , , , , , , ,	1			
TYPE		MAKE				MODEL NUN	MBER	1		1	
		L WAVE						1			
MOTIVE PO	WER .	MAKE				H.P.		H			
Capacity								┨┤			
		g.p.m.a	gainst			ft. of d	ischarge head	1			
NUMBER OF	BOWLS OR STA	AGES					6 - 5 - 1 - 1 - 1 - 1				
							ft. of total head	1	*	S	
									5'	-	
	DROP LINE				DIA : 7	SUCTION LI	NE	1	ٻَا	e	
DIAMETER				in.	DIAME	EIER	in.		-	e	
ength.				111.	Length)		1	↓ ·	n	
				ft.			in.		*		
METHOD OF		,	Car		l	F WATER					
☐rotory NORK STAR	☐cable too	other	Geor	orobe	Test COMP	LETED		1		S	
	7/24/2006					/2006			5'	u m	
DATE	DRILLER		•			REGIS	TRATION NO.		Щ	'''	
1/25/2007	Fi	ank Basile					1834			'	
NOTE: Show	log of well mate	rials encountered with d	epth beid	w grou	nd surfa	ace water bear	ing beds	▼			
	_	screen pump additiona									

		LOCATION	SKETCH		WO-25	
1) Community	East Patch	ogue		2)N.Y.S. V	Vell#	
3) Township	Brookhave	n		_4)Lat, Lon	g.&Seq,#	
5)Owner SuffolK Co	ounty Depart	ment of Health	Services			
6)Address	220Rabro I	Orive East	Hauppauge	N.Y		
7)Completion Date of	Well	7/24/2006	8) Aquifer	Screened	40-45'	
9)Des. of MP						
10)Elev. of MP>_			11)Elev. o	f Land Surfa	ace	
12) MP At		at/above/below	Land Surface	13)Diam.	of Casing	1"
14) Well Depth	50'			15) Screen	ned Interval	5'
16) Type of Well	PVC			17) Depth	to Water	12.42'
18) Use of Well	Profile		19) Quadr	angle Name	e	



7/24/2006

Date

Sketch By

F. Basile

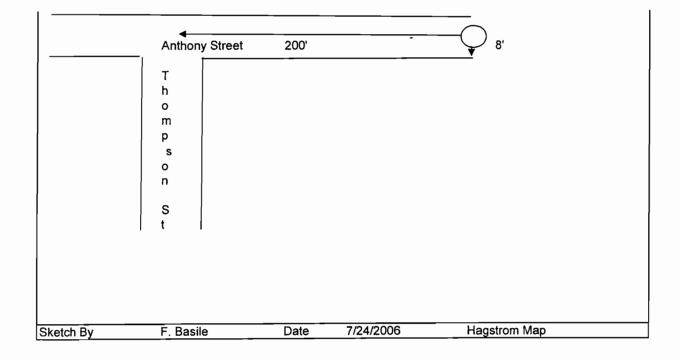
Hagstrom Map

CotintySt	uffolk —		WO-26	-				;r		
C	OMPLE	TION REPOR	۲۲-LC	ONC	ISL	AND	WELL			
OWNER		_						Т	·	_OG
S	uffolk Cou	inty Department	of He	ealth	Servi	ces		Gro	und Sur	face
ADDRESS 2'	20 Rahro I	Dr. East Haup	กกวเเต	_ N	J V 1	1788		₌ ,		Et above see
OCATION OF V	WELL	DI. East Mau	Jpaug	<u> </u>	N. I . I	1700		EL.		Ft. above sea
S	outh Orch	ard Road, East	Patch	ogu	е					
Depth of Well Be	elow Surface		Depth		undwate	r From	Surface	\Box	TOP	OF WELL
50	0"	CASING	7.39'					- ↑	, 📘	
Diameter		CASING						┦ │		1
1 in.		in.			in.		in.	╛	1	
Length		4			<u>-</u> -		4	1		
50 ft	<u> </u>	ft.		OPEN	ft.		ft.	1		
JE/IEII10				0, 2,						
		SCREEN						1		
Make Johnson				OPE	NINGS 10slot					
Diameter			_	<u> </u>	103101			1	40'	1 1
1 in	າ.	in.			in.		in.	┛╵]
Length 5 ft.		ft.			ft.		ft.	11		
DEPTH TO TOP	FROM TOP O	F CASING		_	11.		п.	1		
40'								J		
DATE		PUMP TEST		TECT	OB 855	BAA NIC	NIT DUMD	4		
DATE				1551	OK PER	(MANE	NT PUMP	11		
DURATION OF 1	TEST			MAXII	NUM DIS	CHAR	GE	50'	\neg	
	days		hours	. =	<u> </u>		gallons per min.	┟──		
STATIC LEVEL	PRIOR TO TES ft.	iT	in.	LEVE		NG MAI ft.	XIMUM PUMPING in.			
MAXIMUM DRAV				Appro			level after of pumping	1		
			ft.	• • •			hours min.			
	Pl	UMPING INSTALLED						1		
TYPE		MAKE				MODE	L NUMBER			
MOTIVE POWER	R	MAKE	_			H.P.		1		
	`									
Capacity	•	_	1					1		
NUMBER OF BO	NALS OR STAC	g.p.m.ag	jainst			1	t. of discharge head	┨ │		
NOW BERY OF BO	WES ON STAC	320					ft. of total head		\downarrow	
								1		- S
								4	5'	
DIAMETER DR	ROP LINE	<u> </u>			DIAMET		ON LINE	1 [7	' e
				in.			in.			e
ength					Length			1	₩	n
VETHOD OF DR	DILLING			ft.	USE OF	- \ <i>N</i> /ΔΤΙ	<u>in.</u>	4	↑	
rotory	Cable tool	other	Geop	robe		VVAIL	-11			s
NORK STARTE	D				COMPL			1 [u
	/24/2006 RILLER				7/24/2		REGISTRATION NO.	1	5'	m
1/25/2007		nk Basile					1834	H		' p
	110							Ţ	\downarrow	
-		als encountered with dep						┰		
	•	screen pump additional					rs of interest.			
Describe repair jo	b.See instruction	ons as to Well Driller's F	Regulatio	n and	Reports.					

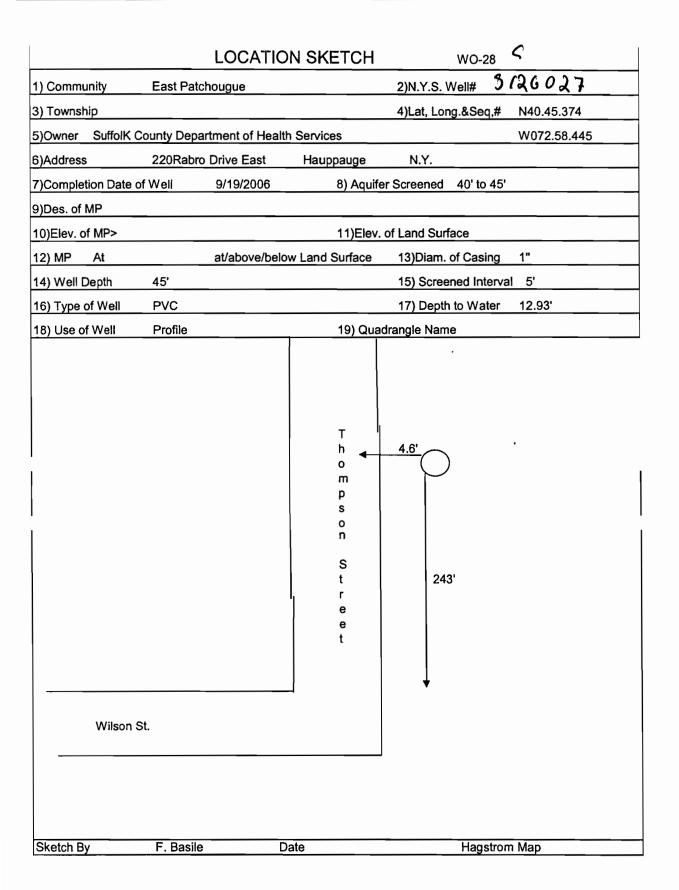
	LOCATION SKE	TCH WO-26
1) Community	East Patchogue	2)N.Y.S. Well#
3) Township	Brookhaven	4)Lat, Long.&Seq,#
5)Owner SuffolK C	ounty Department of Health Services	<u> </u>
6)Address	220Rabro Drive East Haupp	auge N.Y.
7)Completion Date o	f Well 7/24/2006 8	3) Aquifer Screened 40-45'
9)Des. of MP		
10)Elev. of MP>		11)Elev. of Land Surface
12) MP At	at/above/below Land St	urface 13)Diam. of Casing 1"
14) Well Depth	50'	15) Screened Interval 5'
16) Type of Well	PVC	17) Depth to Water 7.39'
18) Use of Well	Profile1	9) Quadrangle Name
	South Orchard Road	South Country Road 941'
•		17'

Suffolk		WO-27			Well Numbe	r			
COMPLI	ETION REPOR	RT-LON	G ISL	AND WEL	L				
DWNER O II II O							LOG		
Suffolk Co	ounty Department	t of Healt	h Servi	ices		Ground	d Surface		
	220 Rabro Dr. East Hauppauge N.Y. 11788								
OCATION OF WELL	Di. Last Haa	ppaage	14.1. 1	1700		EL	Ft. above sea		
	treet, East Patch	ogue				_			
Depth of Well Below Surface		•	roundwate	er From Surface		\Box	TOP OF WELL		
50'	CASING	7.72'				┤ ↑	TI		
Diameter	·					1			
1 in.	in.		in.		in.	1			
_ength 50 ft.	ft.		ft.		ft.				
SEALING	16.	OPi	ENINGS		11,	1			
Vlake	SCREEN	10	PENINGS]			
Johnson			10slo	t					
Diameter	1	•		·	1	1 4	·o'		
1 in.	in.		in.		in.	┧│└			
Length 5 ft.	ft.		ft.		ft.				
DEPTH TO TOP FROM TOP			:			1			
40'						1			
DATE	PUMP TEST		T OR PER	RMANENT PUMP		+			
571,72							_		
DURATION OF TEST		MAX	CIMUM DIS	SCHARGE		50'			
days STATIC LEVEL PRIOR TO TE	-et	hours	/FI DITRI	gallo NG MAXIMUM PUI	ns per min.	∤	-		
ft.	.01	in.		ft.	in.	1			
MAXIMUM DRAWDOWN				f return level after	of pumping	1			
	PUMPING INSTALLED	ft.		hours	min.]			
 TYPE	MAKE		1	MODEL NUMBER		1			
111 -	IVICINE			MODEL NOMBEN					
MOTIVE POWER	MAKE			H.P.		1			
]			
Capacity	g.p.m.ag	nainet		ft. of discha	rae head				
NUMBER OF BOWLS OR ST		gamor		rt. or discrib	ige nead	1			
				ft. o	total head	<u> </u>	▼		
						_	<u> </u>		
DROP LINE				SUCTION LINE		1 [5'		
DIAMETER			DIAME	TER		1	e		
Lanath		in.	Length		in.	┨ │			
Length		ft.	Length		in.		* ' '		
METHOD OF DRILLING			1	WATER		1			
rotory Cable too	ol d other	Geoprob	E Test COMPL	ETEN			s		
WORK STARTED 7/24/2006			7/24/2			г	1 u 5' m		
DATE DRILLER		1	: 12-7/2	REGISTRA	TION NO.	1 L	'''		
1/25/2007 F	rank Basile			183	4				
*NOTE: Show log of well mate	rials encountered with de	nth below ar	und surfa	ce water bearing be	eds -		*		
and water levels in each casing		-							
Describe repair job.See instruc	= : :								

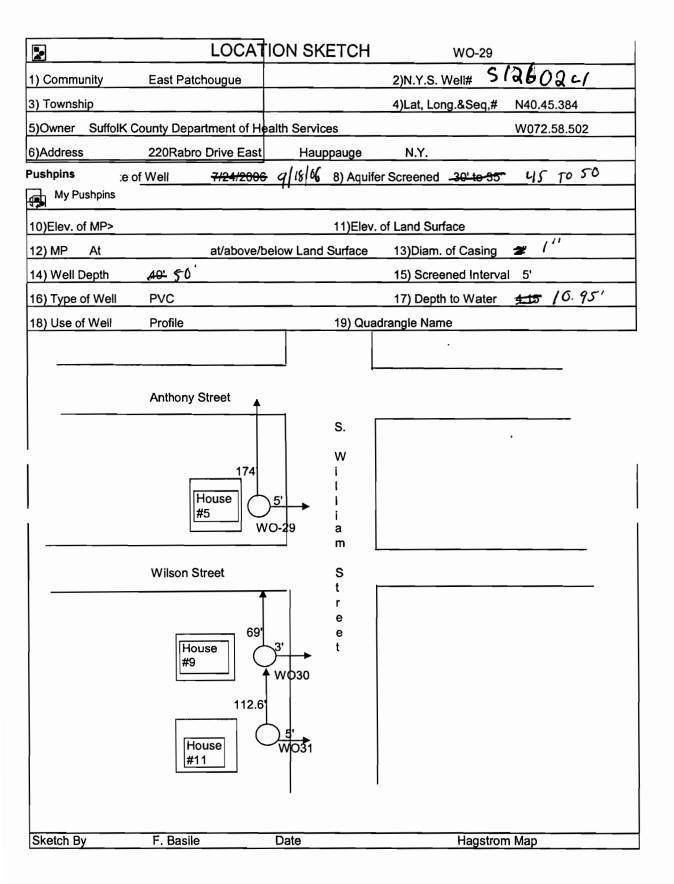
	LOCA	TION SKETCH	WO-27
1) Community	East Patchogue		2)N.Y.S. Well#
3) Township	Brookhaven		4)Lat, Long.&Seq,#
5)Owner SuffolK C	county Department of H	lealth Services	
6)Address	220Rabro Drive East	t Hauppauge	N.Y.
7)Completion Date of	f Well 7/24/200	6 8) Aquife	r Screened 40-45'
9)Des. of MP			
10)Elev. of MP>		11)Elev.	of Land Surface
12) MP At	at/above/	below Land Surface	13)Diam. of Casing 1"
14) Well Depth	50'		15) Screened Interval 5'
16) Type of Well	PVC		17) Depth to Water 7.72'
18) Use of Well	Profile	19) Quad	Irangle Name



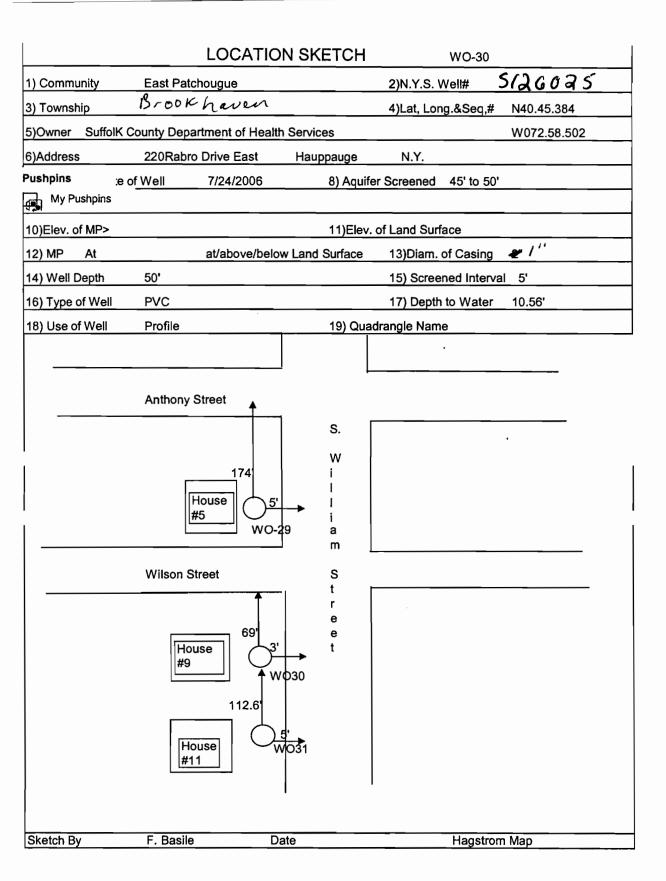
Sounty Suffolk Well Number **COMPLETION REPORT-LONG ISLAND WELL DWNER** Suffolk County Department of Health Services Ground Surface ADDRESS 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea **OCATION OF WELL** S William Street TOP OF WELL Depth of Well Below Surface Depth to Groundwater From Surface 45' 12.93' CASING Diameter 1 in. in. in. in. Length 40 ft. ft. ft. ft. SEALING **OPENINGS** SCREEN Make OPENINGS Johnson 10slot Diameter 40' 1 in. in. in. in. Length 5 ft. ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP MAXIMUM DISCHARGE **DURATION OF TEST** 45' gallons per min. hours days LEVEL DURING MAXIMUM PUMPING STATIC LEVEL PRIOR TO TEST ft. ft. in. MAXIMUM DRAWDOWN Approx, time of return level after of pumping ft. hours min. PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' SUCTION LINE DROP LINE DIAMETER DIAMETER е in. in. n Length Length in. METHOD OF DRILLING USE OF WATER Test rotory cable tool other Geoprobe s COMPLETED WORK STARTED п 9/19/2006 9/19/2006 m REGISTRATION NO. DATE DRILLER р Frank Basile 1834 1/3/2007 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



Suffolk Well Number Sounty-COMPLETION REPORT-LONG ISLAND WELL **DWNER** Suffolk County Department of Health Services Ground Surface **ADDRESS** 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea LOCATION OF WELL S William Street Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 50' 10.95 CASING Diameter 1 in. in. in. in. Length 45 ft. ft. ft. ft. SEALING OPENINGS SCREEN Make **OPENINGS** Johnson 10slot Diameter 45' 1 in. in. in. in. Length ft. 5 ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP **DURATION OF TEST** MAXIMUM DISCHARGE 50' gallons per min.
LEVEL DURING MAXIMUM PUMPING hours days STATIC LEVEL PRIOR TO TEST ft. in. ft. I in. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours min. PUMPING INSTALLED **TYPE** MODEL NUMBER MAKE MOTIVE POWER MAKE H.P. Capacity ft. of discharge head g.p.m.against NUMBER OF BOWLS OR STAGES ft. of total head 5' DROP LINE SUCTION LINE DIAMETER DIAMETER е in. in. n Length Length USE OF WATER METHOD OF DRILLING other Geoprobe Test 7 rotory cable tool S COMPLETED WORK STARTED u 9/18/2006 9/18/2006 m REGISTRATION NO. DATE DRILLER р Frank Basile 1834 1/3/2007 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.

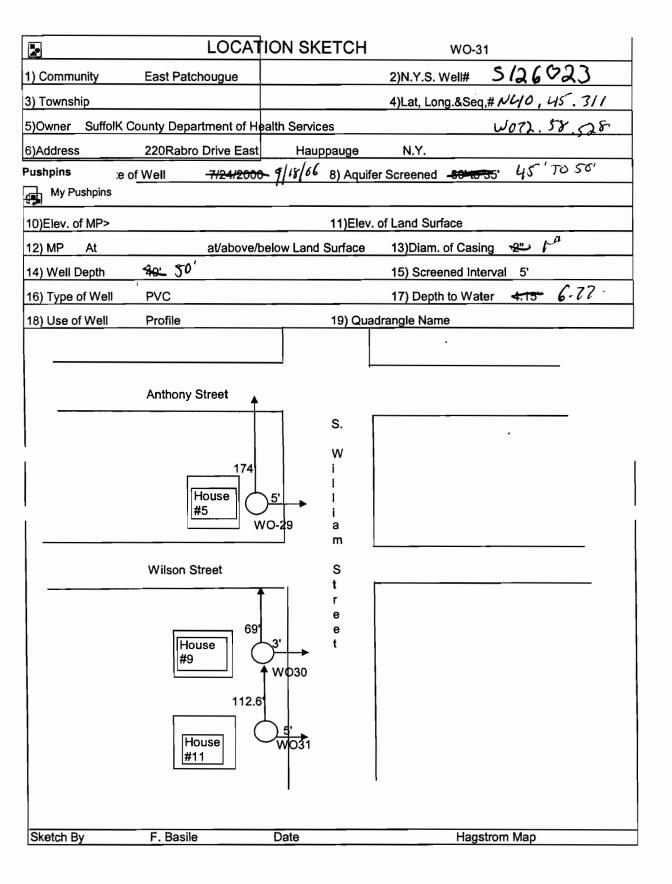


26025 Suffolk County Well Number **COMPLETION REPORT-LONG ISLAND WELL DWNER** Suffolk County Department of Health Services Ground Surface ADDRESS 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea **LOCATION OF WELL** S William Street Depth of Well Below Surface TOP OF WELL Depth to Groundwater From Surface 50' 10.56 CASING Diameter 1 in. in. in. in. Length 45 ft. ft. ft. ft. SEALING **OPENINGS** SCREEN Make **OPENINGS** Johnson 10slot Diameter 45' 1 in. in. in. in. 5 ft. ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP MAXIMUM DISCHARGE **DURATION OF TEST** 50' hours gallons per min. STATIC LEVEL PRIOR TO TEST LEVEL DURING MAXIMUM PUMPING in. ft. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours min. PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity g.p.m.against ft. of discharge head NUMBER OF BOWLS OR STAGES ft. of total head 5' SUCTION LINE DROP LINE DIAMETER DIAMETER е in. in. n Length Length METHOD OF DRILLING USE OF WATER cable tool Geoprobe Test other rotory s WORK STARTED COMPLETED u 9/18/2006 9/18/2006 m DATE DRILLER REGISTRATION NO. p 1/3/2007 Frank Basile 1834 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds and water levels in each casing screen pump additional pumping test and other matters of interest.



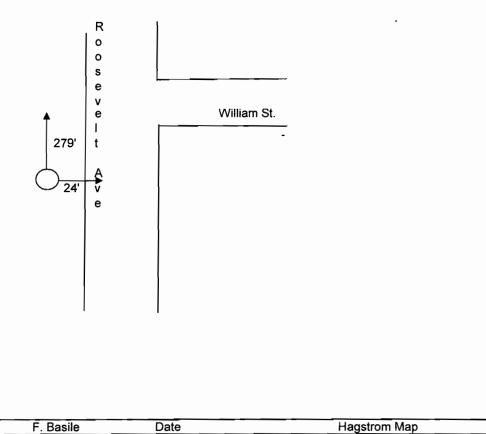
Well Number 5 176023 Suffolk Gounty -**COMPLETION REPORT-LONG ISLAND WELL** OWNER Suffolk County Department of Health Services Ground Surface **ADDRESS** 220 Rabro Dr. East Hauppauge N.Y. 11788 Ft. above sea LOCATION OF WELL South Country Road, East Patchouge Depth of Well Below Surface Depth to Groundwater From Surface TOP OF WELL 50' 6.77 CASING Diameter 1 in. in. in. in. Length 45 ft. ft. ft. ft. SEALING OPENINGS SCREEN Make **OPENINGS** Johnson 10slot Diameter 45' 1 in. in. in. in. Lenath 5 ft. ft. ft. DEPTH TO TOP FROM TOP OF CASING **PUMP TEST** DATE TEST OR PERMANENT PUMP **DURATION OF TEST** MAXIMUM DISCHARGE 50 days hours gallons per min. STATIC LEVEL PRIOR TO TEST LEVEL DURING MAXIMUM PUMPING in. ft. MAXIMUM DRAWDOWN Approx. time of return level after of pumping ft. hours min. PUMPING INSTALLED TYPE MAKE MODEL NUMBER MOTIVE POWER MAKE H.P. Capacity ft. of discharge head g.p.m.against NUMBER OF BOWLS OR STAGES ft. of total head 5' DROP LINE SUCTION LINE DIAMETER DIAMETER in. in. Length n Length ft. in. METHOD OF DRILLING USE OF WATER other Geoprobe Test rotory __cable tool COMPLETED u 9/18/2006 9/18/2006 m DATE DRILLER REGISTRATION NO. 1/3/2007 Frank Basile 1834 *NOTE: Show log of well materials encountered with depth below ground surface water bearing beds

and water levels in each casing screen pump additional pumping test and other matters of interest.



Sunty		WO-32			vveii Numbe	·	
COMPLET	ION REPOR	T-LON	IG ISL	AND WE	LL		
OWNER					_		LOG
Suffolk Coun	Suffolk County Department of Health Services						
ADDRESS	r Foot Hous	naugo	NV 1	1700		<u> </u>	
LOCATION OF WELL	r. E <u>ast</u> Haup	pauge	IN. T. I	11/00		EL	Ft. above sea
Roosevelt Ave., East Patch	ouque						ft.
Depth of Well Below Surface		Depth to C	Groundwat	er From Surface		TC	P OF WELL
50'			1.28'			」↑ 1	^
Diameter	CASING					4	
1 in.	in.		in.		in.		
Length						1	
45 ft.	ft.	105	ft.		ft.	4	
SEALING		OP	ENINGS				
	SCREEN			_		1	
Make			PENINGS			1	
Johnson Diameter			10sic	ot		1	
1 in.	in.		in.		in.	45'	
Length						1	
5 ft.	ft.		ft.		ft.	.	
DEPTH TO TOP FROM TOP OF (JASING						
	PUMP TEST			<u> </u>		┫	
DATE		TE	ST OR PE	RMANENT PUM	-	1	
SUBATION OF TEST			VIKALIKA M	POUMBOE		<u> </u>	
DURATION OF TEST days		hours	XIMOM DI	SCHARGE	llons per min.	50'	
STATIC LEVEL PRIOR TO TEST			VEL DUR	ING MAXIMUM P		-	
ft.		in.		ft.	in.]	
MAXIMUM DRAWDOWN			orox. time	of return level afte	· · · ·	1	
PUN	PING INSTALLED	ft.		hours	min.	.	
	MAKE			MODEL NUMBE		1	
2							
MOTIVE POWER N	MAKE			H.P.		1	
O						.	
Capacity	g.p.m.aga	ainet		ft of disch	narge head		
NUMBER OF BOWLS OR STAGE		allist		11. 01 2100.	large field	1	
				ft.	of total head	J ∣ ∳	, s
						$ \ \ \bot$	
DROP LINE	_		-	SUCTION LINE		5'	
DIAMETER			DIAME		-	$H \mid T$	
		in			in.]]]	е
Length		_	Length			│	, n
METHOD OF DRILLING		ft.	USE O	F WATER	in.	┨ │	·
rotory	other	Geoprob	- 1			1	s
WORK STARTED			COMP	LETED		1	_ u
9/27/2006			9/27/	2006	ATION NO.	1	m
DATE DRILLER 1/4/2007 Frank	k Basile			ľ	34	$I \sqcup T$	_ b
				_]	,
*NOTE: Show log of well materials	encountered with dep	th below gr	ound surfa	ace water bearing	beds	 	
and water levels in each casing scr	een pump additional p	oumping tes	st and othe	er matters of intere	est.		

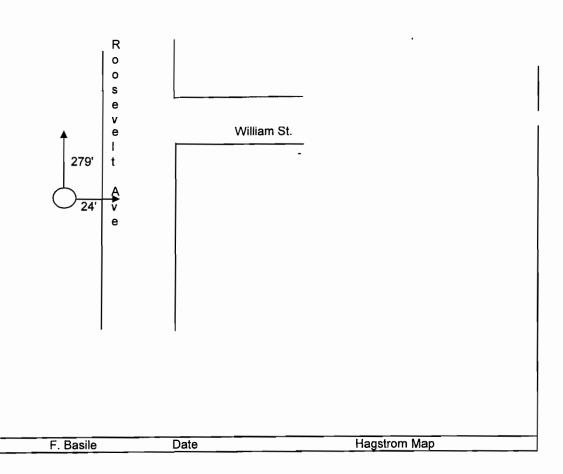
		LOCATIO	N SKETCH	<u> </u>	WO-32	
1) Community	East Patch	ougue		2)N.Y.S. \	Nell#	
3) Township	Brookhave	n		4)Lat, Lor	g.&Seq <u>.</u> #	
5)Owner SuffolK Co	ounty Depar	tment of Healt	h Services			
6)Address	220Rabro	Drive East	Hauppauge	N.Y.		
7)Completion Date of	Well_	9/27/2006	8) Aqu	ifer Screened	45' to 50'	
9)Des. of MP						
10)Elev. of MP>			11)Ele	v. of Land Surf	ace	
12) MPAt		at/above/belo	w Land Surface	13)Diam.	of Casing	1"
14) Well Depth	50'			15) Scree	ned Interval	l 5'
16) Type of Well	PVC			17) Depth	to Water	1.28'
18) Use of Well	Profile		19) Qı	adrangle Nam	e	



Sketch By

Sounty Surioik	VVO-54 -						
COMPLETION REPOR	T-LON	G ISLAND V	NELL				
OWNER				Ground S	LOG		
Suffolk County Department ADDRESS	Suffolk County Department of Health Services						
	nauge	N.Y. 11788		EL.	Ft. above sea		
LOCATION OF WELL	paage .	11.1.11700		 	Ft. above sea		
Roosevelt Ave., East Patchougue					ft.		
Depth of Well Below Surface	Depth to Gro	oundwater From Surf	face	TO	P OF WELL		
50' CASING		1.28'		┨ॏॏ	.		
Diameter				- 			
1 in. in.		in.	in.]			
Length 45 ft. ft.		ft.	ft.] [
SEALING	OPE	NINGS	IL.	-1			
SCREEN		ELINIOA .		1			
Make Johnson	UPI	ENINGS 10slot					
Diameter		103101		45	$\neg $		
1 in. in.		in	in.] [_		
Length 5 ft. ft.		ft.	ft.	1			
DEPTH TO TOP FROM TOP OF CASING		II.	IL.	4			
PUMP TEST				1			
DATE	1551	OR PERMANENT F	PUMP				
DURATION OF TEST	MAXI	MUM DISCHARGE		50'			
days	hours		gallons per min.	\parallel			
STATIC LEVEL PRIOR TO TEST	I	EL DURING MAXIMI]			
ft. MAXIMUM DRAWDOWN	in.	ft. ox. time of return leve	In.	.			
NIVARIOR DIVIVOCTIT	ft.	hou					
PUMPING INSTALLED				1			
TYPE MAKE		MODEL NU	JMBER				
MOTIVE POWER MAKE		H.P.		1			
Capacity	-:	# of					
g.p.m.aga NUMBER OF BOWLS OR STAGES	ainst	IL. UI	discharge head	1			
			ft. of total head		, s		
				lacksquare			
DROP LINE		SUCTION		5'			
DIAMETER		DIAMETER	LINE	$H \mid \top$			
	in.		in.]]	e		
Length	4	Length	:	🛊	n n		
METHOD OF DRILLING	ft.	USE OF WATER	in.	 			
rotory cable tool other	Geoprobe	Test			s		
WORK STARTED		COMPLETED	-	▍│┌┴	u		
9/27/2006 DATE DRILLER		9/27/2006	ISTRATION NO.	!	_ m _		
1/4/2007 Frank Basile		,,,,	1834		_ p		
*NOTE: Show log of well materials encountered with dep				* *	· -		

		LOCATIO	N SKETCH		WO-34	
1) Community	East Pa	chougue		2)N.Y.S. \	Vell#	
3) Township	Brookha	ven		4)Lat, Lor	ıg.&Seq,#	
5)Owner SuffolK	County Dep	artment of Healt	h Services			
6)Address	220Rab	o Drive East_	Hauppauge	N.Y.		
7)Completion Date	of Well	9/27/2006	8) Aquife	r Screened	45' to 50'	
9)Des. of MP						
10)Elev. of MP>			11)Elev.	of Land Surf	ace	
12) MPAt		at/above/belo	w Land Surface	13)Diam.	of Casing 1"	
14) Well Depth	_50'			15) Scree	ned Interval 5'	
16) Type of Well	PVC			17) Depth	to Water 1.28'	
18) Use of Well	Profile		19) Quad	drangle Nam	e	



Sketch By

Sounty 	Suffolk —		-WO-36				12	602
,	_	TION REPOR	T-LONG	ISL				
OWNER					_	Π	L	OG
ADDRESS	Suffolk County Department of Health Services					Gro	und Surf	ace
	220 Rabro	Dr. East Haup	pauge N	I.Y. 1	11788	EL.	F	- -t. above sea
LOCATION OF			<u> </u>			ᢡ		
S William S			Don'th to Cro		in From Curton	╄	TOD	ft. DF WELL
•	Below Surface 50'		Depth to Grot	6.79'	er From Surface	┢	1000	T
		CASING				1		
Diameter 1	n l	in.		in.	in.	$ \cdot $		
.ength	-				:	1		
45	ft.	ft.	OPEN	ft.	ft.	1		
EALING			OPEN	11100				
		SCREEN	1055	MINA		1		
Make Johnson			OPE	NINGS 10slc				
iameter	. 1	. 1	'			1	45'	
ength 1	in.	in.		in.	in.	$ \cdot $	\Box	
5 1		ft.		ft.	ft.			
EPTH TO TO	P FROM TOP C	OF CASING			•	1		
		PUMP TEST				1		
ATE			TEST	OR PE	RMANENT PUMP	1		
URATION OF	TEST		MAXIN	NUM D	ISCHARGE	50'		
	days		hours		gallons per min.	┢─┬		
TATIC LEVE	PRIOR TO TE	ST	in.	L DUR	ft. in.			
MAXIMUM DR	<u> </u>		Approx	c. time	of return level after of pumping	1		
		PUMPING INSTALLED	ft.	_	hours min.	1		
YPE	,	MAKE			MODEL NUMBER	1		
]		
IOTIVE POW	ER	MAKE			H.P.			
apacity			1			1		
II IMPED OF E	BOWLS OR STA	g.p.m.ag	ainst		ft. of discharge head	┨│		
VOINDER OF L	JOWES ON STA	IGLO			ft. of total head		\	
			·			1		6
Г	DROP LINE				SUCTION LINE	┨╢	5'	 [-
DIAMETER				DIAME	ETER	1		e
ength	_		in.	Length	in	$\ \cdot \ $	<u> </u>	n
			ft.	-	in.]	*	
METHOD OF D		I dther	Geograpa		OF WATER			
] rotory VORK START	□cable too	otner	Geoprobe	COMP	LETED	1		s u
	9/18/2006			9/18	/2006 REGISTRATION NO.	1		m
1/3/2007	ORILLER Fr	ank Basile			1834		\top	p
						. ↓	\downarrow	
		ials encountered with de screen pump additional						
		tions as to Well Driller's F						

	LUCATIO	N SKETCH	WO-3	6 .
East Patch	ougue		2)N.Y.S. Well#	5126026
			4)Lat, Long.&Seq	,# N40.45.360
unty Depart	ment of Health	n Services		W072.58.328
220Rabro I	Orive East	Hauppauge	N.Y.	
Well	9/18/2006	8) Aquife	er Screened 45' to	50'
		11)Elev.	of Land Surface	
	at/above/belo	w Land Surface	13)Diam. of Casi	ng 1"
50'			15) Screened Inte	erval 5'
PVC			17) Depth to Wat	er <u>6.</u> 79
Profile		19) Qua	drangle Name	
	752'	Moss Creek Lane	Springview CT.	
E Booile		late.	Шоло	strom Map
	unty Depart 220Rabro I Well 50'	220Rabro Drive East Well 9/18/2006 at/above/belo 50' PVC Profile	unty Department of Health Services 220Rabro Drive East Hauppauge Well 9/18/2006 8) Aquife 11)Elev. at/above/below Land Surface 50' PVC Profile 19) Qua M o s s s C C r e e e k k 752' L a n e e	4)Lat, Long. & Sequenty Department of Health Services 220Rabro Drive East Hauppauge N.Y. Well 9/18/2006 8) Aquifer Screened 45' to 11)Elev. of Land Surface at/above/below Land Surface 13)Diam. of Casing Screened Interpretation of Land Surface 17) Depth to Wate 19) Quadrangle Name Springview CT. Moon Signature 19 CC r e e k 752' L a n e

County Suffork		WO-38 —			er		
COMPLE	TION REPOR	T-LONG	SISLAND	WELL			
OWNER						LOG	
Suffolk Cou	Suffolk County Department of Health Services						
	Dr. East Haup	nauge 1	J V 11788		E1	Et above see	
LOCATION OF WELL	Di. Last Haup	pauge i	1.1. 11700		EL	_Ft. above sea 	
Private Road, East Patch	nougue					———ft.	
Depth of Well Below Surface		Depth to G	oundwater From	n Surface	TOP	OF WELL	
80'	CASING		11.19'		↑ ↑		
Diameter	CASING				\mathbf{H}^{\cdot}		
1 in.	in.		in.	<u>in.</u>			
Length 75 ft.	ft.		ft.	ft.			
SEALING	rt.	IOPE	NINGS	11.	- 		
	SCREEN		EUWAA		_ 1	1 1	
Make Johnson		OF	PENINGS 10slot				
Diameter			105101		75']	
<u>1 in. </u>	in.		in.	in.]	
Length 5 ft.	ft.		ft.	ft.			
DEPTH TO TOP FROM TOP C			16.	16.	\dashv \mid \mid		
DATE	PUMP TES		T OR PERMANE	ENT DUMP	4		
DATE		1123	OK PERIVANI	ENT POWP			
DURATION OF TEST	ION OF TEST MAXIMUM DISCHARGE						
days	<u> </u>	hours	EL BUIDING W	gallons per min.			
STATIC LEVEL PRIOR TO TE	51	in.	TEL DURING WIF	in.			
MAXIMUM DRAWDOWN				n level after of pumping	-1		
		ft		hours min.	_		
TYPE	PUMPING INSTALLED MAKE		MODE		-		
TITE	WARE		MODE	EL NUMBER			
MOTIVE POWER	MAKE		H.P.		7	1 1	
					_		
Capacity		:		A of discharge bond			
NUMBER OF BOWLS OR STA	g.p.m.a	gainst		ft. of discharge head			
				ft. of total head	_		
					$1 \mid \bot$	6	
DROP LINE			SUCT	ION LINE	5'	╟╼	
DIAMETER			DIAMETER	ION LINE	\dashv \mid \top	" e 	
		in.		in.	4 1	e	
Length		ft.	Length	i.	🛨	n	
METHOD OF DRILLING		IL	USE OF WAT	ER in.	$\dashv \mid \uparrow$	1 1	
rotory cable tool	other	Geoprobe	Test			s	
WORK STARTED			COMPLETED			u	
10/26/2006 DATE DRILLER			10/26/2006	REGISTRATION NO.	┨│└┴	m	
I	rank Basile			1834		P	
***************************************		d. b. d.		handa had			
*NOTE: Show log of well materi and water levels in each casing							
and mater levels in each casing	Scient purity additional	Partibility (est a	ourer maner	o or interest.		1 I	

Hagstrom Map

R d

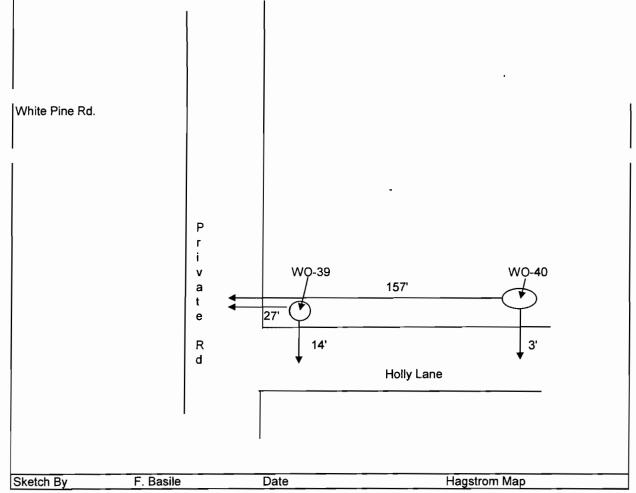
Date

F. Basile

Sketch By

COMPLETION	REPORT-L	ONG	ISLAND	WELL		
Suffolk County Department of Health Services						LOG und Surface
ADDRESS 220 Rabro Dr. Ea	st Hauppau	iae N	Y. 11788	-	EL.	Ft. above se
OCATION OF WELL	от папрас	<u>.go 11</u>			<u> </u> -	1 t. above se
Holly Lane, East Patchougue Depth of Well Below Surface		nth to Gro	undwater From	Surface		TOP OF WELL
60'		pin to Gio	7.53'	Surface	★	A TOP OF WELL
Diameter	CASING					
1 in.	in.		in.	in.		
ength 55 ft.	ft.			£4		
EALING	1L.	OPEN	ft.	ft.		
	SCREEN					
lake	SCREEN	OPE	NINGS			
Johnson			10slot			
1 in.	in.		in.	in.		55'
ength	<u> </u>		<u>т</u>	£		
5 ft. DEPTH TO TOP FROM TOP OF CASIN	ft. G		ft.	ft.		
	DI 140 TEAT					
ATE	PUMP TEST	TEST	OR PERMANE	NT PUMP		
DURATION OF TEST	_	NAA VII	MUM DISCHAR		60'	_
days	hou		IIUIVI DISCHAR	gallons per mi	1	_
STATIC LEVEL PRIOR TO TEST		LEVE		XIMUM PUMPING		
ft.		n. Appro	ft.	level after of pumping	n.	
	ft	1			nin.	
YPE PUMPING	SINSTALLED		MODE	L NUMBER		
772			MODE	E NOWBER		
NOTIVE POWER MAKE			H.P.			
apacity					-	
UMBER OF BOWLS OR STAGES	g.p.m.agains	t		ft. of discharge head		
				ft. of total hea	. 	↓ e
DROP LINE			SUCTI	ON LINE		5'
NAMETER		in	DIAMETER	_	-	e
ength		in.	Length		in.	$\downarrow \frac{c}{n}$
IETHOD OF DOWN INC.		ft.		-	in.	
TOTOTY CALLING CONTROL	other Ge	oprobe	USE OF WATE	=K		s
ORK STARTED		~~~	COMPLETED		$\neg $	u
10/27/2006 ATE DRILLER			10/27/2006	REGISTRATION NO.	-	m
1/4/2007 Frank Ba	sile			1834		p
NOTE: Show log of well materials encou	ntered with denth hal	OW OFFICE	surface water	hearing heds	$-\downarrow$	+
nd water levels in each casing screen pu				-		
escribe repair job.See instructions as to		_				

	LOCATIO	N SKETCH	WO-39	
1) Community	East Patchougue		2)N.Y.S. Well#	
3) Township	Brookhaven		4)Lat, Long.&Seq,#	N40. 45.205
5)Owner Suffolk Co	unty Department of Health	Services		W072. 58.758
6)Address	220Rabro Drive East	Hauppauge	N.Y	
7)Completion Date of	Well 10/27/2006	8) Aquifer	Screened 55 to 60	
9)Des. of <u>M</u> P				· <u>-</u>
10)Elev. of MP>		11)Elev. o	of Land Surface	
12) MP At	at/above/belov	w Land Surface	13)Diam. of Casing	1"
14) Well Depth	60'		15) Screened Interval	5'
16) Type of Well	PVC		17) Depth to Water	7.53'
18) Use of Well	Profile	19) Quadi	rangle Name	



County Suffolk		lumber
	RT-LONG ISLAND WELL	
Suffolk County Departme	nt of Health Services	LOG Ground Surface
ADDRESS 220 Rabro Dr. Fast Ha	uppaugo NV 11700	
220 Rabro Dr. East Ha	uppauge N.T. 11706	EL. Ft. above sea
Holly Lane, East Patchougue		————ft.
Depth of Well Below Surface	Depth to Groundwater From Surface	TOP OF WELL
60'	4.79'	─ ┃ ↑ ↑ ↓
Diameter		
1 in. in.	in. in.	
55 ft. ft.	ft. ft.	
SEALING	OPENINGS	
SCREEN		
Make	OPENINGS	-
Johnson	10slot	
Diameter 1 in. in.	in. in.	55'
Length		
5 ft. ft. The state of the	ft. ft.	
DEPTH TO TOP FROM TOP OF CASING		
PUMP T		
DATE	TEST OR PERMANENT PUMP	
DURATION OF TEST	MAXIMUM DISCHARGE	60'
days	hours gallons per mi	n
STATIC LEVEL PRIOR TO TEST ft.	in. LEVEL DURING MAXIMUM PUMPING	in.
MAXIMUM DRAWDOWN	Approx. time of return level after of pumping	
	ft. hours r	nin.
PUMPING INSTALLE TYPE MAKE	MODEL NUMBER	
IVIARE	MODEL NOMBER	
MOTIVE POWER MAKE	H.P.	
Capacity		
	n.against ft. of discharge head	
NUMBER OF BOWLS OR STAGES		
	ft. of total hea	d
		5' -
DROP LINE	SUCTION LINE	
DIAMETER	DIAMETER in.	in.
Length	Length	
METHOD OF DRILLING	ft. USE OF WATER	in.
rotory Cable tool other		
WORK STARTED	COMPLETED	─ ┤
10/27/2006 DATE DRILLER	10/27/2006 [REGISTRATION NO.	
1/4/2007 Frank Basile	1834	
		↓ ↓
*NOTE: Show log of well materials encountered with of and water levels in each casing screen pump addition		
Describe repair job. See instructions as to Well Driller		

County	Suffolk		WO15 Well Number							
,	COMPL	ETIO HE EPOI	RT-LON	IG ISL	_AND	WELL				
OWNER	COMPLETIO ** KEPORT-LONG ISLAND WELL								G	_
	Suffolk C	t of Heal	of Health Services				Ground Surface			
ADDRESS										
	<u>360 Yaph</u>	ank Av a uite C	Yaph	Yaphank NY. 11980				Ft.	. above	sea
LOCATION		ook La	Pollno	4						
Denth of We	Moss Cro II Below Surface		Bellpor		er From Su	face	-	OP OF	F WELL	ft.
Dopur or TVO		40'	Вори то с	5.4.	or riom ou	11000	A	<u>5, 0,</u>	VVLL	- I
		ASING		<u> </u>			1	1 1		
Diameter	1						1			
Length 2	? in.	in.		in.		in.	4			
	i ft.	_#		ft.		ft.				
SEALING		<u> </u>	OP	ENINGS		1.,	1			
		SCREEN]			
Make			O	PENINGS						
Johnson Diameter				10slc)L		30	 -		
	! in.	in.		in.		in.				
Length					_		1			
	ft.	ft.		ft.	_	ft	1			
DEPIH TO	OP FROM TOP	OF CASING								
		PUMP TES	iT				1	$ \cdot $		
DATE										
DURATION (XIMUM D	ISCHARGE		740			
STATICLEV	days EL PRIOR TO	TEST TO THE STATE OF THE STATE	hours	VEL DUR	ING MAXIN	gallons per min. IUM PUMPING				
0171110 224	ft.		in.	VEL 50.1	ft.	in.				
MAXIMUM D				rox. time		el after of pumping	┦	1 1		
ft. hours min.										
PUMPING INSTALLED										
TYPE	MAKE MODEL N					IUMBER		11		
MOTIVE PO	WED	MAKE			H.P.		4	1		
MOTIVE FO	VVER	IVIANE			п.с.					
Capacity				-			1]			
		g.p.m.a	against		ft. c	of discharge head]	1		
NUMBER OF	BOWLS OR S	TAGES					1			
						ft. of total head	4 '	*	_s	
							▮ା_	┸┰┼	-c -	
	DROP LINE				SUCTION	I I INF	┨	5' ∦	-r	
DIAMETER	DROF EINE			DIAME			┫	T	-е-	
			in	١.		in.		Ιİ	е	
Length				Length	1		1] -	ullet	n	
NETUAD A	DDILLING.		ft.	LICE C	TE WATER	in.	4 '	↑		
METHOD OF	- DRILLING ☐cable t	ool d other	Auger	Test	OF WATER		$I \perp$	11		
rotory WORK STAF		oui ei	Augei		PLETED		- 		s	
	5/25/2006				/2006			5'	u m	
DATE	DRILLER					GISTRATION NO.	1 🗀	-	1	
5/25/2006	3	Frank lannazzo				1658			р	
*NOTE: Share	u log of well ====	terials encountered with d	onth holaw =	ound oud	200 Water 5	ooring hode	<u> </u>	₩		
	_	terials encountered with d ing screen pump additiona				•				
WIND HOLDING	rois in cacin casi	ng soreen parrip availlore	a pumping le	3. and 001	or maners t	/ IIIGIGOL				