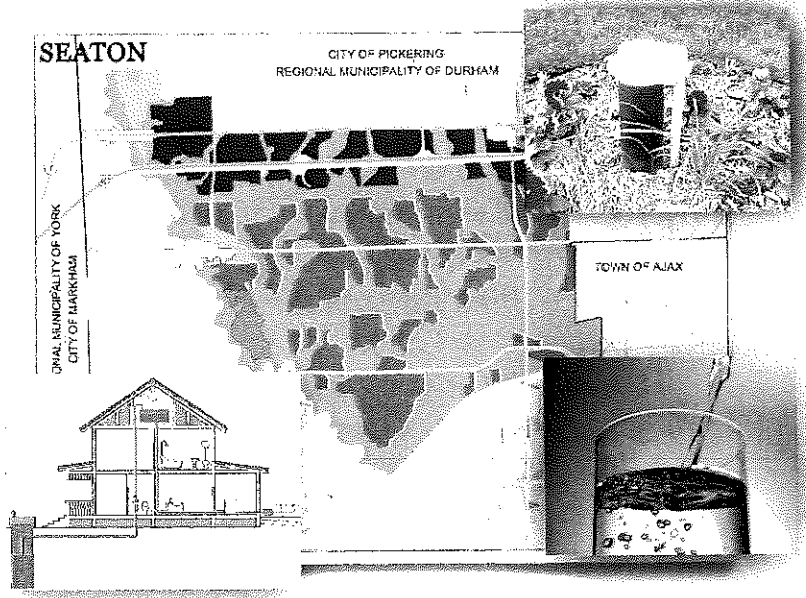


Groundwater Supply Well Survey

PRIVATE WATER WELL SURVEY AND GROUNDWATER MONITORING PROGRAM



LOCATION

Seaton Community
Regional Municipality of
Durham

COMPANY

WSP Canada Inc.

CLIENT

North Pickering Community
Management Inc.

WSP Canada Inc. (WSP) is working with North Pickering Community Management Inc. and the Regional Municipality of Durham to complete a groundwater supply well condition survey and groundwater level monitoring for your private groundwater supply. The program is voluntary but provides you with the following **AT NO COST**.

Water Quality Testing
Well Condition Assessment
Baseline Documentation



Water Well Survey

PRIVATE WATER WELL SURVEY AND GROUNDWATER MONITORING PROGRAM

Phase 1 of the Seaton Development is scheduled to begin infrastructure works in the area in the future. To help detect and manage construction activity impacts on groundwater quality or availability from private wells, a water well pre-condition survey and follow-up groundwater monitoring program must be undertaken. WSP has been retained to complete this work.

The intent of this letter is to inform you, the property owner or tenant of, that WSP would like to include your well in the pre-construction survey by examining the condition of your well and documenting how your well is used.

By taking part in the program, the water level and general quality of groundwater you presently enjoy will be documented. The result of the survey for your well will be made available to you and provided to the Regional Municipality of Durham. The study may include the following activities, which will be completed in person by a WSP representative:

- a short questionnaire documenting groundwater use;
- a groundwater quality assessment (sample collected from an outdoor tap); and,
- groundwater level monitoring from a certified well technician.

The WSP team completing this assignment have the credentials, skills and experience necessary to properly and safely assess the condition of your water well and groundwater supply. Our team is intimately familiar with groundwater resources in the area. If we have missed you during our in person efforts to notify residents, please contact Scott Watson, the project coordinator for this project.



Water Well Survey

PRIVATE WATER WELL SURVEY AND GROUNDWATER MONITORING PROGRAM

Attached you will find a copy of a blank Water Well Survey. If you are interested in participating in the study, please fill out the form to the best of your ability or schedule a time when we can complete the form with you. Our personnel will be in the area next Monday and Tuesday (June 20th to 21st, 2016). Thank you for your attention! If you have any questions or concerns please don't hesitate to call or email.

Regards,



A handwritten signature in black ink that reads "Scott Watson".

Scott Watson,
Project Coordinator

WSP Canada Inc.
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WATER WELL SURVEY

LOCATION: _____
(Lot, Con., Twp., Street & No., etc.)

DATE: _____

OWNER: _____

PROJECT NO.: _____

TELEPHONE NO.: _____

WELL NO.: _____

WELL INFORMATION

Drilled _____ Dug or bored _____ Combination _____
 Date completed _____ Depth _____
 Casing diameter* _____ Seal _____
 Aquifer: Overburden _____ Bedrock _____
 Static Level: Original _____ Present* _____
 Pumping Level: Original _____ Present* _____
 Has well ever been dry? _____
 Owner when well drilled _____

PUMP INFORMATION

Make _____ Age _____ HP _____
 Type: Jet _____ Submersible _____ Shallow well _____ Deep well _____
 Other _____
 Depth to intake* _____
 Centre of pump (shallow well) measured from ground level* _____
 Pump capacity * _____
 Condition : good _____ fair _____ poor _____

* All dimensions: indicate estimated or measured

WATER QUALITY (if previously tested)

pH _____ Temp. _____ Conductivity _____
 Chloride _____ Iron _____
 Hardness _____ Alkalinity _____
 Bacterial _____
 Clear: Yes ___ No ___ Sand-free: Yes ___ No ___
 Sulfurous: Yes ___ No ___ Odour: Yes ___ No ___
 Any water treatment? _____

WATER CONSUMPTION

Domestic: No. of persons _____
 Livestock: (specify) _____
 Other uses: _____
 Estimated daily requirement: _____
 Other sources: _____

SKETCH (location & construction - use back of page if necessary)

ANNUAL SAMPLING PROGRAM

Is Well Water Supplemented? Yes ___ No ___
 Is Well Accessible for Water Levels? Yes ___ No ___
 Permission to Obtain Water Samples? Yes ___ No ___

REMARKS

OWNER'S ACKNOWLEDGEMENT:

The above information is correct to the best of my knowledge.

Well is available for water level monitoring ___ yes ___ no

Signed: _____
(Owner/tenant)

Date: _____