

**ENVIRONMENTAL PROTECTION DIVISION
 DRINKING WATER PROGRAM
 GROUND WATER OPERATION REPORT**

| | | | |
|---------------------------------|------------------------------|--------------------|----------------|
| System Name: | <u>Surfside Club Estates</u> | WSID #: | <u>1390016</u> |
| Source Well/ Plant Name: | | Plant ID# : | |
| County: | <u>Hall</u> | Permit # : | |
| Summary of (MONTH): | <u>December</u> | (YEAR): | <u>2024</u> |

| Day of Month | Water Pumped from Groundwater Sources (Gallons) | | | | Amount of Fluoride Used (lb or gal) | Finished Water Analysis | | | Remarks |
|-------------------|---|-----------|---------------|---------------|-------------------------------------|--------------------------------|-----------------|-----------------|---------------------|
| | Well #1 | Well #3 | Well #4 | Well #5 | | Chlorine Free Available (mg/L) | Fluoride (mg/L) | pH Value (S.U.) | |
| 1 | 1094683 | 905 | 3678079 | 15156026 | | 1.0 | | | |
| 2 | | | | | | 0.8 | | | |
| 3 | | | | | | 0.9 | | | |
| 4 | | | | | | 0.7 | | | |
| 5 | | | | | | 0.9 | | | |
| 6 | | | | | | 1.0 | | | |
| 7 | | | | | | 1.1 | | | |
| 8 | | | | | | 0.9 | | | |
| 9 | | | | | | 0.8 | | | |
| 10 | | | | | | 0.9 | | | |
| 11 | | | | | | 1.0 | | | |
| 12 | | | | | | 0.8 | | | |
| 13 | | | | | | 0.7 | | | |
| 14 | | | | | | 0.7 | | | |
| 15 | | | | | | 0.9 | | | |
| 16 | | | | | | 1.0 | | | |
| 17 | | | | | | 1.2 | | | |
| 18 | | | | | | 1.3 | | | |
| 19 | | | | | | 1.0 | | | |
| 20 | | | | | | 1.2 | | | |
| 21 | | | | | | 1.1 | | | |
| 22 | | | | | | 0.9 | | | |
| 23 | | | | | | 0.9 | | | |
| 24 | | | | | | 1.0 | | | |
| 25 | | | | | | 1.2 | | | |
| 26 | | | | | | 0.9 | | | |
| 27 | | | | | | 0.9 | | | |
| 28 | | | | | | 1.0 | | | |
| 29 | | | | | | ..9 | | | |
| 30 | | | | | | 1.2 | | | |
| 31 | 1094683 | 905 | 3860502 | 15686044 | | | | | |
| Total Prod | 0 | 0 | 212962 | 468996 | 0 | 0 | 0 | 0 | Total 681958 |
| Days | 31 | 31 | 31 | 31 | 0 | 31 | 0 | 0 | |
| Avg. | 0 | 0 | 6870 | 15129 | 0 | 0 | 0 | 0 | |
| Max. | | | | | 0 | 1.3 | 0 | 0 | |
| Min. | | | | | 0 | 0.7 | 0 | 0 | |

*Water pumped values should be reported as a total for a 24 hour period beginning 0000-2400.
 (e.g., Take reading at same time each day so that it is for 24 hours)

| | |
|------------------------------|----------------|
| Type Fluoride Compound Used: | |
| Type Chlorine Compound Used: | <u>10% NSF</u> |

I certify that all information contained on this form is correct and true to the best of my knowledge.

| | | | | | |
|--------------------|------------------|-----------------------------|-----------|-----------------|-----------------------|
| Signature: | <u>Greg Wulz</u> | Title: | <u>IV</u> | Operator | <u>(678) 617-2898</u> |
| Print Name: | <u>Greg Wulz</u> | Certification Class: | <u>IV</u> | Phone #: | <u>(678) 617-2898</u> |