

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 11:25:26

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

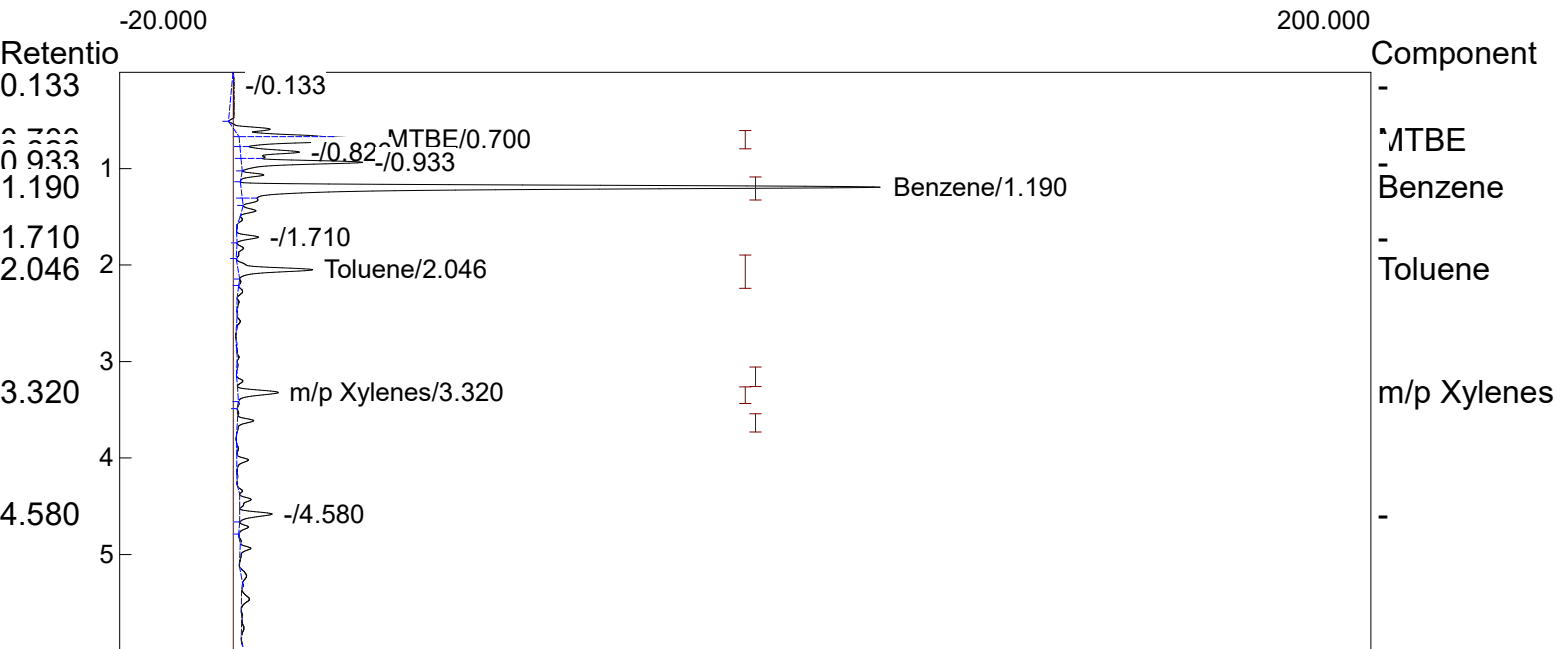
Carrier: He@ 5 PSI

Sample: GP-175D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.700	84.9558	638.1129	ppb
Benzene	1.190	339.9612	583.9702	ppb
Toluene	2.046	44.9702	92.1673	ppb
m/p Xylenes	3.320	25.2986	28.2880	ppb
		495.1858	1342.5385	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 11:15:16

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

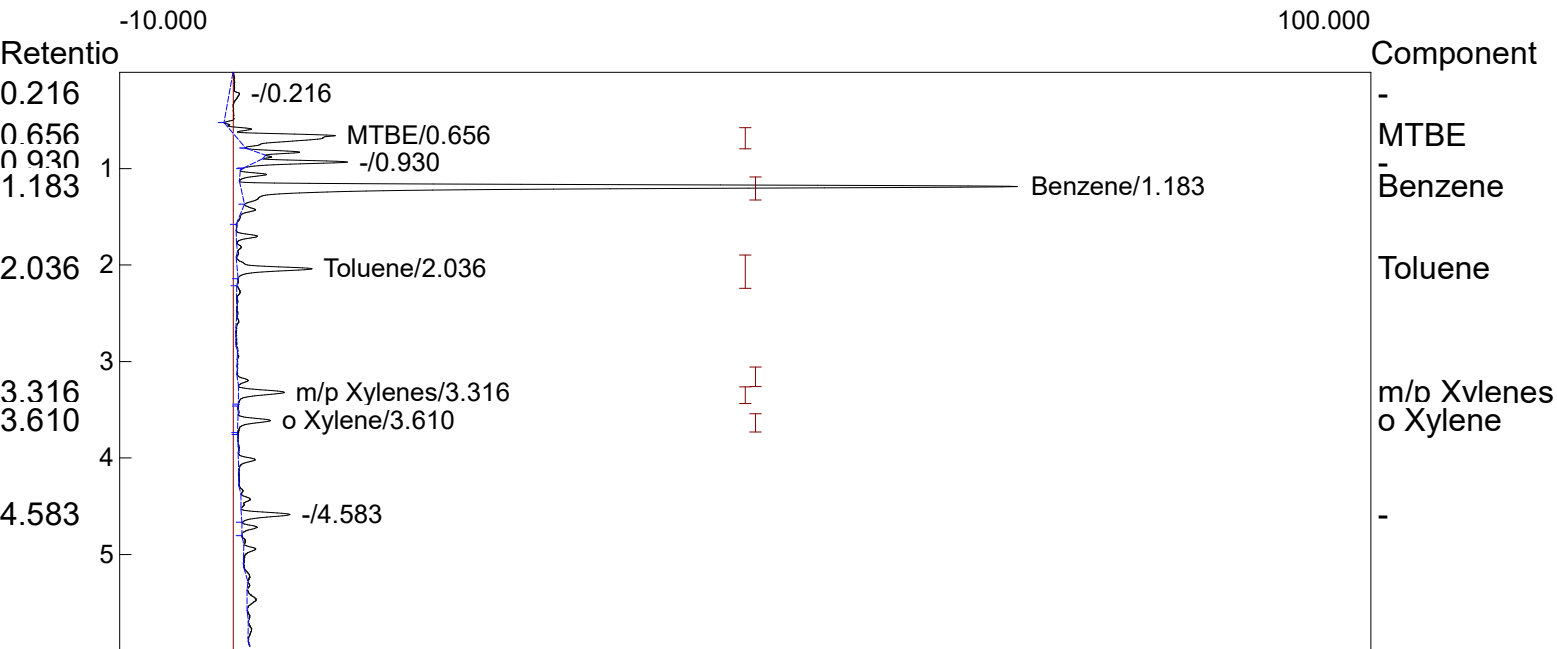
Carrier: He@ 5 PSI

Sample: GP-176D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.656	45.9184	344.8984	ppb
Benzene	1.183	202.8288	348.4103	ppb
Toluene	2.036	22.0772	45.2477	ppb
m/p Xylenes	3.316	14.7180	16.4572	ppb
o Xylene	3.610	10.0812	51.3420	ppb
		295.6236	806.3556	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 11:06:45

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

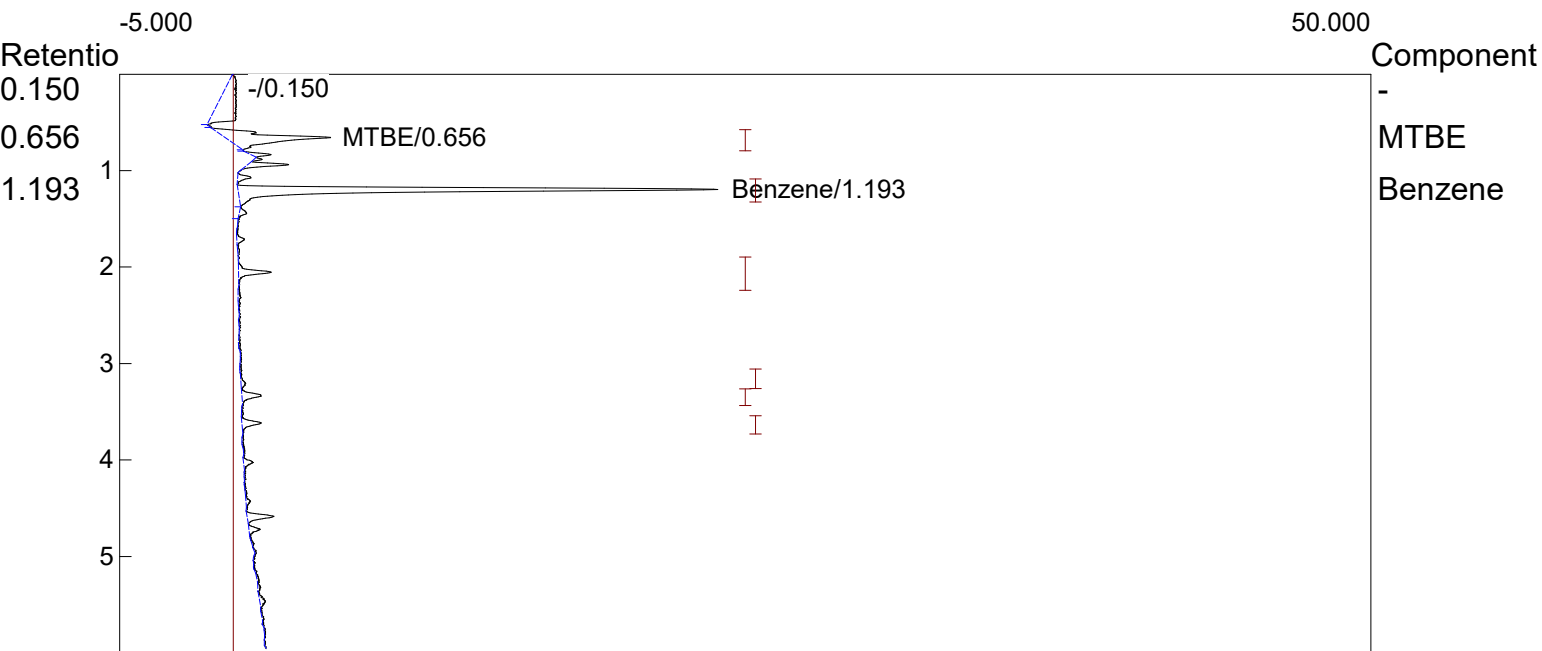
Carrier: He@ 5 PSI

Sample: GP-177D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.656	23.1552	173.9214	ppb
Benzene	1.193	62.0420	106.5730	ppb
		85.1972	280.4944	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 10:57:53

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

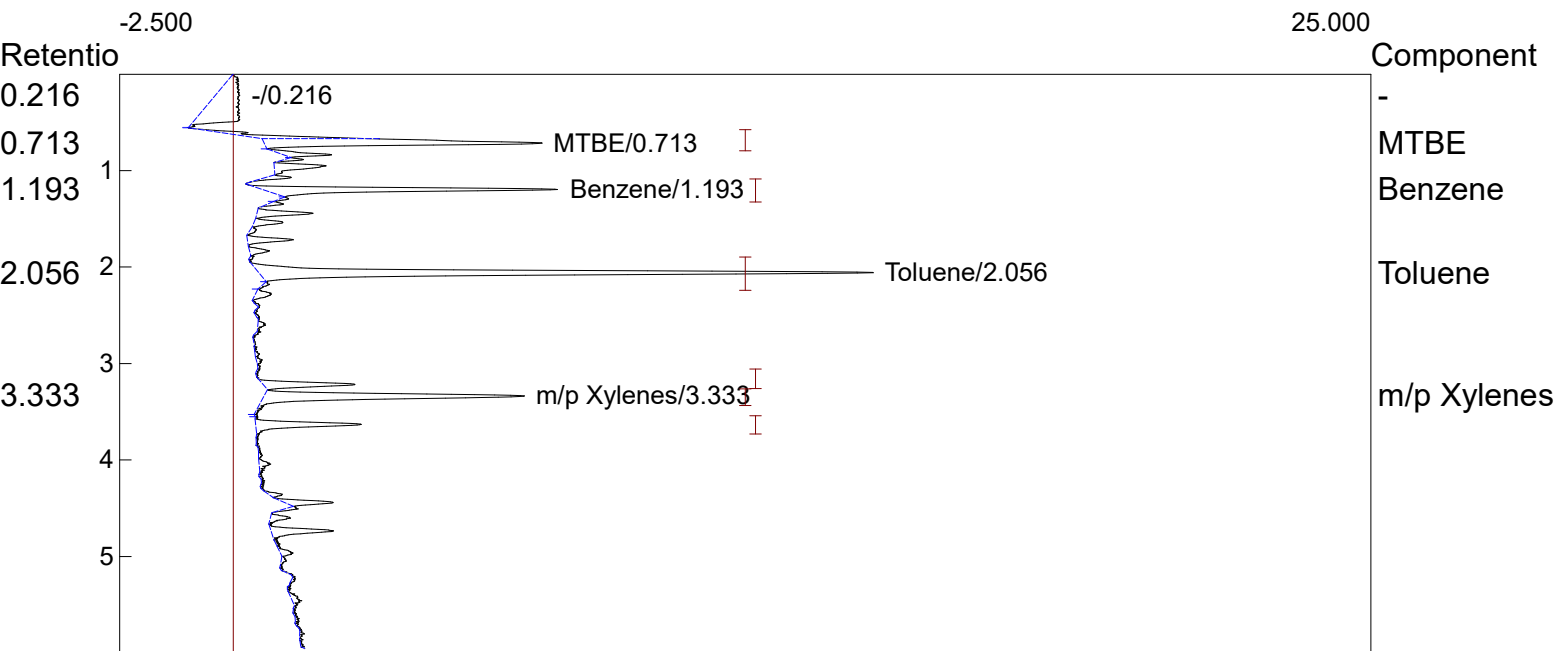
Carrier: He@ 5 PSI

Sample: GP-178D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.713	20.7392	155.7745	ppb
Benzene	1.193	17.3920	29.8752	ppb
Toluene	2.056	43.9820	90.1420	ppb
m/p Xylenes	3.333	21.0316	23.5168	ppb
		103.1448	299.3086	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 12:45:26

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

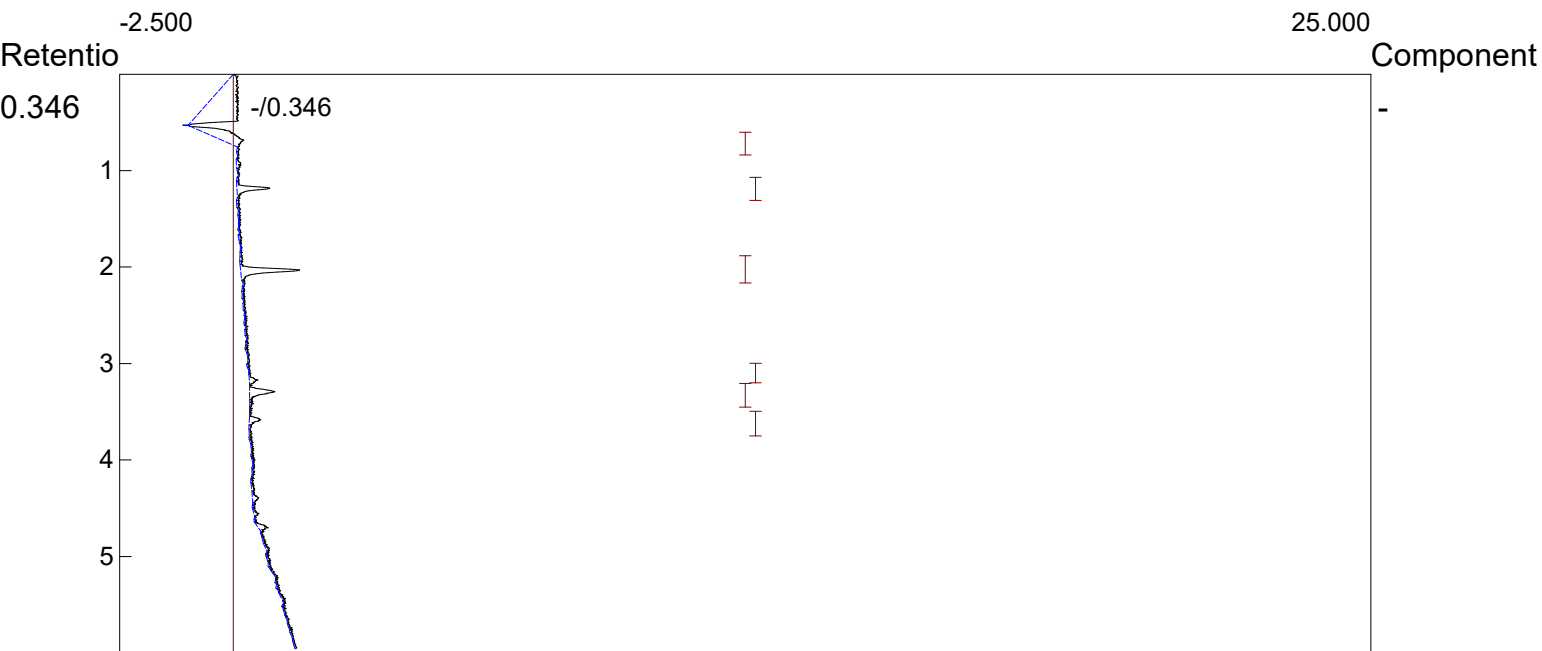
Carrier: He@ 5 PSI

Sample: GP-179 - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
		0.0000	0.0000	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 11:35:16

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

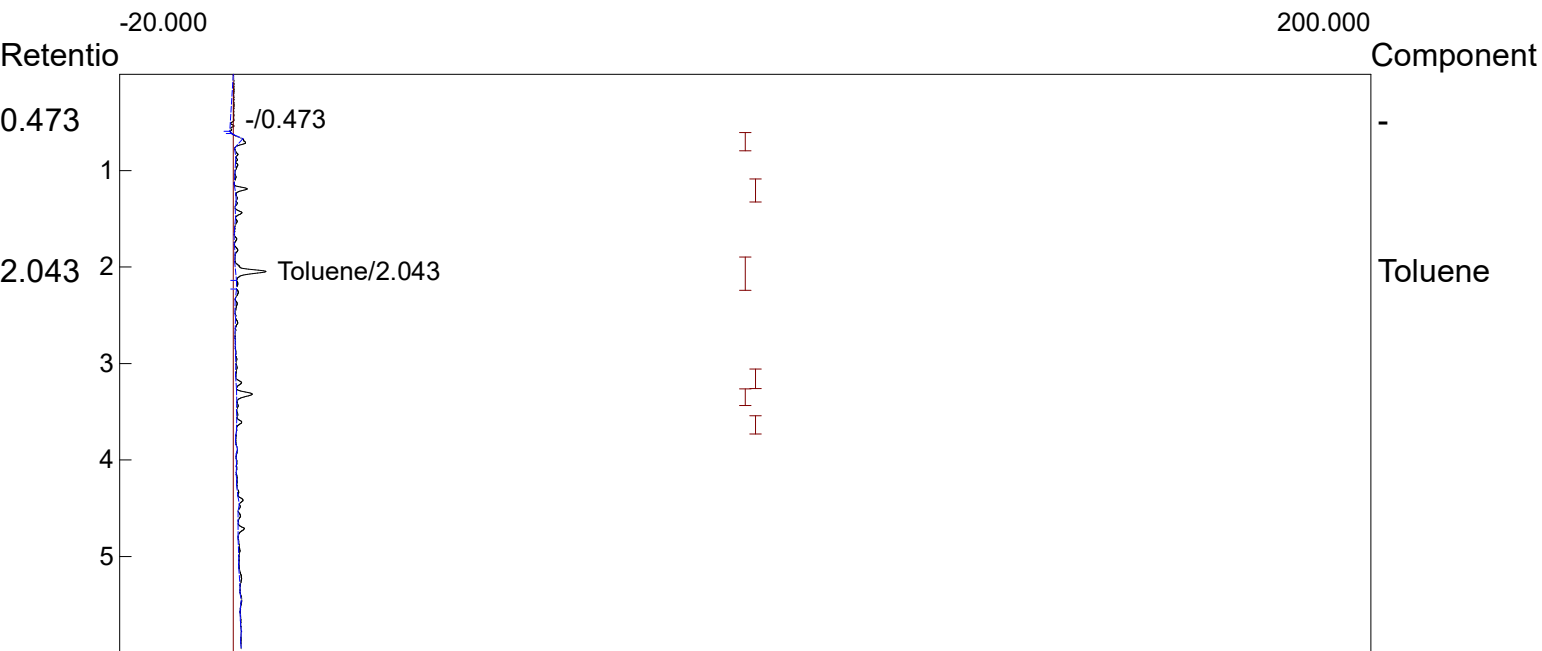
Carrier: He@ 5 PSI

Sample: GP-180D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
Toluene	2.043	17.9352	36.7586	ppb
		17.9352	36.7586	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 15:37:20

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

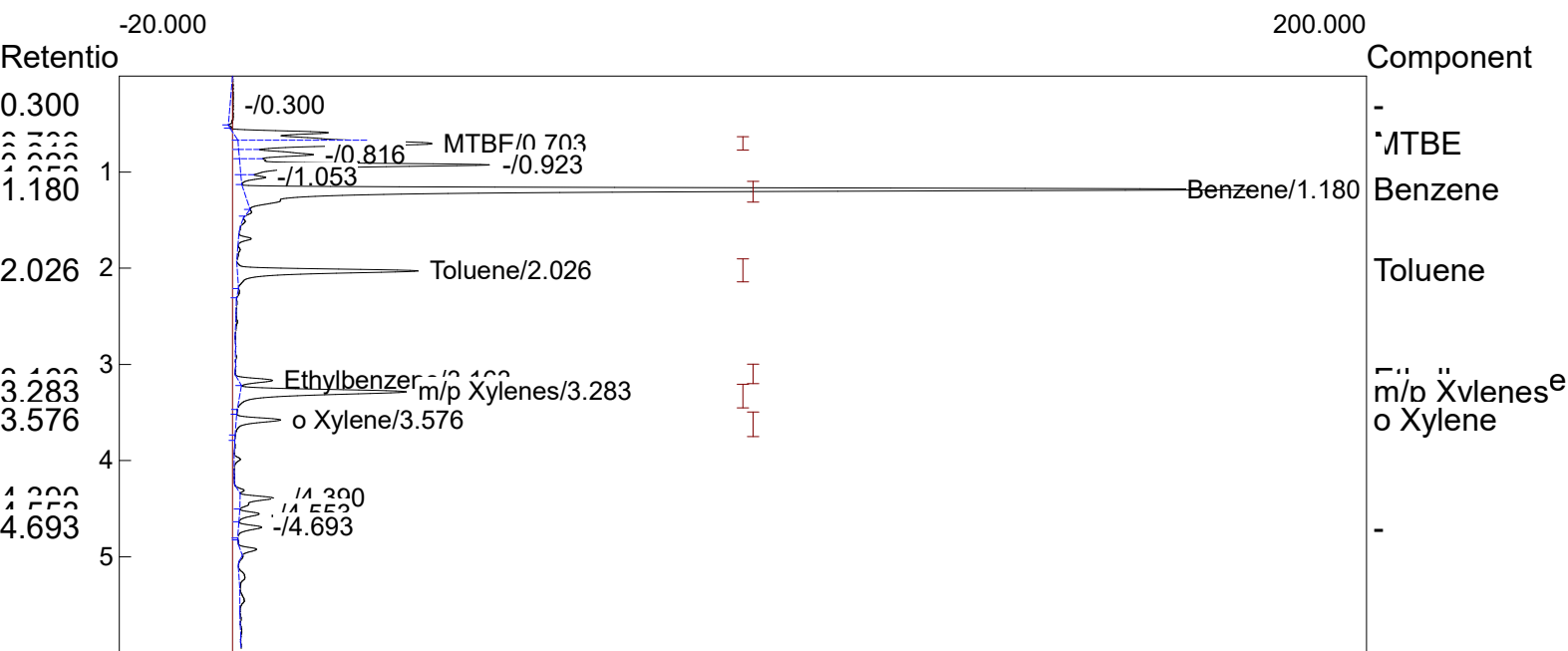
Carrier: He@ 5 PSI

Sample: GP-181D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.703	121.5620	913.0663	ppb
Benzene	1.180	526.0672	903.6549	ppb
Toluene	2.026	105.8248	216.8901	ppb
Ethylbenzene	3.163	17.8982	252.2863	ppb
m/p Xylenes	3.283	113.1596	126.5312	ppb
o Xylene	3.576	27.7924	141.5423	ppb
		912.3042	2553.9711	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 15:49:45

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

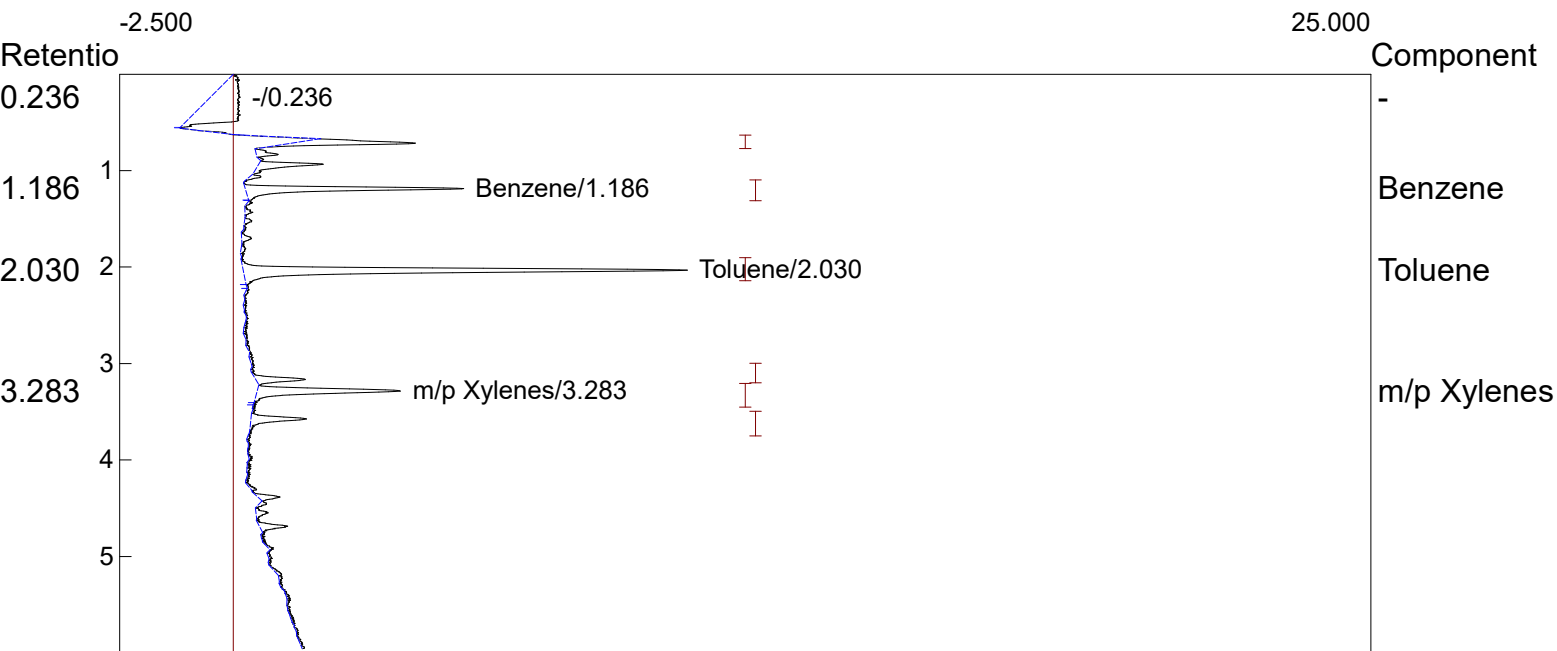
Carrier: He@ 5 PSI

Sample: GP-182D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
Benzene	1.186	13.4664	23.1320	ppb
Toluene	2.030	31.2172	63.9803	ppb
m/p Xylenes	3.283	10.9948	12.2940	ppb
		55.6784	99.4063	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 15:59:31

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

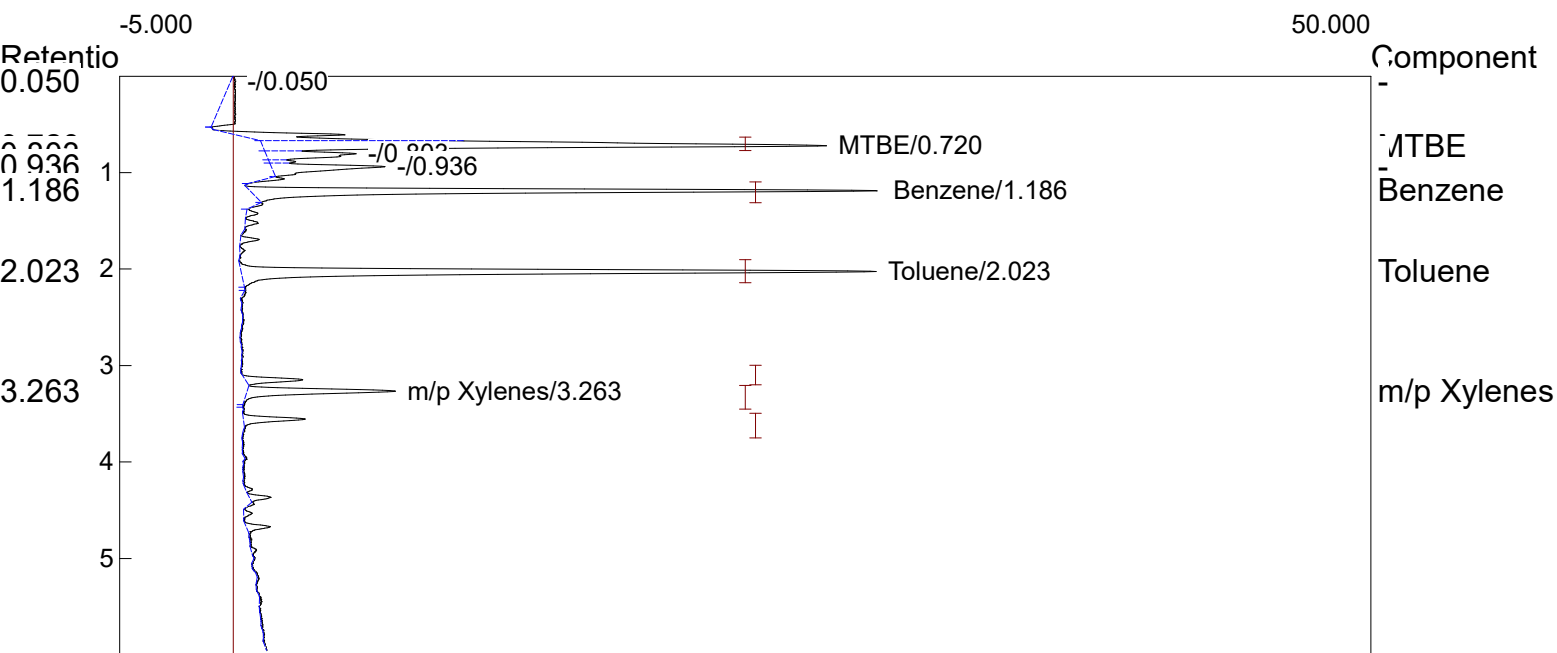
Carrier: He@ 5 PSI

Sample: GP-183D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.720	87.6876	658.6318	ppb
Benzene	1.186	78.9782	135.6652	ppb
Toluene	2.023	91.0672	186.6441	ppb
m/p Xylenes	3.263	22.3984	25.0451	ppb
		280.1314	1005.9862	

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 17:05:21

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

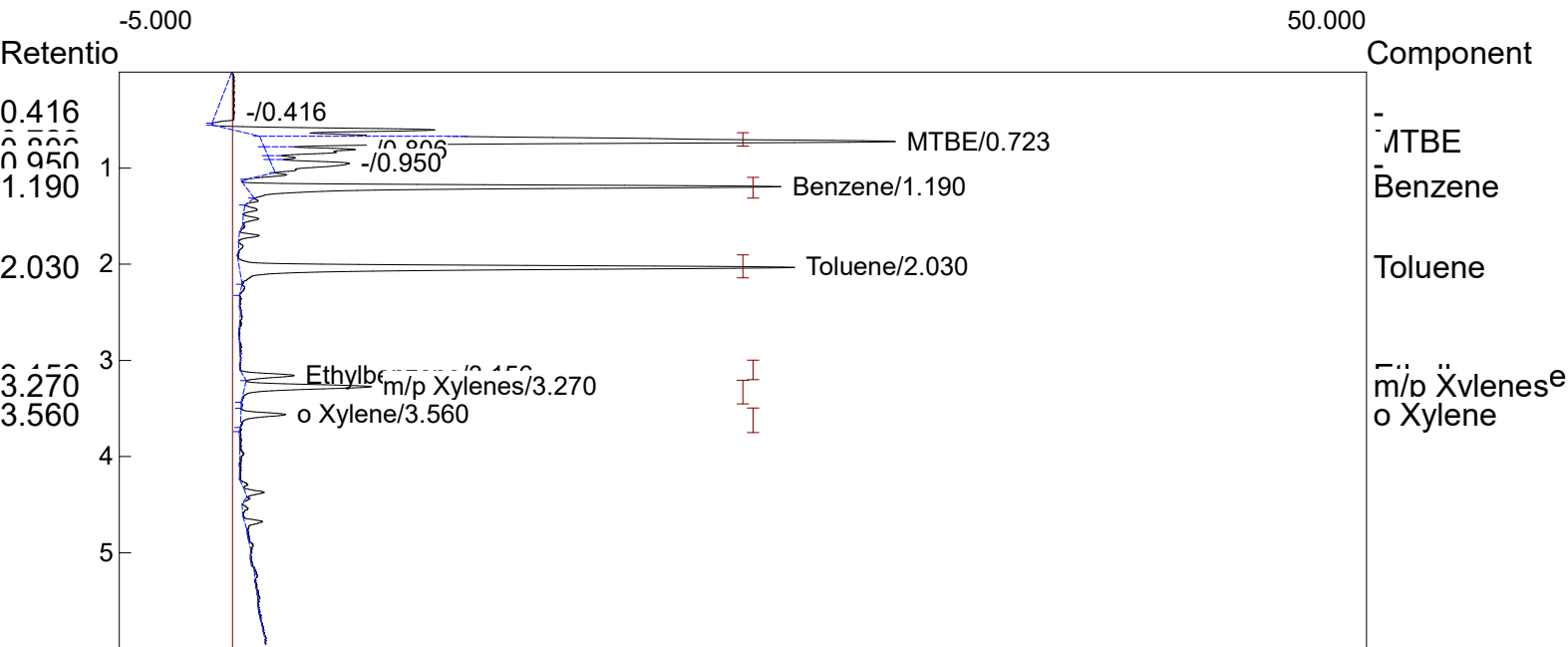
Carrier: He@ 5 PSI

Sample: GP-184D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00



Component	Retention	Area	External	Units
MTBE	0.723	100.2948	753.3259	ppb
Benzene	1.190	67.2540	115.5259	ppb
Toluene	2.030	77.1994	158.2218	ppb
Ethylbenzene	3.156	6.4522	90.9478	ppb
m/p Xylenes	3.270	18.8162	21.0396	ppb
o Xylene	3.560	6.4080	32.6349	ppb

276.4246 1171.6960

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 16:50:35

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

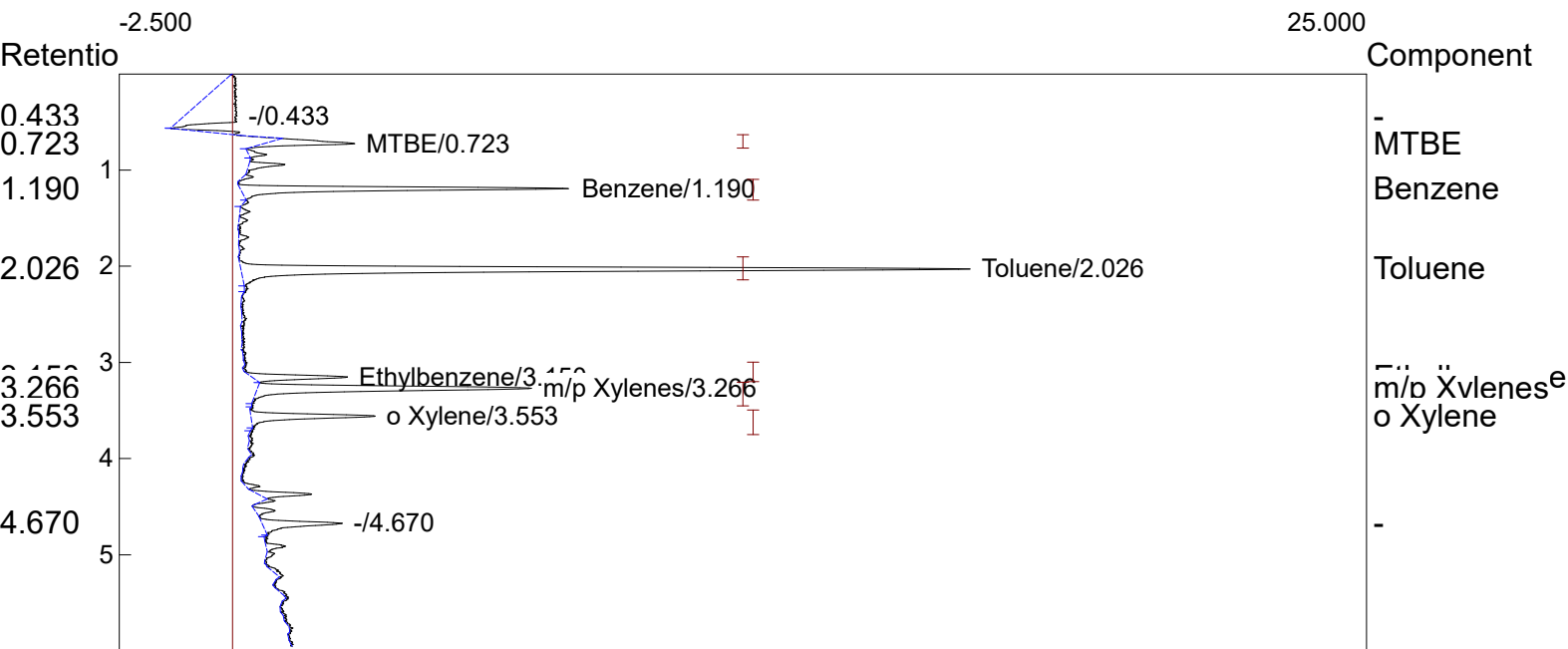
Carrier: He@ 5 PSI

Sample: GP-185D - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00

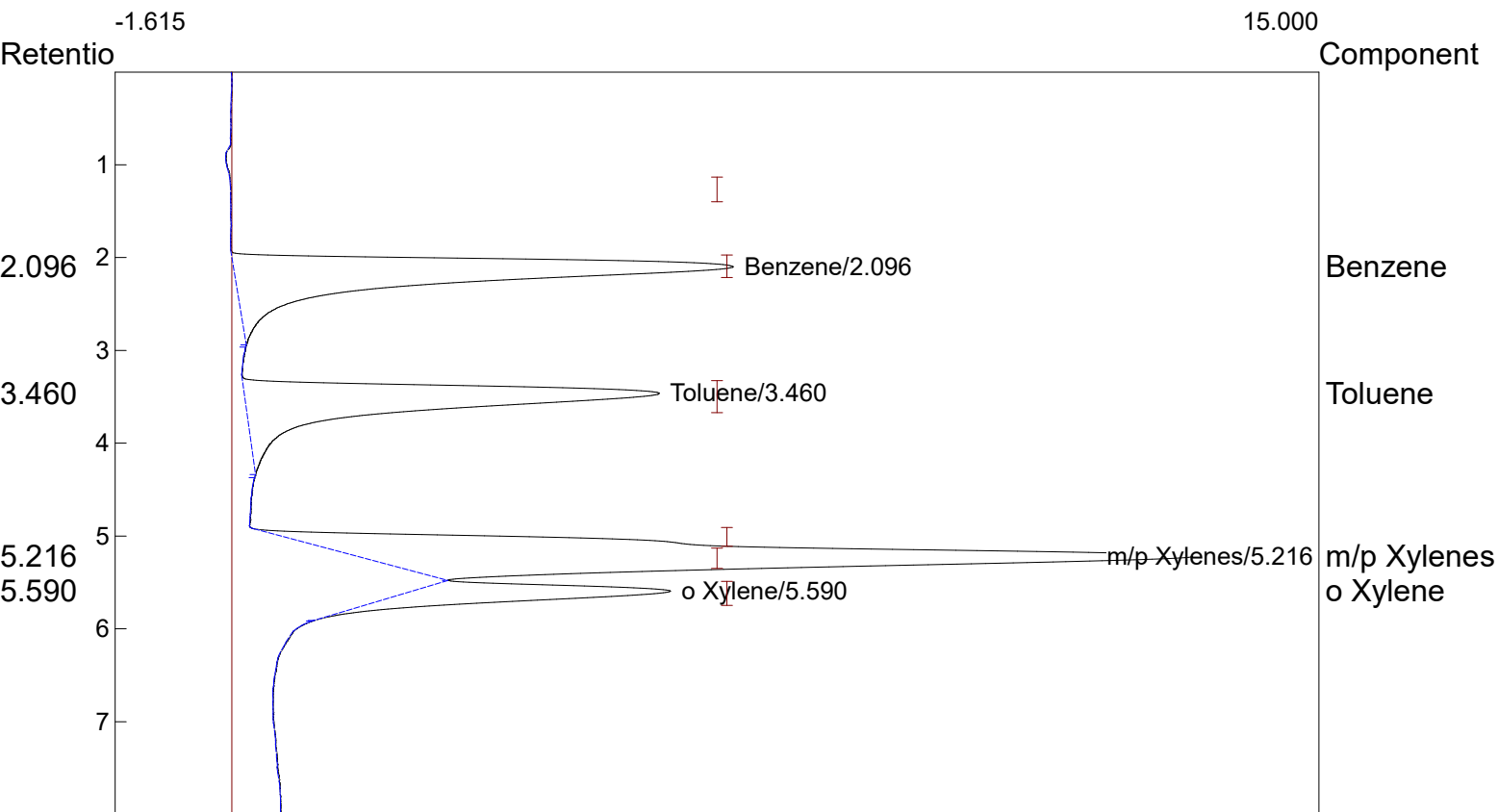


Component	Retention	Area	External	Units
MTBE	0.723	5.6968	42.7893	ppb
Benzene	1.190	19.1924	32.9679	ppb
Toluene	2.026	50.2426	102.9732	ppb
Ethylbenzene	3.150	6.0294	84.9882	ppb
m/p Xylenes	3.266	20.8930	23.3618	ppb
o Xylene	3.553	8.9648	45.6563	ppb
		111.0190	332.7367	

Lab name: KLM Environmental, LLC
 Collected: 5/14/21
 Analysis date: 05/14/2021 15:07:46
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: BTEX Calibration QP-19

Temperature program:

Init temp Hold Ramp Final temp

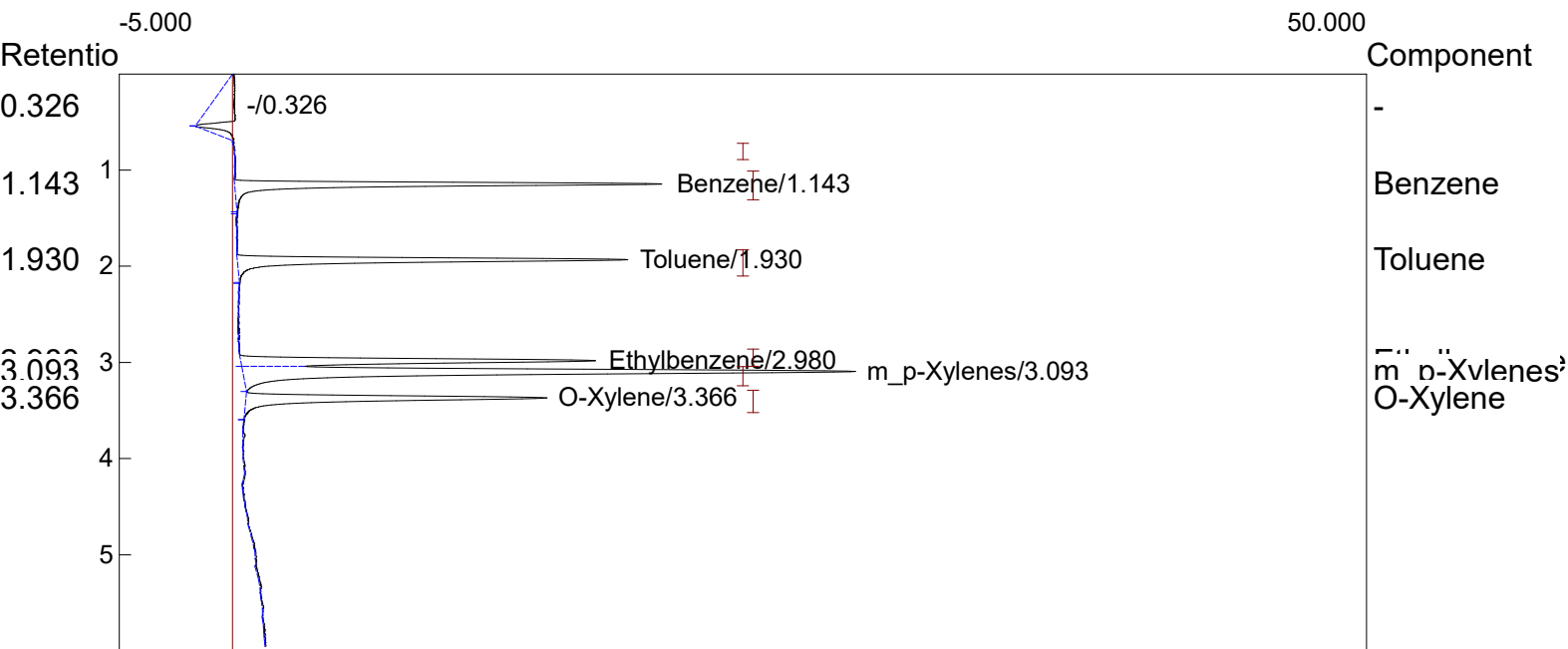


Component	Retention	Area	External	Units
Benzene	2.096	116.4310	200.0000	ppb
Toluene	3.460	97.5838	200.0000	ppb
m/p Xylenes	5.216	178.8644	200.0000	ppb
o Xylene	5.590	39.2708	200.0000	ppb
		432.1500	800.0000	

Lab name: KLM Environmental, LLC
 Collected: 6/15/21
 Analysis date: 06/15/2021 15:29:45
 Method: Headspace Injection
 Description: PID - Channel 1
 Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um
 Carrier: He@ 5 PSI
 Sample: BTEX Standard
 Operator: Graham Robinson

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00

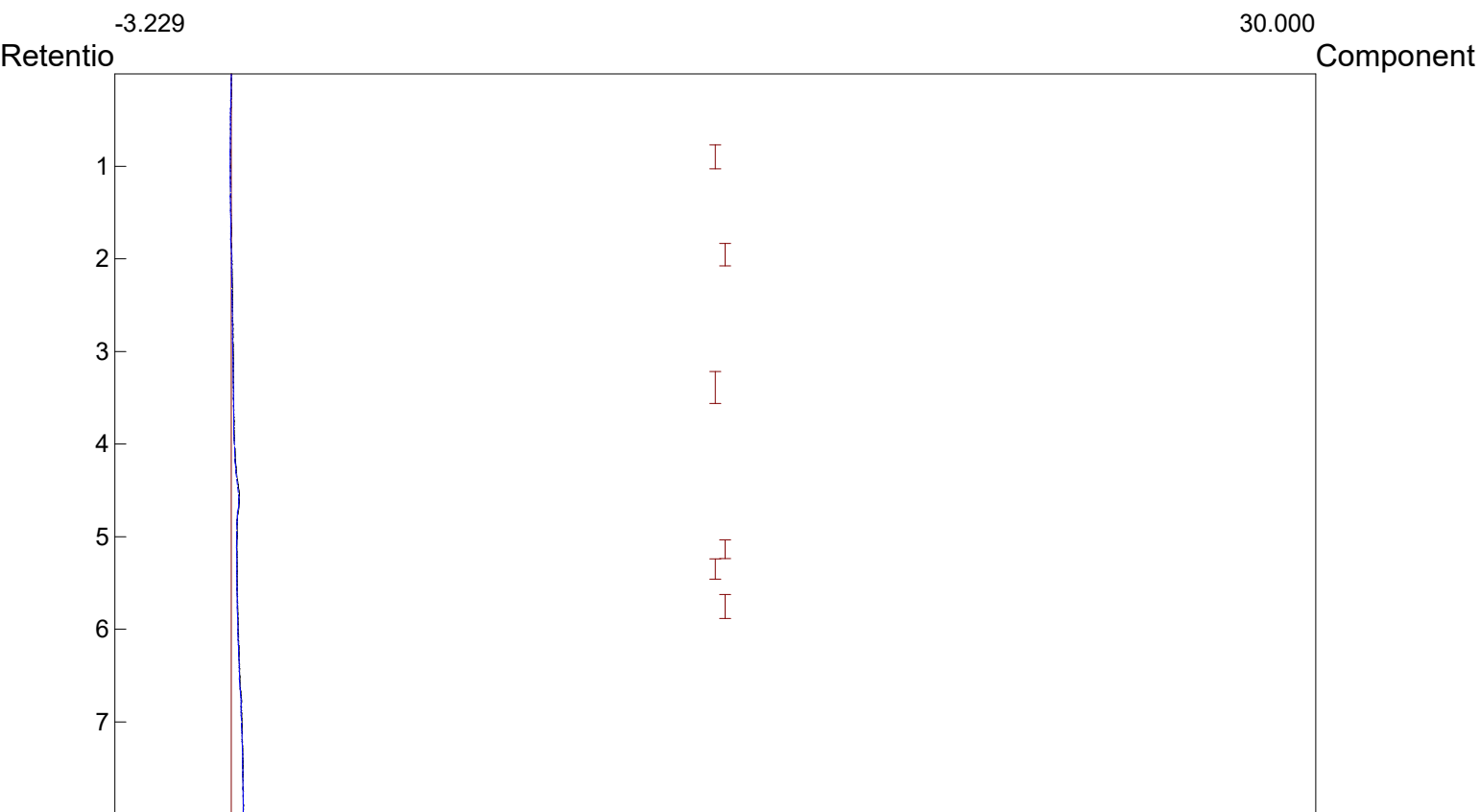


Component	Retention	Area	External	Units
Benzene	1.143	54.8896	200.0000	ppb
Toluene	1.930	55.5836	200.0000	ppb
Ethylbenzene	2.980	51.7788	200.0000	ppb
m_p-Xylenes	3.093	107.1616	200.0000	ppb
O-Xylene	3.366	48.0112	200.0000	ppb
		317.4248	1000.0000	

Lab name: KLM Environmental, LLC
Collected: 4/27/21
Analysis date: 04/27/2021 07:04:25
Method: Headspace Injection
Description: PID - Channel 2
Column: RESTEK 15METER MXT-1
Carrier: HELIUM AT 5 PSI
Sample: Field Blank

Temperature program:

Init temp Hold Ramp Final temp



Component	Retention	Area	External	Units
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		0.0000	0.0000	
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Lab name: KLM Environmental, LLC

Collected: 4/28/21

Analysis date: 04/28/2021 08:15:31

Method: Headspace Injection

Description: PID - Channel 2

Column: RESTEK 15METER MXT-1

Carrier: HELIUM AT 5 PSI

Sample: Field Blank #2

Temperature program:

Init temp Hold Ramp Final temp



Component Retention Area External Units

0.0000 0.0000

Lab name: KLM Environmental, LLC

Collected: 5/24/21

Analysis date: 05/24/2021 12:23:25

Method: Headspace Injection

Description: PID - Channel 2

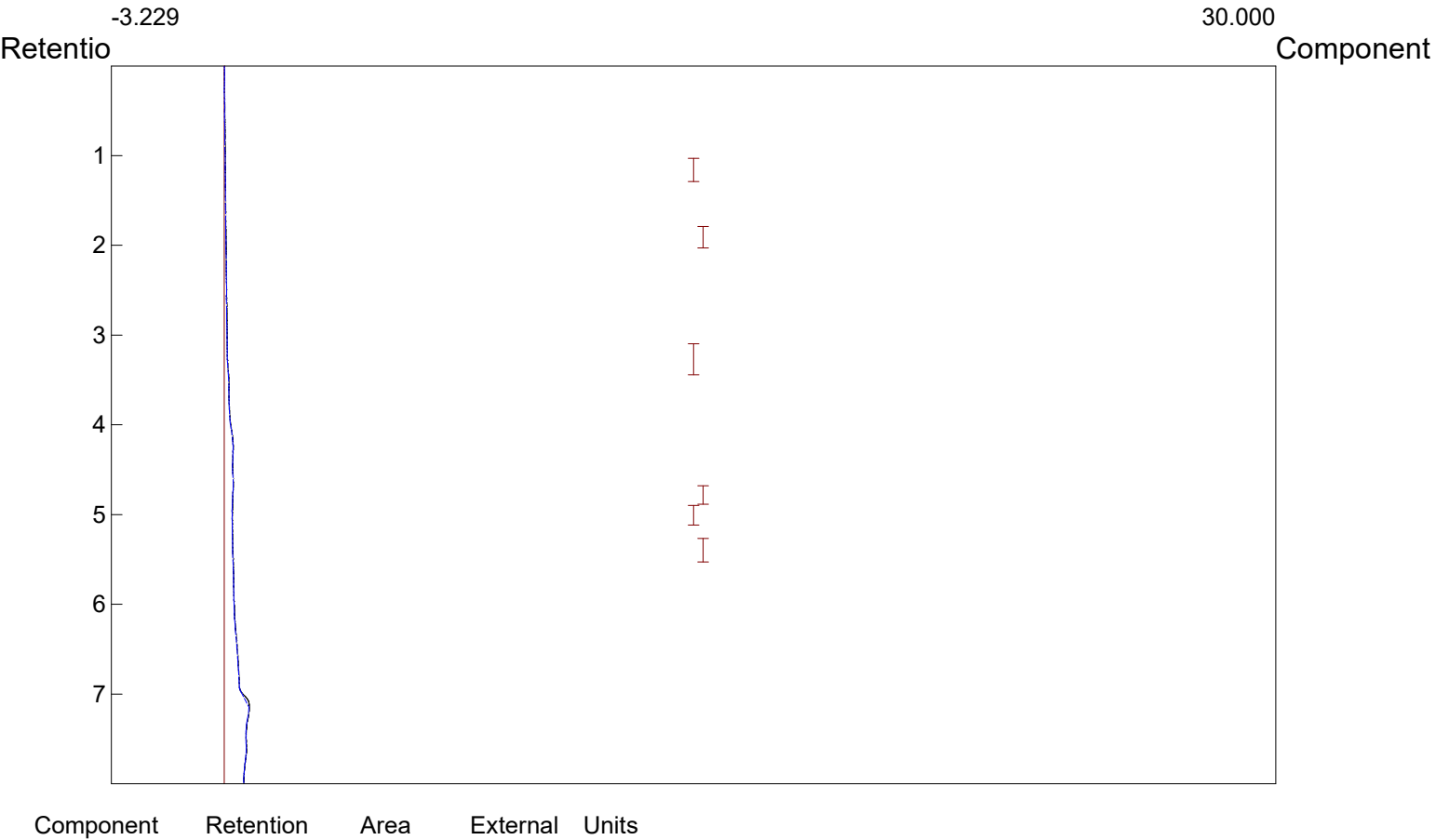
Column: RESTEK 15METER MXT-1

Carrier: HELIUM AT 5 PSI

Sample: Machine Blank - Quick Pantry #19

Temperature program:

Init temp Hold Ramp Final temp



Component Retention Area External Units

0.0000 0.0000

Lab name: KLM Environmental, LLC

Collected: 6/22/21

Analysis date: 06/22/2021 08:29:54

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

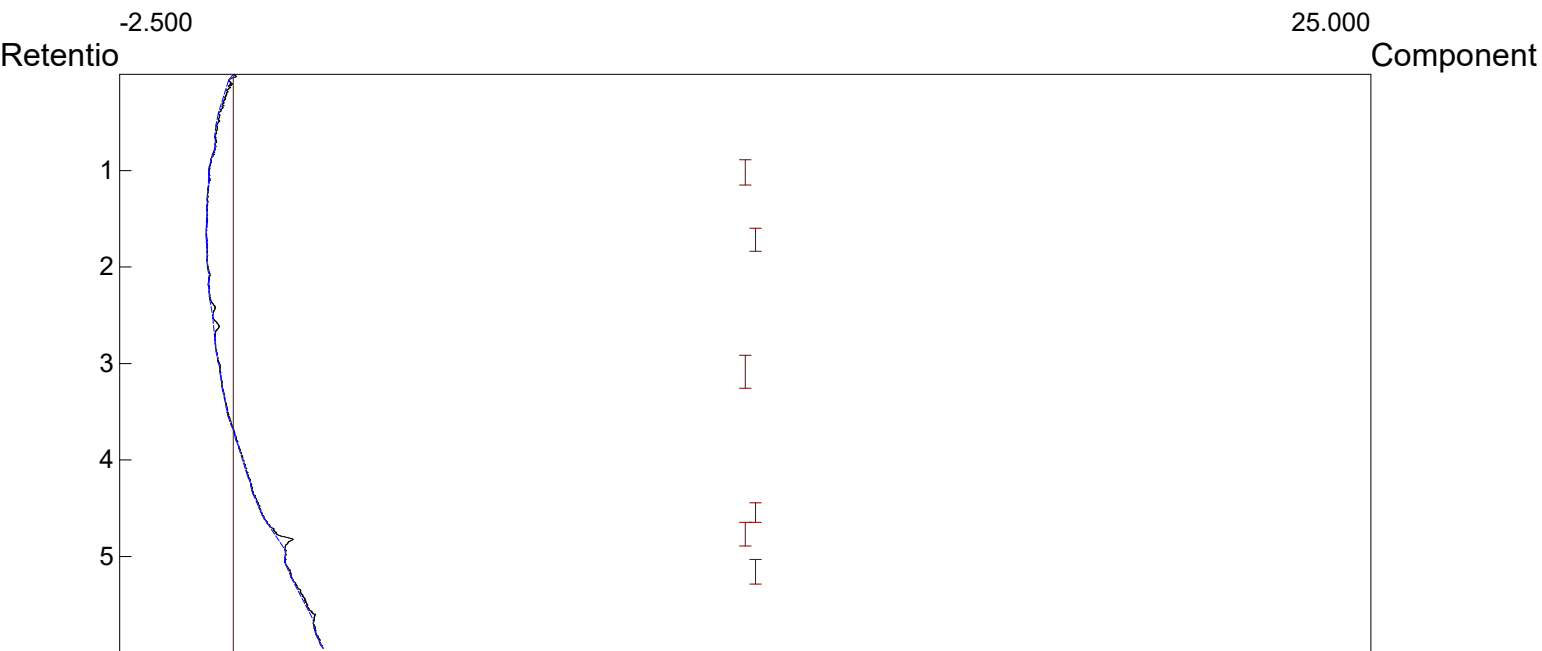
Carrier: He@ 5 PSI

Sample: Field Blank - Quick Pantry #19

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00

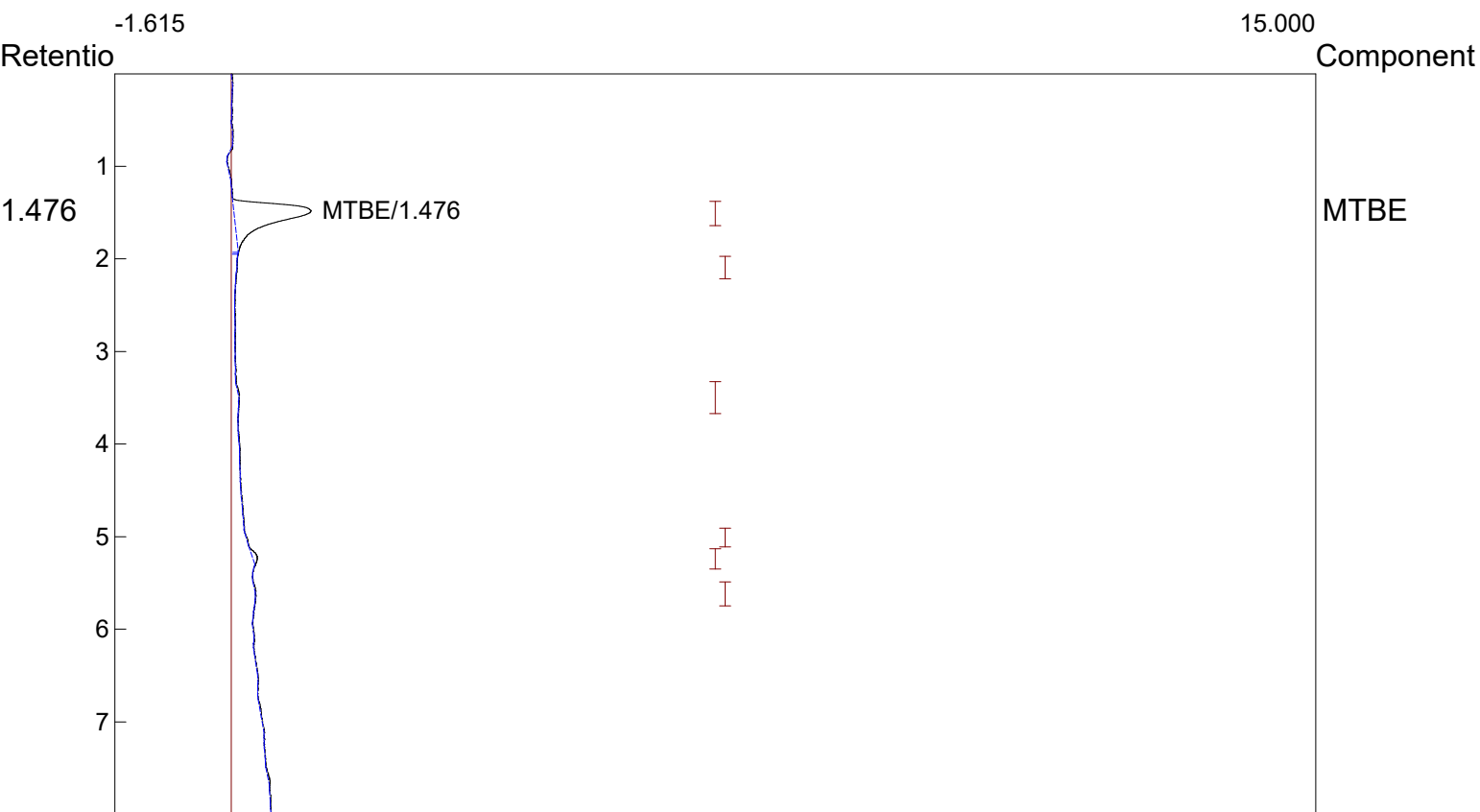


Component	Retention	Area	External	Units
		0.0000	0.0000	

Lab name: KLM Environmental, LLC
 Collected: 5/14/21
 Analysis date: 05/14/2021 15:30:22
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: MTBE Calibration QP-19

Temperature program:

Init temp Hold Ramp Final temp



Component	Retention	Area	External	Units
MTBE	1.476	14.8622	111.6317	ppb
		14.8622	111.6317	

Lab name: KLM Environmental, LLC

Collected: 6/15/21

Analysis date: 06/15/2021 15:52:23

Method: Headspace Injection

Description: PID - Channel 1

Column: RESTEK 15M MXT-1, 0.53mmID, 1.00um

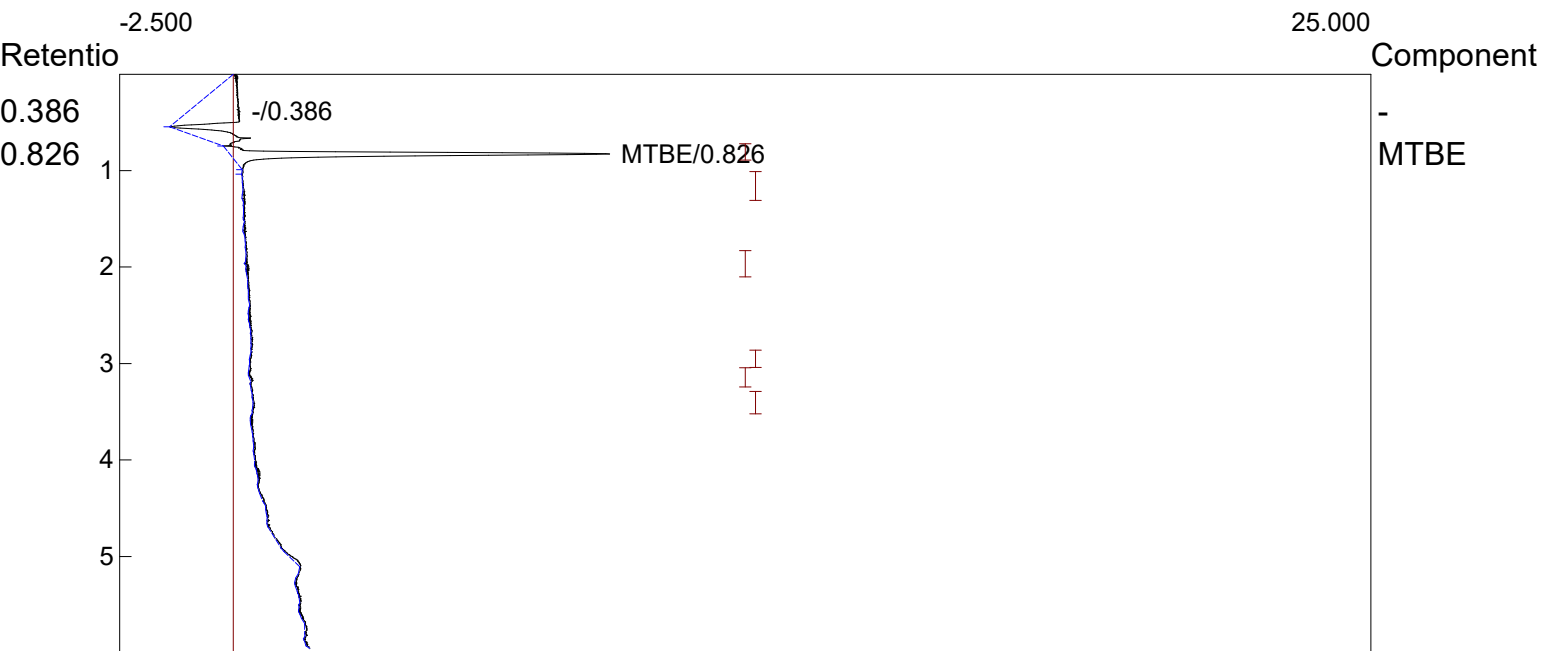
Carrier: He@ 5 PSI

Sample: MTBE Standard

Operator: Mark Keller

Temperature program:

Init temp	Hold	Ramp	Final temp
50.00	1.000	15.000	85.00
85.00	0.000	40.000	150.00
150.00	1.000	0.000	150.00

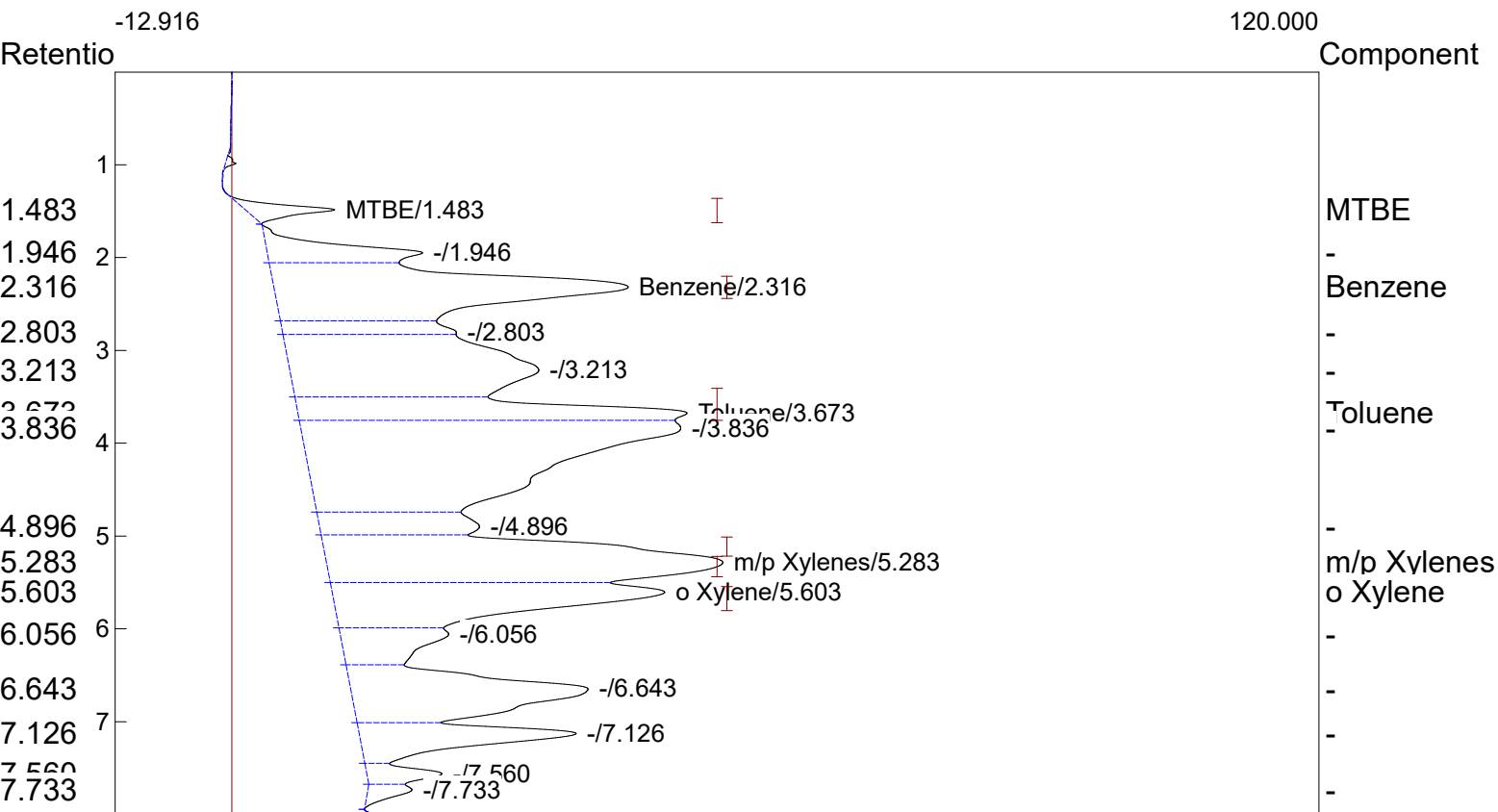


Component	Retention	Area	External	Units
MTBE	0.826	22.6732	200.0000	ppb
		22.6732	200.0000	

Lab name: KLM Environmental, LLC
 Collected: 4/28/21
 Analysis date: 04/28/2021 09:32:17
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: TW-2

Temperature program:

Init temp Hold Ramp Final temp

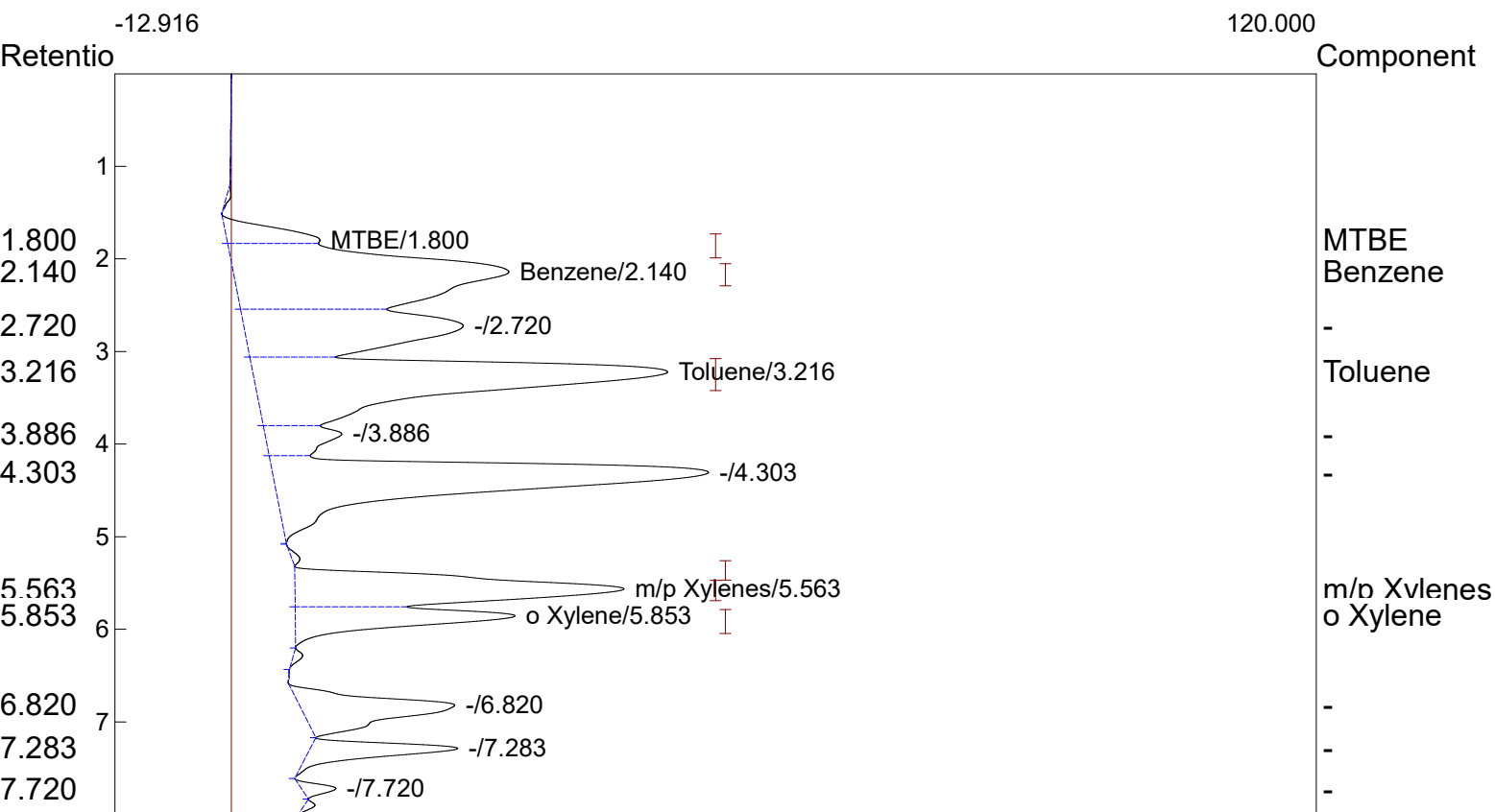


Component	Retention	Area	External	Units
MTBE	1.483	70.7744	531.5948	ppb
Benzene	2.316	970.7016	2497.4956	ppb
Toluene	3.673	525.6840	1655.9480	ppb
m/p Xylenes	5.283	1093.6536	3271.5518	ppb
o Xylene	5.603	745.4166	5149.9675	ppb
		3406.2302	13106.5577	

Lab name: KLM Environmental, LLC
 Collected: 4/28/21
 Analysis date: 04/28/2021 09:49:07
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: TW-4

Temperature program:

Init temp Hold Ramp Final temp

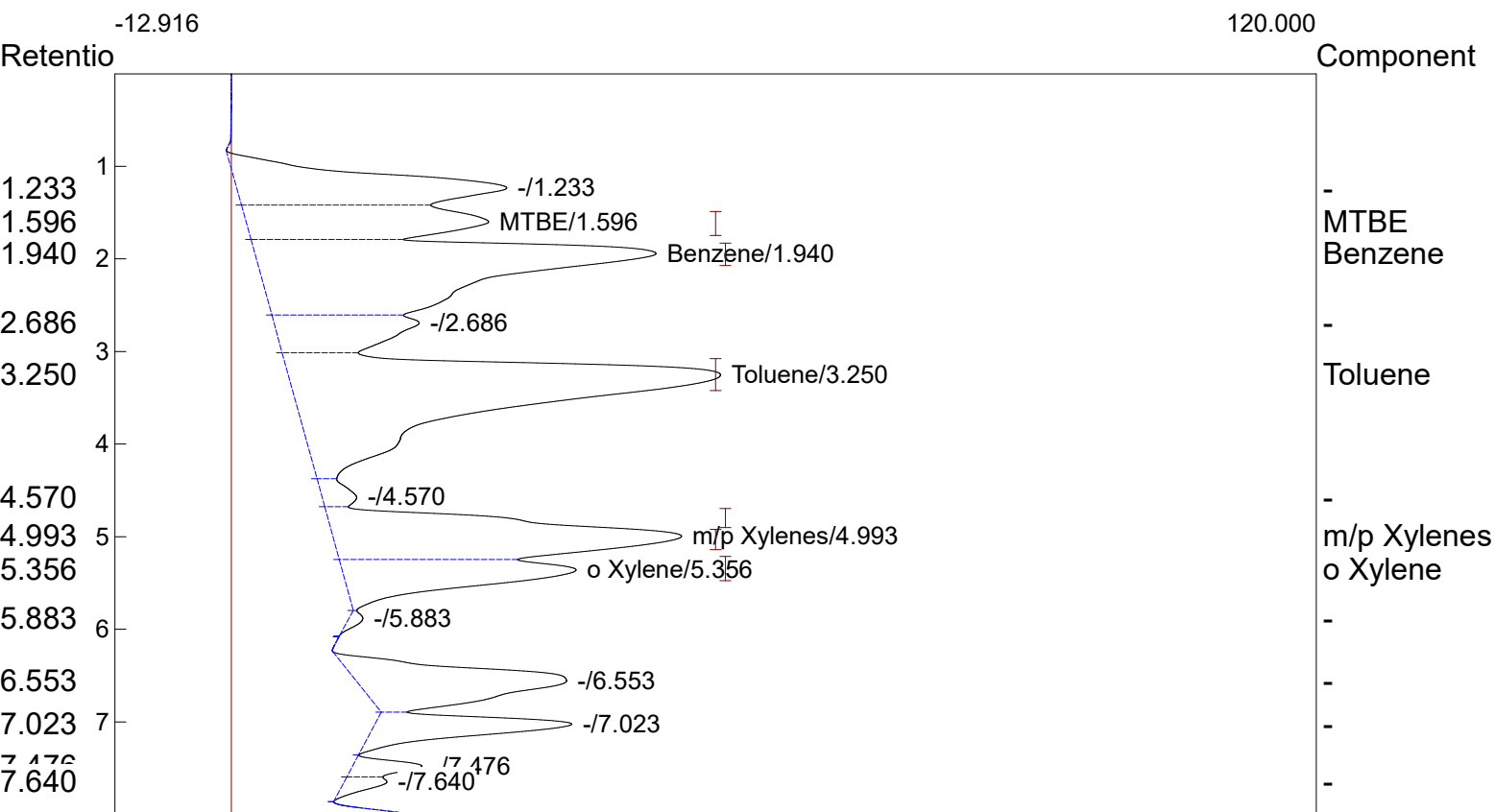


Component	Retention	Area	External	Units
MTBE	1.800	109.3270	821.1678	ppb
Benzene	2.140	943.4978	2427.5035	ppb
Toluene	3.216	1059.5244	3337.5893	ppb
m/p Xylenes	5.563	579.1200	1732.3777	ppb
o Xylene	5.853	291.3691	2013.0239	ppb
		2982.8383	10331.6622	

Lab name: KLM Environmental, LLC
 Collected: 4/28/21
 Analysis date: 04/28/2021 10:06:18
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: TW-5

Temperature program:

Init temp Hold Ramp Final temp

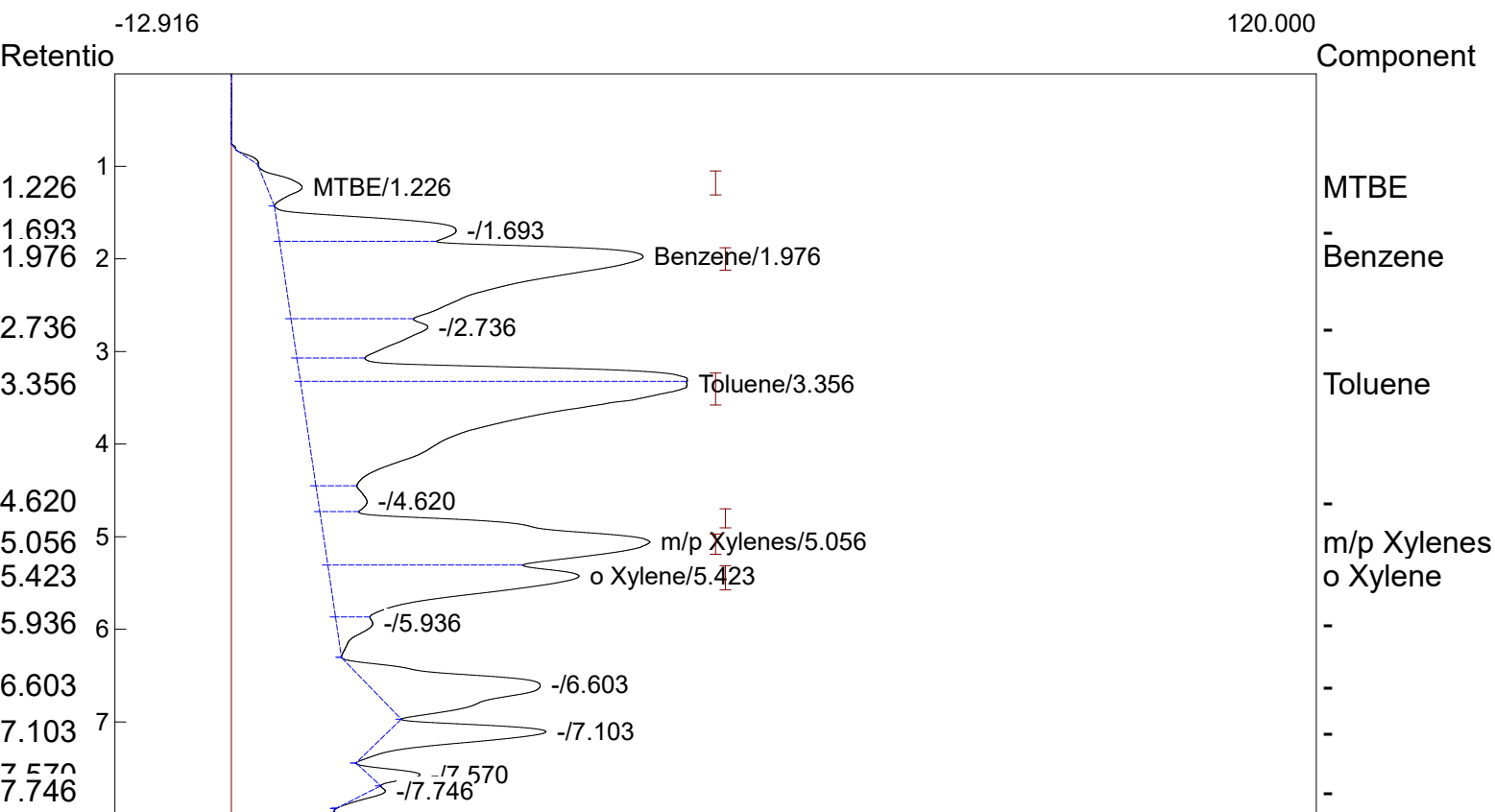


Component	Retention	Area	External	Units
MTBE	1.596	520.9936	3913.2436	ppb
Benzene	1.940	1358.4208	3495.0493	ppb
Toluene	3.250	1674.8248	5275.8363	ppb
m/p Xylenes	4.993	881.9025	2638.1203	ppb
o Xylene	5.356	458.3558	3166.7090	ppb
		4894.4975	18488.9585	

Lab name: KLM Environmental, LLC
 Collected: 4/29/21
 Analysis date: 04/29/2021 14:58:00
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: TW-6

Temperature program:

Init temp Hold Ramp Final temp

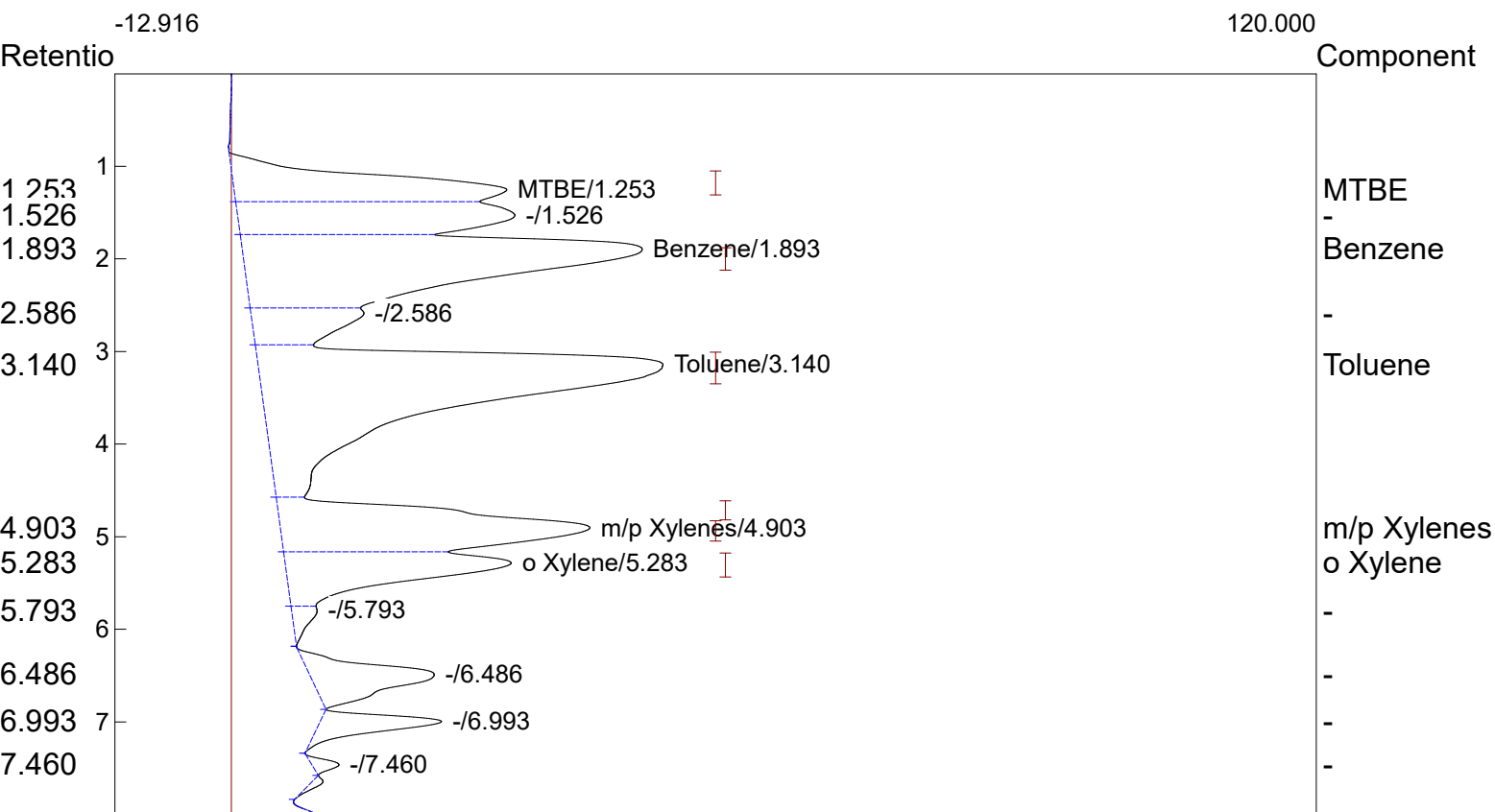


Component	Retention	Area	External	Units
MTBE	1.226	51.0264	383.2652	ppb
Benzene	1.976	1334.4196	3433.2971	ppb
Toluene	3.356	1382.4340	4354.7812	ppb
m/p Xylenes	5.056	889.6375	2661.2587	ppb
o Xylene	5.423	562.4436	3885.8355	ppb
		4219.9611	114718.4378	

Lab name: KLM Environmental, LLC
 Collected: 4/29/21
 Analysis date: 04/29/2021 15:15:48
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: TW-8

Temperature program:

Init temp Hold Ramp Final temp

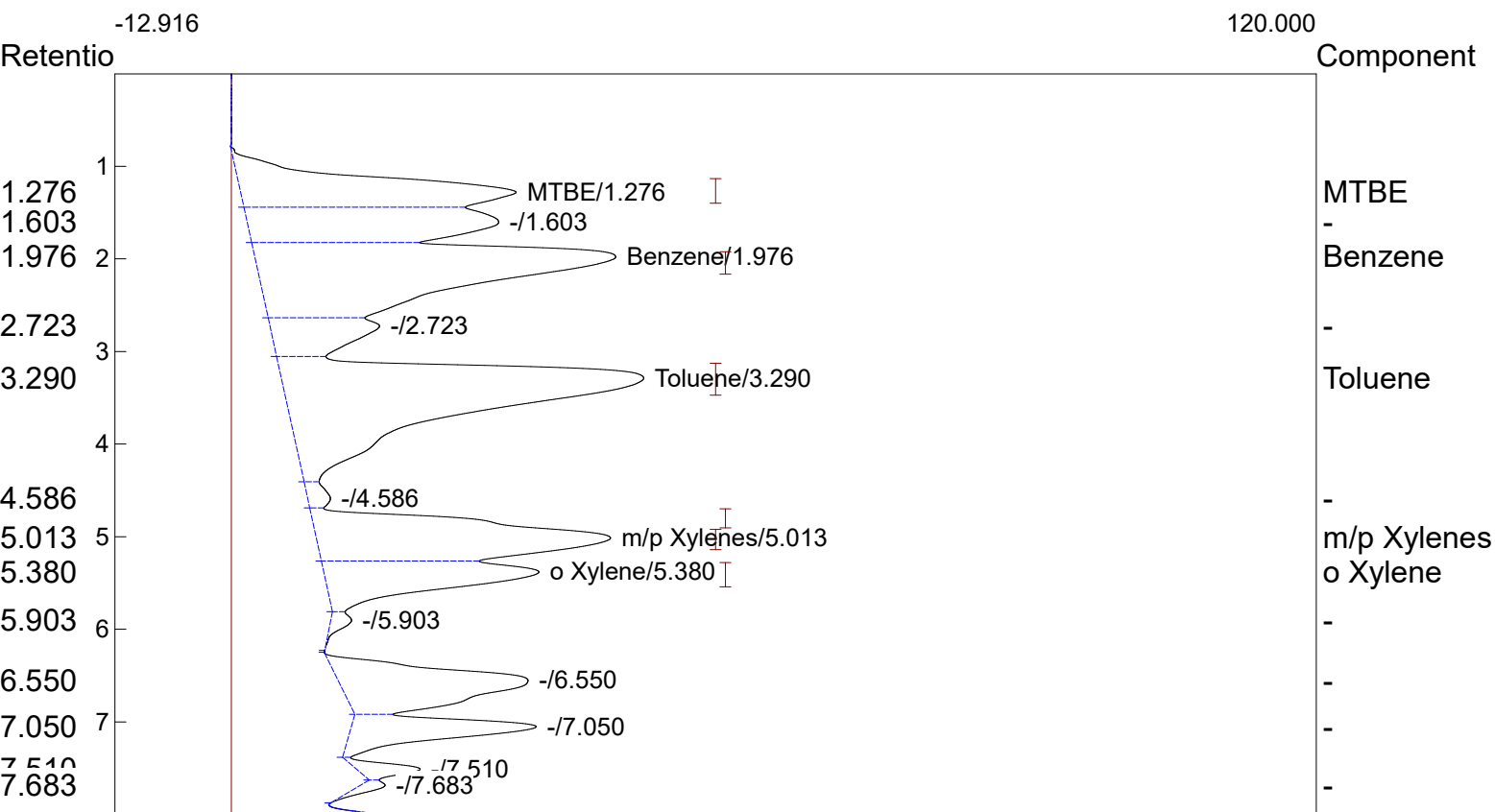


Component	Retention	Area	External	Units
MTBE	1.253	540.8688	4062.5285	ppb
Benzene	1.893	1394.8070	3588.6665	ppb
Toluene	3.140	1841.1348	5799.7266	ppb
m/p Xylenes	4.903	826.8230	2473.3556	ppb
o Xylene	5.283	498.1324	3441.5194	ppb
		5101.7660	19365.7966	

Lab name: KLM Environmental, LLC
 Collected: 4/29/21
 Analysis date: 04/29/2021 15:36:30
 Method: Headspace Injection
 Description: PID - Channel 2
 Column: RESTEK 15METER MXT-1
 Carrier: HELIUM AT 5 PSI
 Sample: TW-9

Temperature program:

Init temp Hold Ramp Final temp



Component	Retention	Area	External	Units
MTBE	1.276	597.0914	4484.8230	ppb
Benzene	1.976	1241.0732	3193.1284	ppb
Toluene	3.290	1440.7824	4538.5835	ppb
m/p Xylenes	5.013	763.7456	2284.6661	ppb
o Xylene	5.380	438.8580	3032.0018	ppb

4481.5506 17533.2027



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-1A**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **20** ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **4/27/2021**
20 ft. Date Completed: **4/27/2021**

10. CASING: Threaded Welded
Diam.: **1.25 in**
Type: PVC Galvanized
 Steel Other
0 in. to **16** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN:
Type: **Stainless Steel** Diam.: **1 in**
Slot/Gauge: **0.010** Length: **4 ft**
Set Between: **16** ft. and **20** ft. NOTE: MULTIPLE SCREENS
_____ ft. and _____ ft. USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

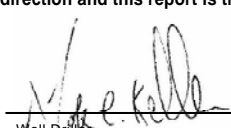
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0.0** ft. to **20** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **4/30/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-1B

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 25 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/27/2021
25 ft _____ ft. Date Completed: 4/27/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 _____ in. to 21 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 21 ft _____ ft. and 25 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft. It. Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 _____ ft. to 25 ft. _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: 4/30/2021
Well Driller: *Mark Keller*

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential
 Irrigation
 Test Well
 Public Supply
 Air Conditioning
 MonitorWell
 Process
 Emergency
 Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 4/27/2021
30 ft. Date Completed: 4/27/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 26 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-2

11. SCREEN: Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 26 ft ft. and 30 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 30 ft ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours
13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 30 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: _____ Date: 4/30/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/27/2021
30 ft _____ ft. Date Completed: 4/27/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 26 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-3

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Slot/Gauge: 0.010 Length: 4 ft
Set Between: 26 ft ft. and 30 ft ft. NOTE: MULTIPLE SCREENS
_____ ft. and _____ ft. USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 30 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 30 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/27/2021
25 ft _____ ft. Date Completed: 4/27/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 21 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-4

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft. and 25 ft. ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft. ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 4/30/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/27/2021
20 ft _____ ft. Date Completed: 4/27/2021

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-5

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 _____ in. to 16 _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 _____ ft. to 20 _____ ft.

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 _____ ft. and 20 _____ ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 _____ ft. to 20 _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: _____ Date: 4/30/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 _____ (last) _____ (first)
 Address: **311 Oakmonte Circle**

 City: **Greenwood** State: **SC** Zip: **29649**

 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____

 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-6**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **30** ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **4/28/2021**
30 ft _____ ft. Date Completed: **4/28/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **26** ft. depth _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
 Type: _____ Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **26** ft. and **30** ft. _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft. _____ It.
 Effective size _____ Uniformity Coefficient _____

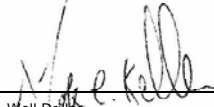
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **30** ft. _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **4/30/2021**
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-7

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/28/2021
25 ft. ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 21 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft ft. and 25 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-10

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/28/2021
25 ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 21 ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft. and 25 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** PUBLIC SYSTEM NUMBER: 04785 GP-12

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 4/28/2021
25 ft _____ ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 21 ft. depth _____ in. to _____ ft. depth
 Height Above Below Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft. and 25 ft. _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-13

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/28/2021
20 ft ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-14

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/28/2021
20 ft. ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: 4/30/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/29/2021
20 ft _____ ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 _____ in. to 16 ft _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-15

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft _____ ft. and 20 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 _____ ft. to 20 ft _____ ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 _____ ft. to 20 ft _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-16

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/29/2021
20 ft. ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) Date Started: 4/29/2021
20 ft ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-17

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
 Well Driller

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** **04785 GP-18**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **35** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **4/29/2021**
35 ft. Date Completed: **4/29/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized Steel Other
0 in. to **31 ft** ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **31 ft** ft. and **35 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **35** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC**
205 Stone Gate Lane Level A B C D
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* Date: **4/30/2021**
 Well Driller

If D Level Driller, provide supervising driller's name: _____



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 _____ (last) _____ (first)
 Address: 311 Oakmonte Circle

 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-20

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 41.5 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/29/2021
41.5 ft _____ ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 37.5 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 37.5 ft. and 41.5 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 41.5 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: Home:

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, Monitor Well, Process, Emergency, Replacement

9. WELL DEPTH (completed) 20 ft
Date Started: 4/29/2021
Date Completed: 4/29/2021

10. CASING: Threaded, Steel, 1.25 in Diam.
16 ft depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-22

11. SCREEN: Stainless Steel, 1 in Diam., 4 ft Length
Set Between: 16 ft and 20 ft
Sieve Analysis: No

4. ABANDONMENT: Yes
Grouted Depth: from 0 ft. to 20 ft.

12. STATIC WATER LEVEL: ft. below land surface after 24 hours

Table with columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Entry: Hole abandoned with grout after sample collected.

13. PUMPING LEVEL Below Land Surface.
Pumping Test: No

14. WATER QUALITY
Chemical Analysis: Yes, Bacterial Analysis: No

15. ARTIFICIAL FILTER (filter pack) No

16. WELL GROUTED? Yes
Neat Cement, Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type, Well Disinfected: No

18. PUMP: Date installed, Not installed
Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, Type: Jet (deep)

19. WELL DRILLER: Mark Keller, PG, CERT. NO.: 1554
Address: Grandview Holdings, LLC, 205 Stone Gate Lane, Summerville, SC 29486
Telephone No.: 843-797-7884

Indicate Water Bearing Zones (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller, Well Driller, Date: 4/30/2021

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-23

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 4/29/2021
20 ft _____ ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above _____ Below _____
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

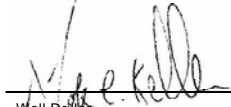
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-24**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ ft. Date Started: **4/29/2021**
 _____ ft. Date Completed: **4/29/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **16** ft. depth
 _____ in. to _____ ft. depth
 Height Above Surface _____ ft. Below _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft.
 _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* _____ Date: **4/30/2021**
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**

Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** **04785 GP-25**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20** ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:

Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **4/29/2021**
20 ft _____ ft. Date Completed: **4/29/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **16 ft** ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: **1554**
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: **4/30/2021**

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** PUBLIC SYSTEM NUMBER: 04785 GP-26

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 4/29/2021
20 ft ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: PUBLIC SYSTEM NUMBER: 04785 GP-27

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 4/29/2021
20 ft. _____ ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

 Signed: Mark Keller Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-28

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 23 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/29/2021
23 ft _____ ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 19 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 19 ft ft. and 23 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 23 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/29/2021
25 ft _____ ft. Date Completed: 4/29/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 21 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-29

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft ft. and 25 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 4/30/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-30

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 30 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) Date Started: 4/30/2021
30 ft _____ ft. Date Completed: 4/30/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 26 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Slot/Gauge: 0.010 Length: 4 ft
Set Between: 26 ft ft. and 30 ft ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
_____ ft. and _____ ft.
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 30 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) _____ ft. Date Started: 4/30/2021
35 ft _____ ft. Date Completed: 4/30/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 31 ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-32

11. SCREEN: Type: **Stainless Steel** Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 31 ft _____ ft. and 35 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 35 ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 35 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: _____ Date: 4/30/2021
 Well Driller: *Mark Keller*

6. TYPE: Mud Rotary Jetted Bored Driven
 Dug Air Rotary
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-33

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 40 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

7. PERMIT NUMBER: UST # 04785

8. USE: Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

9. WELL DEPTH (completed) 40 ft. Date Started: 4/30/2021 Date Completed: 4/30/2021

10. CASING: Threaded, Steel, 36 ft depth. Height Above Surface, Weight, Drive Shoe?

11. SCREEN: Stainless Steel, 1 in diam, 4 ft length. Set Between: 36 ft and 40 ft. Sieve Analysis: No

12. STATIC WATER LEVEL: ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface. Pumping Test: No. Yield:

14. WATER QUALITY: Chemical Analysis: Yes. Bacterial Analysis: No. Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack): No. Installed from ft. to ft. Effective size, Uniformity Coefficient

16. WELL GROUTED?: Yes. Neat Cement, Bentonite, Bentonite/Cement, Other. Depth: From 0 ft. to 40 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction. Type, Well Disinfected, Amount

18. PUMP: Date installed, Not installed. Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, Type: Submersible, Jet (shallow), Turbine, Jet (deep), Reciprocating, Centrifugal

19. WELL DRILLER: Mark Keller, PG. Address: Grandview Holdings, LLC, 205 Stone Gate Lane, Summerville, SC 29486. Telephone No.: 843-797-7884. CERT. NO.: 1554. Level A, B, C, D

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller, Well Driller. Date: 4/30/2021

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-34

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 22 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/30/2021
22 ft _____ ft. Date Completed: 4/30/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 18 ft. depth _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 18 ft. and 22 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 22 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-35

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 19 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/30/2021
19 ft _____ ft. Date Completed: 4/30/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 15 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 15 ft ft. and 19 ft ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 19 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/17/2021
15 ft. _____ ft. Date Completed: 5/17/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-36A

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
_____ ft. and _____ ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/17/2021
25 ft ft. Date Completed: 5/17/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 21 ft. depth
Height Above Surface Weight Drive Shoe?

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-36B

11. SCREEN: Stainless Steel
Type: Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 21 ft. and 25 ft. ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 25 ft. ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft. It.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 25 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-37A

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/17/2021
20 ft. Date Completed: 5/17/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-37B**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **25** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/17/2021**
25 ft. Date Completed: **5/17/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized Steel Other
0 in. to **21** ft. depth
 _____ in. to _____ ft. depth
 Height Above _____ ft. Below _____ ft.
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
 Type: _____ Length: **4 ft**
 Slot/Gauge: **0.010**
 Set Between: **21** ft. and **25** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

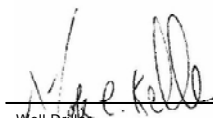
15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **25** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed:  Date: **5/21/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-38**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **25** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/17/2021**
25 ft. ft. Date Completed: **5/17/2021**

10. CASING: Threaded Welded
Diam.: **1.25** in
Type: PVC Galvanized
 Steel Other
0 in. to **21** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1** in
Type: _____ Length: **4** ft
Slot/Gauge: **0.010**
Set Between: **21** ft. ft. and **25** ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

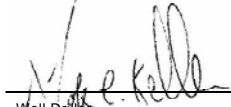
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** ft. to **25** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) **Grandview Holdings, LLC** Level **A** **B** **C** **D**
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **5/21/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-39

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thick-ness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		
• Indicate Water Bearing Zones (Use a 2nd sheet if needed)		

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/17/2021
25 ft. ft. Date Completed: 5/17/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 21 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft. and 25 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential [] Public Supply [] Process []
Irrigation [] Air Conditioning [] Emergency []
Test Well [x] MonitorWell [] Replacement []

9. WELL DEPTH (completed) Date Started: 5/17/2021
25 ft ft. Date Completed: 5/17/2021

10. CASING: [x] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [x] Steel [] Other
0 in. to 21 ft ft. depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-40

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 21 ft ft. and 25 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [x] No

4. ABANDONMENT: [x] Yes [] No
Grouted Depth: from 0 ft. to 25 ft ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [x] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [x] Yes [] No Bacterial Analysis [] Yes [x] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [x] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [x] Yes [] No
[x] Neat Cement [] Bentonite [] Bentonite/Cement [] Other _____
Depth: From 0 ft. to 25 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [x]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine
[] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane Level A B C D
Summerville, SC 29486 [] [x] [] []
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 5/21/2021
Well Driller

6. TYPE: [] Mud Rotary [] Jetted [] Bored
[] Dug [] Air Rotary [x] Driven
[] Cable tool [] Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-42

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 25 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 5/17/2021
25 ft ft. Date Completed: 5/17/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [X] Steel [] Other
0 in. to 21 ft ft. depth

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 21 ft ft. and 25 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other _____
Depth: From 0 ft. to 25 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine
[] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ **04785 GP-43**

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021
25 ft. ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 21 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft. and 25 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

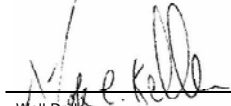
15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed:  Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-45

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 25 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/18/2021
25 ft _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 21 ft. depth
_____ in. to _____ ft. depth
Height Above Below Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 21 ft _____ ft. and 25 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

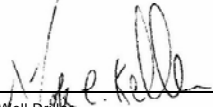
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: 
Well Driller Date: 5/21/2021

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)

Address: 311 Oakmonte Circle

City: Greenwood State: SC Zip: 29649

Telephone: Work: Home:

2. LOCATION OF WELL: COUNTY: Greenwood

Name: Quick Pantry # 19

Street Address: 1802 S. Main Street

City: Greenwood State: SC Zip:

Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-46

4. ABANDONMENT: [X] Yes [] No

Grouted Depth: from 0 ft. to 25 ft.

Formation Description Thickness of Stratum Depth to Bottom of Stratum

Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones

(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored

[] Dug [] Air Rotary [X] Driven

[] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process

[] Irrigation [] Air Conditioning [] Emergency

[X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021

25 ft ft. Date Completed: 5/18/2021

10. CASING: [X] Threaded [] Welded Diam.: 1.25 in

Type: [] PVC [] Galvanized [X] Steel [] Other

0 in. to 21 ft ft. depth

Height Above [] Below [] Surface

Weight lb./ft. Drive Shoe? [] Yes [] No

11. SCREEN: Stainless Steel Diam.: 1 in

Type: Slot/Gauge: 0.010 Length: 4 ft

Set Between: 21 ft ft. and 25 ft ft. NOTE: MULTIPLE SCREENS

Sieve Analysis [] Yes (please enclose) [X] No USE SECOND SHEET

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.

ft. after hrs. Pumping G.P.M.

Pumping Test: [] Yes (please enclose) [X] No

Yield:

14. WATER QUALITY Chemical Analysis [X] Yes [] No

Bacterial Analysis [] Yes [X] No

Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No

Installed from ft. to It.

Effective size Uniformity Coefficient

16. WELL GROUTED? [X] Yes [] No

[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other

Depth: From 0 ft. to 25 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction

Type Well Disinfected [] Yes Type: Amount:

18. PUMP: Date installed: Not installed [X]

Mfr. Name: Model No.: H.P. volts Length of drop pipe - ft. Capacity gpm

TYPE: [] Submersible [] Jet (shallow) [] Turbine

[] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554

Address: (Print) Grandview Holdings, LLC

205 Stone Gate Lane Level A B C D [] [X] [] []

Summerville, SC 29486 Telephone No.: 843-797-7884 Fax No.:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under

my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021

Well Driller If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

9. WELL DEPTH (completed)
25 ft ft.
Date Started: 5/18/2021
Date Completed: 5/18/2021

10. CASING: Threaded, Welded
Diam.: 1.25 in
Type: PVC, Galvanized, Steel, Other
0 in. to 21 ft ft. depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-47

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 21 ft ft. and 25 ft ft.
Sieve Analysis: Yes (please enclose), No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 25 ft ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose), No
Yield:

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUDED? Yes No
Neat Cement, Bentonite, Bentonite/Cement, Other
Depth: From 0 ft. to 25 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible, Jet (shallow), Turbine, Jet (deep), Reciprocating, Centrifugal

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary, Jetted, Bored, Dug, Air Rotary, Driven, Cable tool, Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: PUBLIC SYSTEM NUMBER: 04785 GP-48

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/18/2021
20 ft. _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone, Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER:
04785 GP-49

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 _____ (last) _____ (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-50

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/18/2021
20 ft _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Other
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 16 ft ft. depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-51

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft ft. and 20 ft ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-53

9. WELL DEPTH (completed) _____ ft. Date Started: 5/18/2021
20 ft. _____ ft. Date Completed: 5/18/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 _____ (last) _____ (first)
 Address: **311 Oakmonte Circle**

 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: PUBLIC SYSTEM NUMBER: 04785 GP-54

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

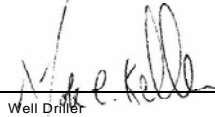
17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed:  Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-55

11. SCREEN: Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-56**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **20 ft** ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/18/2021**
20 ft _____ ft. Date Completed: **5/18/2021**

10. CASING: Threaded Welded
Diam.: **1.25 in**
Type: PVC Galvanized
 Steel Other
0 _____ in. to **16 ft** _____ ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
Type: _____ Slot/Gauge: **0.010** Length: **4 ft**
Set Between: **16 ft** _____ ft. and **20 ft** _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

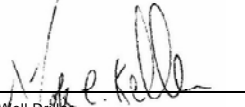
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** _____ ft. to **20 ft** _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **5/21/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-57**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/18/2021**
20 ft. ft. Date Completed: **5/18/2021**

10. CASING: Threaded Welded
Diam.: **1.25** in
Type: PVC Galvanized
 Steel Other
0 in. to **16** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN:
Type: **Stainless Steel** Diam.: **1** in
Slot/Gauge: **0.010** Length: **4** ft
Set Between: **16** ft. and **20** ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** ft. to **20** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* Date: **5/21/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-58

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft. ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: **04785 GP-59**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE:
 Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ ft. Date Started: **5/18/2021**
 _____ ft. Date Completed: **5/18/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **16 ft** ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: **5/21/2021**
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft _____ ft. Date Completed: 5/18/2021

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-60

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

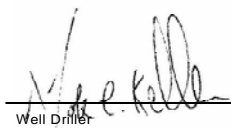
18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed:  Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name: _____



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-62

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/18/2021
20 ft _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-63

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/18/2021
20 ft. _____ ft. Date Completed: 5/18/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Surface Below Surface
 _____ ft. _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-64

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-65

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-66

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) 15 ft. Date Started: 5/19/2021 Date Completed: 5/19/2021

10. CASING: [X] Threaded [] Welded Diam.: 1.25 in. Type: [] PVC [] Galvanized [X] Steel [] Other 0 in. to 11 ft. depth

11. SCREEN: Stainless Steel Type: Diam.: 1 in. Slot/Gauge: 0.010 Length: 4 ft. Set Between: 11 ft. and 15 ft. Sieve Analysis [] Yes [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface. _____ ft. after _____ hrs. Pumping _____ G.P.M. Pumping Test: [] Yes [X] No Yield: _____

14. WATER QUALITY Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No Installed from _____ ft. to _____ ft. Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No [X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction Type _____ Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X] Mfr. Name: _____ Model No.: _____ H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554 Address: (Print) Grandview Holdings, LLC Level A B C D [] [X] [] [] 205 Stone Gate Lane Summerville, SC 29486 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-69

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/19/2021
20 ft _____ ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Other
 Steel Other
0 in. to 16 ft. depth
____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft _____ ft. and 20 ft _____ ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft. It.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 _____ ft. to 20 _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-70**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **20** ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/19/2021**
20 ft _____ ft. Date Completed: **5/19/2021**

10. CASING: Threaded Welded
Diam.: **1.25 in**
Type: PVC Galvanized Steel Other
0 in. to **16 ft** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
Type: _____ Slot/Gauge: **0.010** Length: **4 ft**
Set Between: **16 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** ft. to **20 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: **5/21/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 _____ (last) _____ (first)
 Address: 311 Oakmonte Circle

 City: Greenwood State: SC Zip: 29649

 Telephone. Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street

 City: Greenwood State: SC Zip: _____

 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: PUBLIC SYSTEM NUMBER: 04785 GP-71

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021

 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-72

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-73

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE:
 Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-74

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft _____ ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

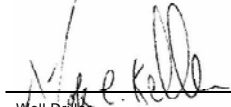
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  _____ Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-75

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 20 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft ft. Date Completed: 5/19/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [X] Steel [] Other
0 in. to 16 ft. depth

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft. and 20 ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other _____
Depth: From 0 ft. to 20 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D [] [X] [] []
205 Stone Gate Lane Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-76

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)
 5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ ft. Date Started: 5/19/2021
20 ft. _____ ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above _____ ft. Below _____ ft.
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft.
 Slot/Gauge: 0.010
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
 Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-77

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/19/2021
20 ft _____ ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft. _____ ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Other
 Steel
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-79

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone. Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> Monitor Well	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) Date Started: **5/19/2021**
20 ft. _____ ft. Date Completed: **5/19/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **16 ft** ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** **04785 GP-80**

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft
 _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20 ft** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: *Mark Keller* Date: **5/21/2021**
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-82

9. WELL DEPTH (completed) 20 ft. Date Started: 5/19/2021 Date Completed: 5/19/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: Steel Other
0 in. to 16 ft. depth

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft. and 20 ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET

Indicate Water Bearing Zones (Use a 2nd sheet if needed)

12. STATIC WATER LEVEL ft. below land surface after 24 hours

5. REMARKS:

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

6. TYPE: Mud Rotary, Jetted, Bored, Dug, Air Rotary, Driven, Cable tool, Other

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 20 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine, Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/19/2021
20 ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-83

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: PUBLIC SYSTEM NUMBER: 04785 GP-84

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/19/2021
20 ft _____ ft. Date Completed: 5/19/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 16 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-85

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
20 ft. _____ ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
_____ ft. and _____ ft.
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
20 ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-86

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

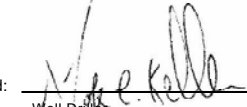
18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/20/2021**
20 ft _____ ft. Date Completed: **5/20/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized Steel Other
0 in. to **16 ft** ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** **04785 GP-87**

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20 ft** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: **5/21/2021**
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-88**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) Date Started: **5/20/2021**
20 ft. ft. Date Completed: **5/20/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **16 ft** ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
 Type: _____ Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print)
Grandview Holdings, LLC
205 Stone Gate Lane Level A B C D
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Date: **5/21/2021**
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-89

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 20 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
20 ft ft. Date Completed: 5/20/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [X] Steel [] Other
0 in. to 16 ft. depth

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft. and 20 ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other _____
Depth: From 0 ft. to 20 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane [] [X] [] []
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-90

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC (last) (first)

Address: 311 Oakmonte Circle

City: Greenwood State: SC Zip: 29649

Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood

Name: Quick Pantry # 19

Street Address: 1802 S. Main Street

City: Greenwood State: SC Zip: _____

Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-91

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

5. REMARKS:

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) 15 ft. Date Started: 5/20/2021
Date Completed: 5/20/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
_____ in. to _____ ft. depth
Height Above _____ ft. Below _____ ft.
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in.
Slot/Gauge: 0.010 Length: 4 ft.
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-92

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/20/2021
20 ft. _____ ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above _____ Below _____
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-93B**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **16 ft** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/20/2021**
16 ft ft. Date Completed: **5/20/2021**

10. CASING: Threaded Welded
Diam.: **1.25 in**
Type: PVC Galvanized
 Steel Other
0 in. to **12** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
Type: _____ Length: **4 ft**
Slot/Gauge: **0.010**
Set Between: **12** ft. and **16 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET

Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

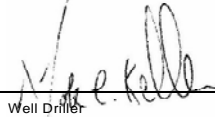
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** ft. to **16 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **5/21/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-95A

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

7. PERMIT NUMBER: UST # 04785

8. USE: Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

9. WELL DEPTH (completed) 15 ft. Date Started: 5/20/2021 Date Completed: 5/20/2021

10. CASING: Threaded, Steel, Diam.: 1.25 in. Height Above Surface, Weight, Drive Shoe?

11. SCREEN: Stainless Steel, Diam.: 1 in, Length: 4 ft. Set Between: 11 ft. and 15 ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface. Pumping Test: Yes No Yield:

14. WATER QUALITY Chemical Analysis, Bacterial Analysis

15. ARTIFICIAL FILTER (filter pack) Installed from, Effective size, Uniformity Coefficient

16. WELL GROUTED? Neat Cement, Bentonite, Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: Type, Well Disinfected, Amount:

18. PUMP: Date installed, Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, TYPE

19. WELL DRILLER: Mark Keller, PG, Address: Grandview Holdings, LLC, 205 Stone Gate Lane, Summerville, SC 29486

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller, Well Driller Date: 5/21/2021

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 5/20/2021
20 ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-95B

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type: _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-96A

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft ft. Date Completed: 5/20/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth

Thickness of Stratum Depth to Bottom of Stratum

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft.

Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

Pumping Level Below Land Surface

13. PUMPING LEVEL Below Land Surface
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

Water Quality

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No

Artificial Filter (filter pack)

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

Well Grouted?

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft.

Nearest Source of Possible Contamination

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type Well Disinfected Yes Type: Amount:

Pump Information

18. PUMP: Date installed: Not installed X
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

Water Well Driller Information

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Water Well Driller's Certification

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Remarks

Signed: [Signature] Date: 5/21/2021
Well Driller

Type

If D Level Driller, provide supervising driller's name:

6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-96B**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/20/2021**
20 ft. ft. Date Completed: **5/20/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **16 ft** ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **16 ft** ft. and **20 ft** ft.
 _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20 ft** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: **5/21/2021**

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-97A

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft ft. Date Completed: 5/20/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed X
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-98A

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Entry: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft. Date Completed: 5/20/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [X] Steel [] Other
0 in. to 11 ft. depth

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other _____
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A [] B [X] C [] D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/21/2021

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
20 ft ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 16 ft. depth
Height Above Below Surface ft
Weight lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-98B

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft. and 20 ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft. ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 20 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** PUBLIC SYSTEM NUMBER: 04785 GP-99

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/20/2021
20 ft _____ ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 _____ in. to 16 ft _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft _____ ft. and 20 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 _____ ft. to 20 ft _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: 5/21/2021

 Well Driller

If D Level Driller, provide supervising driller's name: _____



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-100

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
20 ft _____ ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-101

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/21/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-102

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft _____ ft. Date Completed: 5/20/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-103

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: *Mark Keller* Date: 5/21/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-104

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft ft. Date Completed: 5/20/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 5/21/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/20/2021
15 ft. _____ ft. Date Completed: 5/20/2021

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-105

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)
5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* Date: 5/21/2021
 Well Driller

If D Level Driller, provide supervising driller's name:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in.
 Type: PVC Galvanized Other
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-106

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in.
 Slot/Gauge: 0.010 Length: 4 ft.
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-108

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/24/2021
15 ft _____ ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:Name: Bahuchar Mata, LLC
(last) (first)Address: 311 Oakmonte CircleCity: Greenwood State: SC Zip: 29649

Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: GreenwoodName: Quick Pantry # 19Street Address: 1802 S. Main StreetCity: Greenwood State: SC Zip: _____

Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:04785 GP-109**4. ABANDONMENT:** Yes NoGrouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)**5. REMARKS:**

- 6. TYPE:**
-
- Mud Rotary
-
- Jetted
-
- Bored
-
-
- Dug
-
- Air Rotary
-
- Driven
-
-
- Cable tool
-
- Other

7. PERMIT NUMBER: UST # 04785**8. USE:**

-
- Residential
-
- Public Supply
-
- Process
-
-
- Irrigation
-
- Air Conditioning
-
- Emergency
-
-
- Test Well
-
- MonitorWell
-
- Replacement

9. WELL DEPTH (completed) Date Started: 5/24/202115 ft. ft. Date Completed: 5/24/2021**10. CASING:** Threaded WeldedDiam.: 1.25 inType: PVC Galvanized Steel Other0 in. to 11 ft. depth

_____ in. to _____ ft. depth

Height Above Below

Surface _____ ft

Weight _____ lb./ft.

Drive Shoe? Yes No**11. SCREEN:** Type: Stainless Steel Diam.: 1 inSlot/Gauge: 0.010 Length: 4 ftSet Between: 11 ft. and 15 ft

_____ ft. and _____ ft.

Sieve Analysis Yes (please enclose) No

NOTE: MULTIPLE SCREENS

USE SECOND SHEET

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours**13. PUMPING LEVEL Below Land Surface.**

_____ ft. after _____ hrs. Pumping _____ G.P.M

Pumping Test: Yes (please enclose) No

Yield: _____

14. WATER QUALITYChemical Analysis Yes No Bacterial Analysis Yes No

Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No

Installed from _____ ft. to _____ ft.

Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No Neat Cement Bentonite Bentonite/Cement Other _____Depth: From 0 ft. to 15 ft.**17. NEAREST SOURCE OF POSSIBLE CONTAMINATION:** _____ ft. _____ direction

Type _____

Well Disinfected Yes Type: _____ Amount: _____**18. PUMP:** Date installed: _____ Not installed

Mfr. Name: _____ Model No.: _____

H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm

TYPE: Submersible Jet (shallow) Turbine Jet (deep) Reciprocating Centrifugal**19. WELL DRILLER:** Mark Keller, PG CERT. NO.: 1554

Address: (Print) _____

Grandview Holdings, LLC Level A B C D205 Stone Gate LaneSummerville, SC 29486Telephone No.: 843-797-7884 Fax No.: _____**20. WATER WELL DRILLER'S CERTIFICATION:** This well was drilled under my direction and this report is true to the best of my knowledge and belief.Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
Height Above Surface Below Surface
Weight lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-110

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-111

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft _____ ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 _____ in. to 11 _____ ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 _____ ft. and 15 _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 _____ ft. to 15 _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-112

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary, Jetted, Bored, Dug, Air Rotary, Driven, Cable tool, Other

7. PERMIT NUMBER: UST # 04785

8. USE: Residential, Public Supply, Process, Irrigation, Air Conditioning, Emergency, Test Well, MonitorWell, Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded, Diam.: 1.25 in
Type: PVC Galvanized, Steel Other
0 in. to 11 ft. depth

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M.
Pumping Test: Yes No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Well Driller Date: 5/28/2021

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-113

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/24/2021
15 ft. _____ ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Surface _____ ft. Below Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

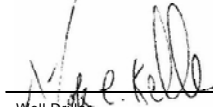
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-114

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/24/2021
15 ft. _____ ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-115

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		
• Indicate Water Bearing Zones (Use a 2nd sheet if needed)		

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 5/24/2021
15 ft _____ ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 _____ in. to 11 _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 11 _____ ft. and 15 _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

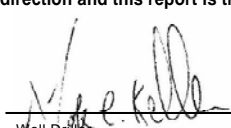
15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 _____ ft. to 15 _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed:  Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 _____ (last) _____ (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-116

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft _____ ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-117

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft ft. Date Completed: 5/24/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well Monitor Well Replacement

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:

9. WELL DEPTH (completed) Date Started: 5/24/2021
Date Completed: 5/24/2021

10. CASING: Threated Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
Height Above Surface Below
Weight lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-118

11. SCREEN: Stainless Steel
Type: Diameter: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021

6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/24/2021
15 ft. _____ ft. Date Completed: 5/24/2021

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-119

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Other
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021

 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-128

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/25/2021
20 ft _____ ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

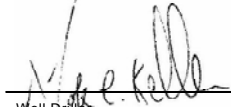
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-129

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/25/2021
20 ft _____ ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Other
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-130

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/25/2021
20 ft. _____ ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-131

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) Date Started: 5/25/2021
15 ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in.
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in.
 Slot/Gauge: 0.010 Length: 4 ft.
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, Monitor Well, Process, Emergency, Replacement

9. WELL DEPTH (completed) 15 ft. Date Started: 5/25/2021 Date Completed: 5/25/2021

10. CASING: Threaded, Steel, 1.25 in diam, 0 in to 11 ft depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-132

11. SCREEN: Stainless Steel, 1 in diam, 0.010 slot/gauge, 4 ft length, set between 11 ft and 15 ft

4. ABANDONMENT: Yes
Grouted Depth: from 0 ft. to 15 ft.

12. STATIC WATER LEVEL: ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
Pumping Test: No
Yield:

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Includes entry: Hole abandoned with grout after sample collected.

14. WATER QUALITY
Chemical Analysis: Yes, Bacterial Analysis: No

15. ARTIFICIAL FILTER (filter pack): No

16. WELL GROUTED? Yes
Neat Cement, Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction

18. PUMP: Date installed: Not installed
Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, Type: Jet (deep)

19. WELL DRILLER: Mark Keller, PG
Address: Grandview Holdings, LLC, 205 Stone Gate Lane, Summerville, SC 29486
Telephone No.: 843-797-7884

Indicate Water Bearing Zones (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/28/2021

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) _____ ft. Date Started: 5/25/2021
 _____ ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-133

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 5/25/2021
15 ft. _____ ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-134

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

11. SCREEN: Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____ Level A B C D
Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

9. WELL DEPTH (completed) Date Started: 5/25/2021
15 ft ft. Date Completed: 5/25/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
Height Above Below Surface ft
Weight lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-135

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
Signed: [Signature] Date: 5/28/2021
If D Level Driller, provide supervising driller's name:

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION: Name: Bahuchar Mata, LLC (last) (first) Address: 311 Oakmonte Circle City: Greenwood State: SC Zip: 29649 Telephone: Work: _____ Home: _____		7. PERMIT NUMBER: <u>UST # 04785</u>																																																		
2. LOCATION OF WELL: COUNTY: Greenwood Name: Quick Pantry # 19 Street Address: 1802 S. Main Street City: Greenwood State: SC Zip: _____ Latitude: _____ Longitude: _____		8. USE: <input type="checkbox"/> Residential <input type="checkbox"/> Public Supply <input type="checkbox"/> Process <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Emergency <input checked="" type="checkbox"/> Test Well <input type="checkbox"/> MonitorWell <input type="checkbox"/> Replacement																																																		
3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-137		9. WELL DEPTH (completed) Date Started: 5/25/2021 25 ft ft. Date Completed: 5/25/2021																																																		
4. ABANDONMENT: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Grouted Depth: from 0 ft. to 25 ft ft.		10. CASING: <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded Diam.: 1.25 in Type: <input type="checkbox"/> PVC <input type="checkbox"/> Galvanized <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Other 0 in. to 21 ft ft. depth _____ in. to _____ ft. depth Height Above <input type="checkbox"/> Below <input type="checkbox"/> Surface _____ ft. Weight _____ lb./ft. Drive Shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:75%;">Formation Description</th> <th style="width:12.5%;">Thickness of Stratum</th> <th style="width:12.5%;">Depth to Bottom of Stratum</th> </tr> </thead> <tbody> <tr> <td>Hole abandoned with grout after sample collected.</td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		Formation Description	Thickness of Stratum	Depth to Bottom of Stratum	Hole abandoned with grout after sample collected.																																													11. SCREEN: Stainless Steel Diam.: 1 in Type: _____ Length: 4 ft Slot/Gauge: 0.010 Set Between: 21 ft ft. and 25 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET Sieve Analysis <input type="checkbox"/> Yes (please enclose) <input checked="" type="checkbox"/> No		
Formation Description	Thickness of Stratum	Depth to Bottom of Stratum																																																		
Hole abandoned with grout after sample collected.																																																				
5. REMARKS:		12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours 13. PUMPING LEVEL Below Land Surface. _____ ft. after _____ hrs. Pumping _____ G.P.M. Pumping Test: <input type="checkbox"/> Yes (please enclose) <input checked="" type="checkbox"/> No Yield: _____																																																		
6. TYPE: <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Dug <input type="checkbox"/> Air Rotary <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Cable tool <input type="checkbox"/> Other		14. WATER QUALITY Chemical Analysis <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Bacterial Analysis <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please enclose lab results.																																																		
Indicate Water Bearing Zones (Use a 2nd sheet if needed)		15. ARTIFICIAL FILTER (filter pack) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Installed from _____ ft. to _____ ft. Effective size _____ Uniformity Coefficient _____																																																		
6. TYPE:		16. WELL GROUDED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Bentonite/Cement <input type="checkbox"/> Other _____ Depth: From 0 ft. to 25 ft ft.																																																		
5. REMARKS:		17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction Type _____ Well Disinfected <input type="checkbox"/> Yes Type: _____ Amount: _____																																																		
5. REMARKS:		18. PUMP: Date installed: _____ Not installed <input checked="" type="checkbox"/> Mfr. Name: _____ Model No.: _____ H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet (shallow) <input type="checkbox"/> Turbine <input type="checkbox"/> Jet (deep) <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal																																																		
5. REMARKS:		19. WELL DRILLER: <u>Mark Keller, PG</u> CERT. NO.: 1554 Address: (Print) Grandview Holdings, LLC 205 Stone Gate Lane Summerville, SC 29486 Telephone No.: 843-797-7884 Fax No.: _____																																																		
5. REMARKS:		20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief. Signed: Date: 5/28/2021 _____ Well Driller																																																		



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, Monitor Well, Process, Emergency, Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-138

9. WELL DEPTH (completed) 5 ft
Date Started: 5/26/2021
Date Completed: 5/26/2021

4. ABANDONMENT: Yes
Grouted Depth: from 0 ft. to 5 ft

10. CASING: Threaded, Steel
Diam.: 1.25 in
Type: Steel
0 in. to 1 ft. depth

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Entry: Hole abandoned with grout after sample collected.

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 1ft and 5ft

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUDED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 5 ft

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG
Address: Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

5. REMARKS:
Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/28/2021
Well Driller

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 _____ (last) _____ (first)
 Address: **311 Oakmonte Circle**

 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/26/2021**
5 ft _____ ft. Date Completed: **5/26/2021**

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** **04785 GP-140**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 _____ in. to **1** _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** _____ ft. to **5 ft** _____ ft.

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **1ft** _____ ft. and **5 ft** _____ ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** _____ ft. to **5 ft** _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: **1554**
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: *Mark Keller* Date: **5/28/2021**

 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION: Name: <u>Bahuchar Mata, LLC</u> (last) (first) Address: <u>311 Oakmonte Circle</u> City: <u>Greenwood</u> State: <u>SC</u> Zip: <u>29649</u> Telephone. Work: _____ Home: _____			7. PERMIT NUMBER: <u>UST # 04785</u>																																																		
2. LOCATION OF WELL: COUNTY: <u>Greenwood</u> Name: <u>Quick Pantry # 19</u> Street Address: <u>1802 S. Main Street</u> City: <u>Greenwood</u> State: <u>SC</u> Zip: _____ Latitude: _____ Longitude: _____			8. USE: <input type="checkbox"/> Residential <input type="checkbox"/> Public Supply <input type="checkbox"/> Process <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Emergency <input checked="checked" type="checkbox"/> Test Well <input type="checkbox"/> MonitorWell <input type="checkbox"/> Replacement																																																		
3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: <u>04785 GP-141</u>			9. WELL DEPTH (completed) Date Started: <u>5/26/2021</u> <u>5 ft</u> _____ ft. Date Completed: <u>5/26/2021</u>																																																		
4. ABANDONMENT: <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No Grouted Depth: from <u>0</u> ft. to <u>5 ft</u> ft.			10. CASING: <input checked="checked" type="checkbox"/> Threaded <input type="checkbox"/> Welded Diam.: <u>1.25 in</u> Type: <input type="checkbox"/> PVC <input type="checkbox"/> Galvanized <input checked="checked" type="checkbox"/> Steel <input type="checkbox"/> Other <u>0</u> in. to <u>1</u> ft. depth ____ in. to _____ ft. depth Height Above <input type="checkbox"/> Below <input type="checkbox"/> Surface _____ ft Weight _____ lb./ft. Drive Shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No																																																		
11. SCREEN: Type: <u>Stainless Steel</u> Diam.: <u>1 in</u> Slot/Gauge: <u>0.010</u> Length: <u>4 ft</u> Set Between: <u>1ft</u> ft. and <u>5 ft</u> ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET Sieve Analysis <input type="checkbox"/> Yes (please enclose) <input checked="checked" type="checkbox"/> No			12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours																																																		
13. PUMPING LEVEL Below Land Surface. ____ ft. after _____ hrs. Pumping _____ G.P.M Pumping Test: <input type="checkbox"/> Yes (please enclose) <input checked="checked" type="checkbox"/> No Yield: _____			14. WATER QUALITY Chemical Analysis <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No Bacterial Analysis <input type="checkbox"/> Yes <input checked="checked" type="checkbox"/> No Please enclose lab results.																																																		
<table border="1"><thead><tr><th>Formation Description</th><th>• Thickness of Stratum</th><th>Depth to Bottom of Stratum</th></tr></thead><tbody><tr><td>Hole abandoned with grout after sample collected.</td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></tbody></table>			Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum	Hole abandoned with grout after sample collected.																																													15. ARTIFICIAL FILTER (filter pack) <input type="checkbox"/> Yes <input checked="checked" type="checkbox"/> No Installed from _____ ft. to _____ ft. Effective size _____ Uniformity Coefficient _____		
Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum																																																			
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18. PUMP: Date installed: _____ Not installed <input checked="checked" type="checkbox"/> Mfr. Name: _____ Model No.: _____ H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet (shallow) <input type="checkbox"/> Turbine <input type="checkbox"/> Jet (deep) <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal			19. WELL DRILLER: <u>Mark Keller, PG</u> CERT. NO.: <u>1554</u> Address: (Print) _____ <u>Grandview Holdings, LLC</u> Level A <input type="checkbox"/> B <input checked="checked" type="checkbox"/> C <input type="checkbox"/> D <u>205 Stone Gate Lane</u> <u>Summerville, SC 29486</u> Telephone No.: <u>843-797-7884</u> Fax No.: _____																																																		
20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief. Signed: <u>Mark Keller</u> Date: <u>5/28/2021</u> Well Driller If D Level Driller, provide supervising driller's name:																																																					
5. REMARKS:																																																					
6. TYPE: <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Dug <input type="checkbox"/> Air Rotary <input checked="checked" type="checkbox"/> Driven <input type="checkbox"/> Cable tool <input type="checkbox"/> Other																																																					



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-142

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 5 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
5 ft. ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 1 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 1ft ft. and 5 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 5 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-145

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
15 ft _____ ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

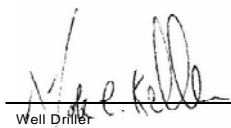
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name: _____



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-146

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
15 ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in.
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in.
 Slot/Gauge: 0.010 Length: 4 ft.
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-147

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) 15 ft ft. Date Started: 5/26/2021 Date Completed: 5/26/2021

10. CASING: [X] Threaded [] Welded Diam.: 1.25 in. Type: [] PVC [] Galvanized [X] Steel [] Other 0 in. to 11 ft. depth

11. SCREEN: Stainless Steel Type: Diam.: 1 in. Slot/Gauge: 0.010 Length: 4 ft. Set Between: 11 ft. and 15 ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface. _____ ft. after _____ hrs. Pumping _____ G.P.M. Pumping Test: [] Yes [X] No Yield: _____

14. WATER QUALITY Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No Installed from _____ ft. to _____ ft. Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No [X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction Type _____ Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X] Mfr. Name: _____ Model No.: _____ H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554 Address: (Print) Grandview Holdings, LLC Level A B C D [] [X] [] [] 205 Stone Gate Lane Summerville, SC 29486 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/28/2021 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-148

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
15 ft. ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone Work: _____ Home: _____

7. PERMIT NUMBER: **UST # 04785**

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/26/2021**
13 ft _____ ft. Date Completed: **5/26/2021**

10. CASING: Threaded Welded
Diam.: **1.25** in
Type: PVC Galvanized
 Steel Other
0 in. to **9** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-149**

11. SCREEN: **Stainless Steel** Diam.: **1** in
Type: _____ Length: **4** ft
Slot/Gauge: **0.010**
Set Between: **9** ft. and **13** ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **13** ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other
Depth: From **0** ft. to **13** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: **5/28/2021**
Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
18 ft _____ ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 4 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-150

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 4 ft ft. and 8 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 18 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 8 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
10 ft. _____ ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Other
 Steel Other
0 in. to 6 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-151A

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Slot/Gauge: 0.010 Length: 4 ft
Set Between: 6 ft ft. and 10 ft ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 10 ft ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 10 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-151B

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 15 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) 15 ft. Date Started: 5/26/2021 Date Completed: 5/26/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [X] Steel [] Other
0 in. to 11 ft. depth

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other
Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D [] [X] [] []
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
Signed: [Signature] Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: **04785 GP-152**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **15** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **5/26/2021**
15 ft. Date Completed: **5/26/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **11** ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **11** ft. and **15** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **15** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **5/28/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC

9. WELL DEPTH (completed)
Date Started: 5/26/2021
Date Completed: 5/26/2021

10. CASING: Threaded, Welded
Diam.: 1.25 in
Type: Steel
Height Above Surface, Weight, Drive Shoe?

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-153

11. SCREEN: Stainless Steel
Type, Slot/Gauge, Length, Set Between, Sieve Analysis

4. ABANDONMENT: Yes
Grouted Depth: from 0 ft. to 15 ft.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
Pumping Test, Yield

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

14. WATER QUALITY
Chemical Analysis, Bacterial Analysis

15. ARTIFICIAL FILTER (filter pack)
Installed from, Effective size, Uniformity Coefficient

16. WELL GROUTED? Yes
Neat Cement, Bentonite, Bentonite/Cement, Other

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION:
Type, Well Disinfected, Amount

18. PUMP: Date installed, Not installed
Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, TYPE

19. WELL DRILLER: Mark Keller, PG
Address, Level A, B, C, D, Telephone No., Fax No.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 5/28/2021
Well Driller

6. TYPE: Mud Rotary, Jetted, Bored, Dug, Air Rotary, Driven, Cable tool, Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-154

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
15 ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

 Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-155

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
15 ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ 04785 GP-156

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 15 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/26/2021
15 ft. _____ ft. Date Completed: 5/26/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 11 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 11 ft. and 15 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 15 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 5/28/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-157

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 14 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/27/2021
14 ft ft. Date Completed: 5/27/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 10 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 10 ft ft. and 14 ft ft. NOTE: MULTIPLE SCREENS
USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 14 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
my direction and this report is true to the best of my knowledge and belief.
Signed: Mark Keller Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 5/27/2021
18 ft ft. Date Completed: 5/27/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 4 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-158

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 4 ft ft. and 8 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 18 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 18 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed:  Date: 5/28/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name: _____



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
(last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) Date Started: **5/27/2021**
25 ft ft. Date Completed: **5/27/2021**

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: **04785 GP-160**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized Steel Other
0 in. to **21 ft** ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **25 ft** ft.

11. SCREEN: Type: **Stainless Steel** Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **21 ft** ft. and **25 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **25 ft** ft.

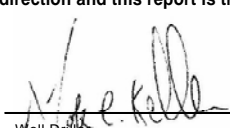
17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **5/28/2021**
 Well Driller

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

9. WELL DEPTH (completed) 20 ft
Date Started: 5/27/2021
Date Completed: 5/27/2021

10. CASING: Threaded, Steel
Diam.: 1.25 in
Type: Steel
Height Above Surface, Weight, Drive Shoe?

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-161

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft and 20 ft
Sieve Analysis: No

4. ABANDONMENT: Yes
Grouted Depth: from 0 ft. to 20 ft

12. STATIC WATER LEVEL ft. below land surface after 24 hours

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: No
Yield:

14. WATER QUALITY
Chemical Analysis: Yes
Bacterial Analysis: No

15. ARTIFICIAL FILTER (filter pack) No
Installed from ft. to ft.
Effective size, Uniformity Coefficient

16. WELL GROUTED? Yes
Neat Cement, Bentonite, Bentonite/Cement, Other
Depth: From 0 ft. to 20 ft

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type, Well Disinfected: Yes, Type, Amount

18. PUMP: Date installed, Not installed
Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, gpm
TYPE: Submersible, Jet (shallow), Turbine, Jet (deep), Reciprocating, Centrifugal

19. WELL DRILLER: Mark Keller, PG
Address: Grandview Holdings, LLC, 205 Stone Gate Lane, Summerville, SC 29486
Telephone No.: 843-797-7884, Fax No., CERT. NO.: 1554

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller, Well Driller Date: 5/28/2021

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-162

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 5/27/2021
20 ft ft. Date Completed: 5/27/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Other
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 5/28/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-163

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 20 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 5/27/2021
20 ft ft. Date Completed: 5/27/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [X] Steel [] Other
0 in. to 16 ft ft. depth

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane [] [X] [] []
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 5/28/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: Home:

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well Monitor Well Replacement

9. WELL DEPTH (completed) Date Started: 5/27/2021
15 ft ft. Date Completed: 5/27/2021

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-164

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 11 ft. depth
Height Above Below Surface Weight Drive Shoe?

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 15 ft. ft.

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 11 ft. and 15 ft. ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft. It.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 15 ft. ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed X
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 5/28/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-165

9. WELL DEPTH (completed) Date Started: 6/21/2021
20 ft ft. Date Completed: 6/21/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 16 ft ft. depth

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Includes entry: Hole abandoned with grout after sample collected.

11. SCREEN: Stainless Steel
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 6/25/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-166**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **25** ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) Date Started: **6/21/2021**
25 ft _____ ft. Date Completed: **6/21/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized Steel Other
0 in. to **21 ft** ft. depth
 _____ in. to _____ ft. depth
 Height Above Below Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
 Type: _____ Slot/Gauge: **0.010** Length: **4 ft**
 Set Between: **21 ft** ft. and **25 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

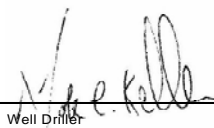
15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **25** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed:  Date: **6/25/2021**
 Well Driller: _____
 If D Level Driller, provide supervising driller's name: _____



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
 _____ **04785 GP-167**

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/21/2021
25 ft _____ ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Steel Other
0 in. to 21 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 21 ft _____ ft. and 25 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 6/25/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-168

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ ft. Date Started: 6/21/2021
25 ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 21 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Length: 4 ft
Slot/Gauge: 0.010
Set Between: 21 ft. and 25 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 6/25/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-169

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/21/2021
20 ft ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
 my direction and this report is true to the best of my knowledge and belief.
 Signed: Mark Keller Date: 6/25/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 _____ (last) _____ (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: _____
04785 GP-170

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/21/2021
20 ft _____ ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 16 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft _____ ft. and 20 ft _____ ft.
 Sieve Analysis Yes (please enclose) No
 NOTE: MULTIPLE SCREENS USE SECOND SHEET

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: _____ Date: 6/25/2021
 Wee Keller
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/21/2021
22 ft ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 18 ft ft. depth
in. to ft. depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-171D

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 18 ft ft. and 22 ft ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 22 ft ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 22 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed X
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 6/25/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
_____ 04785 GP-172

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/21/2021
20 ft. ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 16 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 16 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print)
Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____
Level A B C D

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:
Well Driller Date: 6/25/2021

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-173

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	• Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 6/21/2021
20 ft _____ ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 _____ in. to 16 _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 16 ft _____ ft. and 20 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

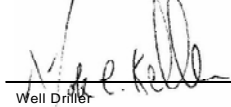
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 _____ ft. to 20 _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  _____ Date: 6/25/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
 (last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-174

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 6/21/2021
20 ft _____ ft. Date Completed: 6/21/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 _____ in. to 16 _____ ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
 Type: _____ Length: 4 ft
 Slot/Gauge: 0.010
 Set Between: 16 _____ ft. and 20 _____ ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 _____ ft. to 20 _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: 6/25/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-175D

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 25 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/22/2021
25 ft _____ ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized
 Steel Other
0 in. to 21 ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 21 ft _____ ft. and 25 ft _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 25 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 6/25/2021
Well Driller

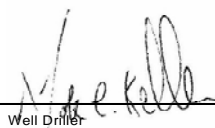
If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

<p>1. WELL OWNER INFORMATION: Name: <u>Bahuchar Mata, LLC</u> (last) (first) Address: <u>311 Oakmonte Circle</u> City: <u>Greenwood</u> State: <u>SC</u> Zip: <u>29649</u> Telephone: Work: _____ Home: _____</p>	<p>7. PERMIT NUMBER: <u>UST # 04785</u></p>																																																																														
<p>2. LOCATION OF WELL: COUNTY: <u>Greenwood</u> Name: <u>Quick Pantry # 19</u> Street Address: <u>1802 S. Main Street</u> City: <u>Greenwood</u> State: <u>SC</u> Zip: _____ Latitude: _____ Longitude: _____</p>	<p>8. USE: <input type="checkbox"/> Residential <input type="checkbox"/> Public Supply <input type="checkbox"/> Process <input type="checkbox"/> Irrigation <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Emergency <input checked="" type="checkbox"/> Test Well <input type="checkbox"/> MonitorWell <input type="checkbox"/> Replacement</p>																																																																														
<p>3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: <u>04785 GP-176D</u></p>	<p>9. WELL DEPTH (completed) _____ Date Started: <u>6/22/2021</u> <u>30 ft</u> _____ ft. Date Completed: <u>6/22/2021</u></p>																																																																														
<p>4. ABANDONMENT: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Grouted Depth: from <u>0</u> ft. to <u>30 ft</u> ft.</p>	<p>10. CASING: <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded Diam.: <u>1.25 in</u> Type: <input type="checkbox"/> PVC <input type="checkbox"/> Galvanized <input type="checkbox"/> Steel <input type="checkbox"/> Other <u>0 ft</u> in. to <u>26 ft</u> ft. depth _____ in. to _____ ft. depth</p>																																																																														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">Formation Description</th> <th style="width: 10%;">Thickness of Stratum</th> <th style="width: 10%;">Depth to Bottom of Stratum</th> </tr> </thead> <tbody> <tr> <td>Hole abandoned with grout after sample collected.</td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Formation Description	Thickness of Stratum	Depth to Bottom of Stratum	Hole abandoned with grout after sample collected.																																																																											<p>11. SCREEN: <u>Stainless Steel</u> Diam.: <u>1 in</u> Type: _____ Length: <u>4 ft</u> Slot/Gauge: <u>0.010</u> Set Between: <u>26 ft</u> ft. and <u>30 ft</u> ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET Sieve Analysis <input type="checkbox"/> Yes (please enclose) <input checked="" type="checkbox"/> No</p>
Formation Description	Thickness of Stratum	Depth to Bottom of Stratum																																																																													
Hole abandoned with grout after sample collected.																																																																															
<p>5. REMARKS:</p>	<p>12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours</p>																																																																														
<p>6. TYPE: <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Dug <input type="checkbox"/> Air Rotary <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Cable tool <input type="checkbox"/> Other</p>	<p>13. PUMPING LEVEL Below Land Surface. _____ ft. after _____ hrs. Pumping _____ G.P.M. Pumping Test: <input type="checkbox"/> Yes (please enclose) <input checked="" type="checkbox"/> No Yield: _____</p>																																																																														
<p>5. REMARKS:</p>	<p>14. WATER QUALITY Chemical Analysis <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Bacterial Analysis <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Please enclose lab results.</p>																																																																														
<p>5. REMARKS:</p>	<p>15. ARTIFICIAL FILTER (filter pack) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Installed from _____ ft. to _____ ft. Effective size _____ Uniformity Coefficient _____</p>																																																																														
<p>5. REMARKS:</p>	<p>16. WELL GROUTED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Bentonite/Cement <input type="checkbox"/> Other _____ Depth: From <u>0 ft</u> ft. to <u>30 ft</u> ft.</p>																																																																														
<p>5. REMARKS:</p>	<p>17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction Type _____ Well Disinfected <input type="checkbox"/> Yes Type: _____ Amount: _____</p>																																																																														
<p>5. REMARKS:</p>	<p>18. PUMP: Date installed: _____ Not installed <input checked="" type="checkbox"/> Mfr. Name: _____ Model No.: _____ H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm TYPE: <input type="checkbox"/> Submersible <input type="checkbox"/> Jet (shallow) <input type="checkbox"/> Turbine <input type="checkbox"/> Jet (deep) <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal</p>																																																																														
<p>5. REMARKS:</p>	<p>19. WELL DRILLER: <u>Mark Keller, PG</u> CERT. NO.: <u>1554</u> Address: (Print) _____ <u>Grandview Holdings, LLC</u> Level A B C D <u>205 Stone Gate Lane</u> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <u>Summerville, SC 29486</u> Telephone No.: <u>843-797-7884</u> Fax No.: _____</p>																																																																														
<p>5. REMARKS:</p>	<p>20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.</p> <p>Signed:  Date: <u>6/25/2021</u> Well Driller</p> <p>If D Level Driller, provide supervising driller's name: _____</p>																																																																														



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 GP-177D

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 35 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) _____ Date Started: 6/22/2021
35 ft _____ ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 31 ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 31 ft and 35 ft
 _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 35 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: _____ Date: 6/25/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone: Work: Home:

7. PERMIT NUMBER: UST # 04785
8. USE:
[] Residential [] Public Supply [] Process
[] Irrigation [] Air Conditioning [] Emergency
[X] Test Well [] MonitorWell [] Replacement

2. LOCATION OF WELL:
COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

9. WELL DEPTH (completed) Date Started: 6/22/2021
30 ft ft. Date Completed: 6/22/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1.25 in
Type: [] PVC [] Galvanized [] Steel [] Other
0 ft in. to 26 ft ft. depth
Height Above [] Below []
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? [] Yes [] No

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-178D

11. SCREEN:
Type: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 26 ft ft. and 30 ft ft.
NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis [] Yes (please enclose) [X] No

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 30 ft ft.

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours
13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: [] Yes (please enclose) [X] No
Yield: _____

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other
Depth: From 0 ft ft. to 30 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine
[] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane [] [X] [] []
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 6/25/2021
Well Driller

5. REMARKS:
6. TYPE: [] Mud Rotary [] Jetted [] Bored
[] Dug [] Air Rotary [X] Driven
[] Cable tool [] Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-179D-2**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **6** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **6/22/2021**
6 ft. _____ ft. Date Completed: **6/22/2021**

10. CASING: Threaded Welded
Diam.: **1.25 in**
Type: PVC Galvanized
 Steel Other
0 in. to **2** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft.
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
Type: _____ Length: **4 ft**
Slot/Gauge: **0.010**
Set Between: **2** ft. and **6** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
_____ ft. and _____ ft.
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

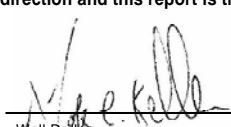
15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** ft. to **6** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) **Grandview Holdings, LLC** Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
Signed:  Date: **6/25/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/22/2021
35 ft ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 31 ft ft. depth

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-179D-3

11. SCREEN: Stainless Steel Diam.: 1 in
Slot/Gauge: 0.010 Length: 4 ft
Set Between: 31 ft ft. and 35 ft ft.
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 35 ft ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

12. STATIC WATER LEVEL ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
ft. after hrs. Pumping G.P.M
Pumping Test: Yes (please enclose) No
Yield:

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from ft. to ft.
Effective size Uniformity Coefficient

16. WELL GROUTED? Yes No
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0 ft. to 35 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type
Well Disinfected Yes Type: Amount:

18. PUMP: Date installed: Not installed
Mfr. Name: Model No.:
H.P. volts Length of drop pipe - ft. Capacity gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.:

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: [Signature] Date: 6/25/2021
Well Driller

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC _____
 _____ (last) _____ (first)
 Address: 311 Oakmonte Circle _____
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-180D

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 40 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

5. REMARKS:

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) _____ Date Started: 6/22/2021
40 ft _____ ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized Other
 Steel Other
0 in. to 36 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN:
 Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 36 ft ft. and 40 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

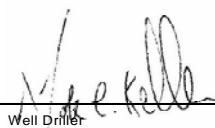
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 40 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  _____ Date: 6/25/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 GP-181D

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 35 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: 6/22/2021
35 ft. _____ ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: PVC Galvanized Steel Other
0 in. to 31 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: Stainless Steel Diam.: 1 in
Type: _____ Slot/Gauge: 0.010 Length: 4 ft
Set Between: 31 ft ft. and 35 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 35 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Mark Keller Date: 6/25/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:

8. USE:
Residential, Irrigation, Test Well, Public Supply, Air Conditioning, MonitorWell, Process, Emergency, Replacement

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-182D

9. WELL DEPTH (completed) 40 ft
Date Started: 6/22/2021
Date Completed: 6/22/2021

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 40 ft.

10. CASING: Threaded Welded
Diam.: 1.25 in
Type: Steel
Height Above Surface, Weight, Drive Shoe?

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

11. SCREEN: Stainless Steel
Type, Slot/Gauge, Set Between, Sieve Analysis

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

12. STATIC WATER LEVEL ft. below land surface after 24 hours

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

13. PUMPING LEVEL Below Land Surface.
Pumping Test, Yield

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

14. WATER QUALITY
Chemical Analysis, Bacterial Analysis

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

15. ARTIFICIAL FILTER (filter pack)
Installed from, Effective size, Uniformity Coefficient

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

16. WELL GROUTED? Neat Cement, Bentonite, Bentonite/Cement, Other

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: Type, Well Disinfected

5. REMARKS:

18. PUMP: Date installed, Mfr. Name, Model No., H.P., Length of drop pipe, Capacity, TYPE

6. TYPE: Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Other, Bored, Driven

19. WELL DRILLER: Mark Keller, PG
Address, Level, Telephone No., Fax No.

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
Signed: Mark Keller, Date: 6/25/2021



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 GP-183D**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **45 ft.** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) _____ Date Started: **6/22/2021**
45 ft ft. Date Completed: **6/22/2021**

10. CASING: Threaded Welded
 Diam.: **1.25 in**
 Type: PVC Galvanized
 Steel Other
0 in. to **41** ft. depth
 _____ in. to _____ ft. depth
 Height Above Below Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: **Stainless Steel** Diam.: **1 in**
 Type: _____ Length: **4 ft**
 Slot/Gauge: **0.010**
 Set Between: **41** ft. and **45 ft.** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **45 ft.** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* Date: **6/25/2021**
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 GP-184D

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 50 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/22/2021
50 ft. ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 46 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 46 ft. and 50 ft. NOTE: MULTIPLE SCREENS
 _____ ft. and _____ ft. USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

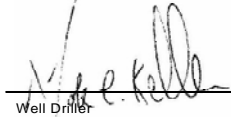
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 50 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 6/25/2021

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 GP-185D

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 55 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 6/22/2021
55 ft ft. Date Completed: 6/22/2021

10. CASING: Threaded Welded
 Diam.: 1.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 51 ft ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: Type: Stainless Steel Diam.: 1 in
 Slot/Gauge: 0.010 Length: 4 ft
 Set Between: 51 ft ft. and 55 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

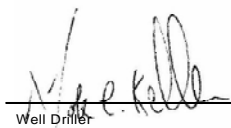
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 55 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 6/25/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) Date Started: 4/27/2021
35 ft _____ ft. Date Completed: 4/27/2021

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: 04785 SB-1

10. CASING: Threaded Welded
 Diam.: 2.25 in
 Type: PVC Galvanized
 Steel Other
0 in. to 35 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 35 ft ft.

11. SCREEN:
 Type: _____ Diam.: _____
 Slot/Gauge: _____ Length: _____
 Set Between: _____ ft. and _____ ft. **NOTE: MULTIPLE SCREENS USE SECOND SHEET**
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
See attached Geologist Logs for lithology.		
Hole abandoned with grout after sample collected.		
Dual Tube System used for Soil Sample collection.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 35 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: _____ Date: 4/30/2021
 Well Driller:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 6/23/2021
30 ft _____ ft. Date Completed: 6/23/2021

10. CASING: Threaded Welded
 Diam.: 2.25 in
 Type: PVC Galvanized
 Steel Other
0 ft _____ in. to 30 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 SB-4

11. SCREEN:
 Type: _____ Diam.: _____
 Slot/Gauge: _____ Length: _____
 Set Between: _____ ft. and _____ ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 30 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
See attached Geologist Logs for lithology.		
Hole abandoned with grout after sample collected.		
Dual Tube System used for Soil Sample collection.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft _____ ft. to 30 ft _____ ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

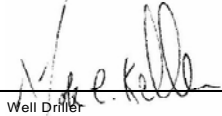
18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed:  _____ Date: 6/25/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649

2. LOCATION OF WELL:
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip:
Latitude: Longitude:

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER:
04785 TW-1

4. ABANDONMENT: [X] Yes [] No
Grouted Depth: from 0 ft. to 20 ft.

Table with 3 columns: Formation Description, Thickness of Stratum, Depth to Bottom of Stratum. Row 1: Hole abandoned with grout after sample collected.

Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: [] Mud Rotary [] Jetted [] Bored [] Dug [] Air Rotary [X] Driven [] Cable tool [] Other

7. PERMIT NUMBER: UST # 04785

8. USE: [] Residential [] Public Supply [] Process [] Irrigation [] Air Conditioning [] Emergency [X] Test Well [] MonitorWell [] Replacement

9. WELL DEPTH (completed) Date Started: 4/27/2021
20 ft ft. Date Completed: 4/27/2021

10. CASING: [X] Threaded [] Welded
Diam.: 1 in
Type: [X] PVC [] Galvanized [] Steel [] Other
0 in. to 10 ft. depth

11. SCREEN: PVC
Type: PVC Diam.: 1 in
Slot/Gauge: 0.010 Length: 10 ft
Set Between: 10 ft ft. and 20 ft ft.
Sieve Analysis [] Yes [X] No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: [] Yes [X] No
Yield: _____

14. WATER QUALITY
Chemical Analysis [X] Yes [] No Bacterial Analysis [] Yes [X] No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) [] Yes [X] No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? [X] Yes [] No
[X] Neat Cement [] Bentonite [] Bentonite/Cement [] Other
Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected [] Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed [X]
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: [] Submersible [] Jet (shallow) [] Turbine [] Jet (deep) [] Reciprocating [] Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane [] [X] [] []
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: [Signature] Date: 4/30/2021
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record Bureau of Water 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **Bahuchar Mata, LLC**
(last) (first)
Address: **311 Oakmonte Circle**
City: **Greenwood** State: **SC** Zip: **29649**
Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
Name: **Quick Pantry # 19**
Street Address: **1802 S. Main Street**
City: **Greenwood** State: **SC** Zip: _____
Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: **04785 TW-2**

4. ABANDONMENT: Yes No
Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: **UST # 04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **4/27/2021**
20 ft _____ ft. Date Completed: **4/27/2021**

10. CASING: Threaded Welded
Diam.: **1 in**
Type: PVC Galvanized Steel Other
0 in. to **10 ft** ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

11. SCREEN: **PVC** Diam.: **1 in**
Type: _____ Length: **10 ft**
Slot/Gauge: **0.010**
Set Between: **10 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From **0** ft. to **20** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Mark Keller, PG** CERT. NO.: **1554**
Address: (Print) **Grandview Holdings, LLC**
205 Stone Gate Lane Level A B C D
Summerville, SC 29486
Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Mark Keller* Date: **4/30/2021**
Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 TW-5

9. WELL DEPTH (completed) Date Started: 4/27/2021
20 ft _____ ft. Date Completed: 4/27/2021

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

10. CASING: Threaded Welded
 Diam.: 1 in
 Type: PVC Galvanized
 Steel Other
0 in. to 10 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

11. SCREEN: PVC Diam.: 1 in
 Slot/Gauge: 0.010 Length: 10 ft
 Set Between: 10 ft. and 20 ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 4/30/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: Bahuchar Mata, LLC
(last) (first)
Address: 311 Oakmonte Circle
City: Greenwood State: SC Zip: 29649
Telephone. Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785
8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry # 19
Street Address: 1802 S. Main Street
City: Greenwood State: SC Zip: _____
Latitude: _____ Longitude: _____

9. WELL DEPTH (completed) Date Started: 4/28/2021
20 ft _____ ft. Date Completed: 4/28/2021
10. CASING: Threaded Welded
Diam.: 1 in
Type: PVC Galvanized
 Steel Other
0 in. to 10 ft ft. depth
_____ in. to _____ ft. depth
Height Above Below
Surface _____ ft
Weight _____ lb./ft.
Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 TW-6

11. SCREEN:
Type: PVC Diam.: 1 in
Slot/Gauge: 0.010 Length: 10 ft
Set Between: 10 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours
13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs. Pumping _____ G.P.M.
Pumping Test: Yes (please enclose) No
Yield: _____

14. WATER QUALITY
Chemical Analysis Yes No Bacterial Analysis Yes No
Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
Installed from _____ ft. to _____ ft.
Effective size _____ Uniformity Coefficient _____

16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
Type _____
Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
Mfr. Name: _____ Model No.: _____
H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
(Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: _____ Date: 4/30/2021
Well Driller: Mark Keller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: _____ PUBLIC SYSTEM NUMBER: 04785 TW-8

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: 4/28/2021
20 ft _____ ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1 in
 Type: PVC Galvanized Steel Other
0 in. to 10 ft. depth
 _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft.
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: PVC Diam.: 1 in
 Type: _____ Length: 10 ft
 Slot/Gauge: 0.010
 Set Between: 10 ft and 20 ft NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

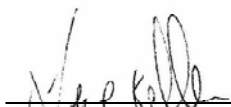
16. WELL GROUTED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print) _____
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: 4/30/2021
 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **Bahuchar Mata, LLC**
 (last) (first)
 Address: **311 Oakmonte Circle**
 City: **Greenwood** State: **SC** Zip: **29649**
 Telephone. Work: _____ Home: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry # 19**
 Street Address: **1802 S. Main Street**
 City: **Greenwood** State: **SC** Zip: _____
 Latitude: _____ Longitude: _____

3. PUBLIC SYSTEM NAME: PUBLIC SYSTEM NUMBER: **04785 TW-9**

4. ABANDONMENT: Yes No
 Grouted Depth: from **0** ft. to **20** ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

5. REMARKS:

6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other

7. PERMIT NUMBER: UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well MonitorWell Replacement

9. WELL DEPTH (completed) Date Started: **4/28/2021**
20 ft _____ ft. Date Completed: **4/28/2021**

10. CASING: Threaded Welded
 Diam.: **1 in**
 Type: PVC Galvanized Steel Other
0 in. to **10 ft** ft. depth _____ in. to _____ ft. depth
 Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

11. SCREEN: PVC
 Type: _____ Diam.: **1 in**
 Slot/Gauge: **0.010** Length: **10 ft**
 Set Between: **10 ft** ft. and **20 ft** ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 Sieve Analysis Yes (please enclose) No

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M.
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

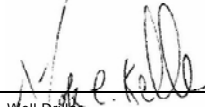
16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From **0** ft. to **20** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____ Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: **1554**
 Address: (Print) **Grandview Holdings, LLC** Level **A B C D**
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: **843-797-7884** Fax No.: _____

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:  Date: **4/30/2021**

 Well Driller

If D Level Driller, provide supervising driller's name:



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: Bahuchar Mata, LLC
(last) (first)
 Address: 311 Oakmonte Circle
 City: Greenwood State: SC Zip: 29649
 Telephone: Work: _____ Home: _____

7. PERMIT NUMBER: UST # 04785

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry # 19
 Street Address: 1802 S. Main Street
 City: Greenwood State: SC Zip: _____
 Latitude: _____ Longitude: _____

8. USE:

<input type="checkbox"/> Residential	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Process
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Emergency
<input checked="" type="checkbox"/> Test Well	<input type="checkbox"/> MonitorWell	<input type="checkbox"/> Replacement

9. WELL DEPTH (completed) Date Started: 4/28/2021
20 ft _____ ft. Date Completed: 4/28/2021

10. CASING: Threaded Welded
 Diam.: 1 in
 Type: PVC Galvanized
 Steel Other
0 in. to 10 ft ft. depth
 _____ in. to _____ ft. depth

Height Above Below
 Surface _____ ft
 Weight _____ lb./ft.
 Drive Shoe? Yes No

3. PUBLIC SYSTEM NAME: _____ **PUBLIC SYSTEM NUMBER:** 04785 TW-10

11. SCREEN:
 Type: PVC Diam.: 1 in
 Slot/Gauge: 0.010 Length: 10 ft
 Set Between: 10 ft ft. and 20 ft ft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
 _____ ft. and _____ ft.
 Sieve Analysis Yes (please enclose) No

4. ABANDONMENT: Yes No
 Grouted Depth: from 0 ft. to 20 ft ft.

Formation Description	Thickness of Stratum	Depth to Bottom of Stratum
Hole abandoned with grout after sample collected.		

12. STATIC WATER LEVEL _____ ft. below land surface after 24 hours

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs. Pumping _____ G.P.M
 Pumping Test: Yes (please enclose) No
 Yield: _____

14. WATER QUALITY
 Chemical Analysis Yes No Bacterial Analysis Yes No
 Please enclose lab results.

15. ARTIFICIAL FILTER (filter pack) Yes No
 Installed from _____ ft. to _____ ft.
 Effective size _____ Uniformity Coefficient _____

16. WELL GROUDED? Yes No
 Neat Cement Bentonite Bentonite/Cement Other _____
 Depth: From 0 ft. to 20 ft ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction
 Type _____
 Well Disinfected Yes Type: _____ Amount: _____

18. PUMP: Date installed: _____ Not installed
 Mfr. Name: _____ Model No.: _____
 H.P. _____ volts _____ Length of drop pipe - ft. Capacity _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Mark Keller, PG CERT. NO.: 1554
 Address: (Print)
Grandview Holdings, LLC Level A B C D
205 Stone Gate Lane
Summerville, SC 29486
 Telephone No.: 843-797-7884 Fax No.: _____

• Indicate Water Bearing Zones
 (Use a 2nd sheet if needed)

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:

Signed: Mark Keller Date: 4/30/2021
 Well Driller

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Other

If D Level Driller, provide supervising driller's name:

APPENDIX E

Well Logs



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:

Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: Greenwood

Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-2

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish brown (10R 4/6), clayey, silt	1.3	5
Moderate reddish brown (10R 4/6), clayey, silt	2.6	10
Moderate yellowish brown (10YR 5/4), clayey silt. Moderate petroleum odor noted. Soil sample submitted for laboratory analysis.	32.4	15
Dark yellowish brown (10YR 4/2), slightly micaceous, clayey, fine sandy silt	39.2	20

5. REMARKS:
Bentonite Seal 7 - 9 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
 _____ ft. Date Started: **8/16/2021**
20.00 ft. Date Completed: **8/18/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
 _____ **2.0** in. to _____ **10** ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe: _____

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **10.00** ft. and **20.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL **15.05** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: **9.0** ft. to **20.0** ft.
 Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUDED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **7.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/18/21**

If D Level Driller, provide supervising driller's name.



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
 20.00 ft. Date Started: **8/16/2021**
 Date Completed: **8/18/2021**

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **10** ft. depth
 in. to ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-3

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **10.00** ft. and **20.00** ft.
 ft. and ft.
 Sieve Analysis: Y/N

4. ABANDONMENT:
 Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish brown (10R 4/6), slightly micaceous, fine sandy, clayey silt	0.0	5
Moderate reddish brown (10R 4/6), slightly micaceous, fine sandy, clayey silt	0.3	10
Moderate reddish orange (10R 6/6), fine sandy, clayey silt. Soil sample submitted for laboratory analysis.	0.2	15
Moderate yellowish brown (10YR 5/4), clayey, fine sandy silt	0.6	20

12. STATIC WATER LEVEL **15.96** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: **9.0** ft. to **20.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **7.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: Type: Amount:

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: ft.
 Capacity: gpm
 TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Robyn Barkley

5. REMARKS:
Bentonite Seal 7 - 9 ft BGS

Signed: _____
 Date: **8/18/21**
 If D Level Driller, provide supervising driller's name.

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-4

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish brown (10R 4/6), fine sandy, clayey, silt	0.6	5
Moderate reddish brown (10R 4/6), fine sandy, clayey, silt	15.6	10
Moderate reddish orange (10R 6/6), clayey silt. Strong petroleum odor noted. Soil sample submitted for laboratory analysis.	30.5	15
Light olive gray (5Y 5/2), fine sandy, clayey silt. Strong petroleum odor noted.	46.2	20

5. REMARKS:
Bentonite Seal 7 - 9 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed): **20.00** ft. Date Started: **8/16/2021**
 Date Completed: **8/17/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **10** ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: _____ lb./ft.
 Drive Shoe: _____

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **10.00** ft. and **20.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL 15.19 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: **9.0** ft. to **20.0** ft.
 Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **7.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley
 Date: **8/17/21**

If D Level Driller, provide supervising driller's name.



**Water Well Record
Bureau of Water**
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **SCDHEC**

(last) (first)
Address: **2600 Bull Street**

City: **Columbia** State: **SC** Zip:

Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:

Residential	Public Supply	Process
Irrigation	Air Conditioning	Emergency
Test Well	Monitor Well	Replacement

9. WELL DEPTH (completed) 20.00 ft. Date Started: 8/16/2021 Date Completed: 8/17/2021

2. LOCATION OF WELL: COUNTY: **Greenwood**

Name: **Quick Pantry 19**
Address: **1802 S. Main Street**
City: **Greenwood**

10. CASING: Threaded Welded

Diameter: **2"**

Type: **PVC**

2.0 in. to **10** ft. depth

in. to ft. depth

Height: Below

Surface: ft. Weight: lb./ft.

Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-5

11. SCREEN:

Type: **PVC** Diameter: **2"**

Slot/Gauge: **0.010"** Length: **10'**

Set Between: **10.00** ft. and **20.00** ft.

ft. and ft.

Sieve Analysis: Y/N

4. ABANDONMENT:

Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish orange (10R 6/6), fine sandy, clayey silt	0.0	5
Moderate reddish orange (10R 6/6), fine sandy, clayey silt	5.3	10
Moderate reddish orange (10R 6/6), clayey silt. Soil sample submitted for laboratory analysis.	19.5	15
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	12.4	20

12. STATIC WATER LEVEL 14.76 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.

ft. after hrs Pumping GPM

Pumping Test: Yield:

14. WATER QUALITY

Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand

Installed from: **9.0** ft. to **20.0** ft.

Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?

Neat Cement Bentonite Bentonite/Cement Other

Depth: From **0.0** ft. to **7.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction

Type: Well Disinfected: Type: Amount:

18. PUMP: Date installed: Mfr. Name: Model no.: H.P.: Volts: Length of pipe: ft. Capacity: gpm TYPE: Submersible Jet (shallow) Turbine Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
Address: Petra-Tech Environmental Level: **A** B C D
2435 East North St, Ste 1108-202
Greenville, SC 29615
Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Robyn Barkley

5. REMARKS: **Bentonite Seal 7 - 9 ft BGS**

Signed: _____
Date: **8/17/21**
If D Level Driller, provide supervising driller's name.

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool **Auger** Other



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
20.00 ft. Date Started: **8/16/2021**
 Date Completed: **8/17/2021**

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
 _____ in. to _____ ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-6

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **10.00** ft. and **20.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish orange (10R 6/6), fine sandy, clayey silt	0.3	5
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	0.1	10
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand. Soil sample submitted for laboratory analysis.	0.5	15
Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand	0.3	20

12. STATIC WATER LEVEL **15.03** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: **9.0** ft. to **20.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **7.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed:
 Date: **8/17/21**

5. REMARKS:
Bentonite Seal 7 - 9 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

If D Level Driller, provide supervising driller's name.



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: **MWA #** **UST #** 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
18.00 ft. Date Started: **8/2/2021**
 Date Completed: **8/6/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **8** ft. depth
 in. to ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **8.00** ft. and **18.00** ft.
 ft. and ft.
 Sieve Analysis: Y/N

3. PUBLIC SYSTEM NAME: 04785 - MW-7

4. ABANDONMENT:
 Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish orange (10R 6/6), fine sandy, clayey silt	0.6	5
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	2.6	10
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand	15.8	15
Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand	n/m	18

12. STATIC WATER LEVEL **11.14** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test:
 Yield:

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: **7.0** ft. to **18.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **5.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type:
 Well Disinfected: Type: Amount:

18. PUMP: Date installed:
 Mfr. Name: Model no.:
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE:
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/6/21**

5. REMARKS:
Bentonite Seal 5 - 7 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

If D Level Driller, provide supervising driller's name.



Water Well Record

Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:Name: **SCDHEC**
 Address: **2600 Bull Street**
(last) (first)
City: **Columbia** State: **SC** Zip:

Phone:

2. LOCATION OF WELL:COUNTY: **Greenwood**Name: **Quick Pantry 19**Address: **1802 S. Main Street**City: **Greenwood****3. PUBLIC SYSTEM NAME:**

04785 - MW-8

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish orange (10R 6/6), fine sandy, clayey silt	1.8	5
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	25.0	10
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand	30.8	15

5. REMARKS:**Bentonite Seal 2 - 4 ft BGS****6. TYPE:**

Mud Rotary	Jetted	Bored
Dug	Air Rotary	Driven
Cable tool	Auger	Other

7. PERMIT NUMBER:**MWA #****UST #**

04785

8. USE:

Residential	Public Supply	Process
Irrigation	Air Conditioning	Emergency
Test Well	Monitor Well	Replacement

9. WELL DEPTH (completed)**15.00** ft.Date Started: **8/2/2021**Date Completed: **8/6/2021****10. CASING:**Type: **Threaded** WeldedDiameter: **2"**Type: **PVC****2.0**in. to **5** ft. depth

in. to _____ ft. depth

Height: Below

Surface: _____ ft. Weight: _____ lb./ft.

Drive Shoe: _____

11. SCREEN:Type: **PVC** Diameter: **2"**Slot/Gauge: **0.010"** Length: **10'**Set Between: **5.00** ft. and **15.00** ft.

ft. and _____ ft.

Sieve Analysis: Y/N

12. STATIC WATER LEVEL 10.82 ft. below land surface after 24 hours.**13. PUMPING LEVEL** Below Land Surface.

_____ ft. after _____ hrs Pumping GPM

Pumping Test: _____

Yield: _____

14. WATER QUALITY

Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack)**Sand**Installed from: **4.0** ft. to **15.0** ft.Effective Size: **#2** Uniformity Coefficient: _____**16. WELL GROUTED?****Neat Cement**

Bentonite _____ Bentonite/Cement _____ Other _____

Depth: From **0.0** ft. to **2.0** ft.**17. NEAREST SOURCE OF POSSIBLE CONTAMINATION:** ft. direction

Type: _____

Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP:

Date installed: _____

Mfr. Name: _____

Model no.: _____

H.P.: _____

Volts: _____ Length of pipe: _____ ft.

Capacity: _____ gpm

TYPE:

Submersible _____ Jet (shallow) _____ Turbine _____

Jet (deep) _____ Reciprocating _____ Centrifugal _____

19. WELL DRILLER:

Robyn Barkley

CERT NO.: 934

Address: Petra-Tech Environmental

Level: **A** B C D

2435 East North St, Ste 1108-202

Greenville, SC 29615

Telephone: 864.631.2490

Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under

my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*Date: **8/6/21**

If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION: Name: SCDHEC Address: (last) 2600 Bull Street (first) City: Columbia State: SC Zip: Phone:			7. PERMIT NUMBER: MWA # UST # 04785 8. USE: Residential Public Supply Process Irrigation Air Conditioning Emergency Test Well Monitor Well Replacement																																																		
2. LOCATION OF WELL: COUNTY: Greenwood Name: Quick Pantry 19 Address: 1802 S. Main Street City: Greenwood			9. WELL DEPTH (completed) 17.50 ft. Date Started: 8/2/2021 Date Completed: 8/6/2021																																																		
3. PUBLIC SYSTEM NAME: 04785 - MW-9			10. CASING: Threaded Welded Diameter: 2" Type: PVC _____ 2.0 in. to _____ 7.5 ft. depth _____ in. to _____ ft. depth Height: Below Surface: _____ ft. Weight: lb./ft. Drive Shoe:																																																		
4. ABANDONMENT: Grouted Depth: from _____ to _____ ft.			11. SCREEN: Type: PVC Diameter: 2" Slot/Gauge: 0.010" Length: 10' Set Between: 7.50 ft. and 17.50 ft. _____ ft. and _____ ft. Sieve Analysis: Y/N																																																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Formation Description</th> <th style="width: 10%;">PID (ppm)</th> <th style="width: 20%;">Depth to Bottom of Stratum</th> </tr> </thead> <tbody> <tr> <td>Moderate reddish orange (10R 6/6), fine sandy, clayey silt</td> <td style="text-align: center;">1.0</td> <td style="text-align: center;">5</td> </tr> <tr> <td>Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.</td> <td style="text-align: center;">5.3</td> <td style="text-align: center;">10</td> </tr> <tr> <td>Dark yellowish brown (10YR 4/2), clayey, silty, fine sand</td> <td style="text-align: center;">19.4</td> <td style="text-align: center;">15</td> </tr> <tr> <td>Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand</td> <td style="text-align: center;">n/m</td> <td style="text-align: center;">17.5</td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			Formation Description	PID (ppm)	Depth to Bottom of Stratum	Moderate reddish orange (10R 6/6), fine sandy, clayey silt	1.0	5	Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	5.3	10	Dark yellowish brown (10YR 4/2), clayey, silty, fine sand	19.4	15	Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand	n/m	17.5																																		12. STATIC WATER LEVEL 10.76 ft. below land surface after 24 hours. 13. PUMPING LEVEL Below Land Surface. _____ ft. after _____ hrs Pumping GPM Pumping Test: _____ Yield: _____		
Formation Description	PID (ppm)	Depth to Bottom of Stratum																																																			
Moderate reddish orange (10R 6/6), fine sandy, clayey silt	1.0	5																																																			
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	5.3	10																																																			
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand	19.4	15																																																			
Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand	n/m	17.5																																																			
5. REMARKS: Bentonite Seal 4.5 - 6.5 ft BGS			14. WATER QUALITY Chemical Analysis: Bacterial Analysis: 15. ARTIFICIAL FILTER (filter pack) Sand Installed from: 6.5 ft. to 17.5 ft. Effective Size: #2 Uniformity Coefficient:																																																		
6. TYPE: Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Auger Other			16. WELL GROUTED? Neat Cement Bentonite Bentonite/Cement Other Depth: From 0.0 ft. to 4.5 ft.																																																		
19. WELL DRILLER: Robyn Barkley CERT NO.: 934 Address: Petra-Tech Environmental Level: A B C D 2435 East North St, Ste 1108-202 Greenville, SC 29615 Telephone: 864.631.2490 Fax: 888.838.9034			17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction Type: _____ Well Disinfected: _____ Type: _____ Amount: _____																																																		
20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief. Signed: <i>Robyn Barkley</i> Date: 8/6/21 If D Level Driller, provide supervising driller's name.																																																					



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:

Name: **SCDHEC**

Address: **2600 Bull Street**
(last) (first)

City: **Columbia** State: **SC** Zip:

Phone:

2. LOCATION OF WELL: COUNTY: **Greenwood**

Name: **Quick Pantry 19**

Address: **1802 S. Main Street**

City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-10

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark yellowish orange (10YR 6/6), slightly micaceous, slightly clayey, silty, fine sand. Soil sample submitted for laboratory analysis.	0.2	5
Moderate brown (5YR 3/4), clayey, silt	1.0	10
Dark yellowish brown (10YR 4/2), clayey silt	n/m	12

5. REMARKS:
Bentonite Seal 0.5 - 1 ft BGS

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Auger Other

7. PERMIT NUMBER: **MWA #** **UST # 04785**

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed): **12.00** ft.
Date Started: **8/2/2021**
Date Completed: **8/4/2021**

10. CASING: **Threaded** Welded
Diameter: **2"**
Type: **PVC**
2.0 in. to **2** ft. depth
in. to _____ ft. depth
Height: Below
Surface: _____ ft. Weight: _____ lb./ft.
Drive Shoe:

11. SCREEN:
Type: **PVC** Diameter: **2"**
Slot/Gauge: **0.010"** Length: **10'**
Set Between: **2.00** ft. and **12.00** ft.
ft. and _____ ft.
Sieve Analysis: Y/N

12. STATIC WATER LEVEL **3.35** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
ft. after _____ hrs Pumping GPM
Pumping Test: _____
Yield: _____

14. WATER QUALITY
Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) **Sand**
Installed from: **1.0** ft. to **12.0** ft.
Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
Depth: From **0.0** ft. to **0.5** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type: _____
Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP:
Date installed: _____
Mfr. Name: _____ Model no.: _____
H.P.: _____ Volts: _____ Length of pipe: ft.
Capacity: _____ gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: **Robyn Barkley** CERT NO.: **934**
Address: **Petra-Tech Environmental** Level: **A B C D**
2435 East North St, Ste 1108-202
Greenville, SC 29615
Telephone: **864.631.2490** Fax: **888.838.9034**

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under
my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
Date: **8/4/21**

If D Level Driller, provide supervising driller's name.



Water Well Record
Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:

Name: **SCDHEC**
Address: (last) **2600 Bull Street** (first)
City: **Columbia** State: **SC** Zip: _____
Phone: _____

2. LOCATION OF WELL: COUNTY: Greenwood
Name: **Quick Pantry 19**
Address: **1802 S. Main Street**
City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-11

4. ABANDONMENT:
Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Grayish brown (5Y 3/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	0.2	5
Moderate brown (5YR 3/4), clayey silt	0.1	10
Moderate brown (5YR 3/4), fine sandy, clayey silt	n/m	14

5. REMARKS:
Bentonite Seal 1.5 - 3 ft BGS

6. TYPE:
Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool **Auger** Other

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed):
14.00 ft. Date Started: **8/2/2021**
Date Completed: **8/4/2021**

10. CASING: **Threaded** Welded
Diameter: **2"**
Type: **PVC**
2.0 in. to **4** ft. depth
Height: Below _____ ft. depth
Surface: _____ ft. Weight: _____ lb./ft.
Drive Shoe: _____

11. SCREEN:
Type: **PVC** Diameter: **2"**
Slot/Gauge: **0.010"** Length: **10'**
Set Between: **4.00** ft. and **14.00** ft.
Sieve Analysis: Y/N

12. STATIC WATER LEVEL 6.15 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
ft. after _____ hrs Pumping GPM
Pumping Test: _____
Yield: _____

14. WATER QUALITY
Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand
Installed from: **3.0** ft. to **14.0** ft.
Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
Depth: From **0.0** ft. to **1.5** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type: _____
Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
Mr. Name: _____ Model no.: _____
H.P.: _____ Volts: _____ Length of pipe: ft. _____
Capacity: _____ gpm
TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
Address: Petra-Tech Environmental Level: **A** B C D
2435 East North St, Ste 1108-202
Greenville, SC 29615
Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley
Date: 8/4/21
If D Level Driller, provide supervising driller's name.



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**

(last) (first)
 Address: **2600 Bull Street**

City: **Columbia** State: **SC** Zip:

Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:

Residential	Public Supply	Process
Irrigation	Air Conditioning	Emergency
Test Well	Monitor Well	Replacement

9. WELL DEPTH (completed)

17.00 ft. Date Started: **8/9/2021**
 Date Completed: **8/12/2021**

2. LOCATION OF WELL: COUNTY: **Greenwood**

Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

10. CASING: **Threaded** Welded

Diameter: **2"**
 Type: **PVC**
2.0 in. to **7** ft. depth
 in. to ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-12

4. ABANDONMENT:

Grouted Depth: from to ft.

11. SCREEN:

Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **7.00** ft. and **17.00** ft.
 ft. and ft.
 Sieve Analysis: Y/N

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate brown (5YR 3/4), fine sandy, clayey silt. Soil sample submitted for laboratory analysis.	1.1	5
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	5.8	10
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	16.7	15
Moderate brown (5YR 3/4), clayey, fine sandy silt	n/m	17

12. STATIC WATER LEVEL **9.76** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.

ft. after hrs Pumping GPM

Pumping Test: _____
 Yield: _____

14. WATER QUALITY

Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) **Sand**

Installed from: **6.0** ft. to **17.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?

Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **4.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction

Type: _____
 Well Disinfected: Type: Amount:

18. PUMP: Date installed: _____

Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: ft.
 Capacity: _____ gpm

TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley
 Date: **8/12/21**

If D Level Driller, provide supervising driller's name.

5. REMARKS:
Bentonite Seal 4 - 6 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
 15.00 ft. Date Started: 8/9/2021
 Date Completed: 8/12/2021

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: Quick Pantry 19
 Address: 1802 S. Main Street
 City: Greenwood

10. CASING: Threaded Welded
 Diameter: 2"
 Type: PVC
 2.0 in. to 5 ft. depth
 in. to ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-13

11. SCREEN:
 Type: PVC Diameter: 2"
 Slot/Gauge: 0.010" Length: 10"
 Set Between: 5.00 ft. and 15.00 ft.
 ft. and ft.
 Sieve Analysis: Y/N

4. ABANDONMENT:
 Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate brown (5YR 3/4), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	1.1	5
Dusky yellowish brown (10YR 2/2), clayey, silty, medium to fine sand	9.6	10
Dusky yellowish brown (10YR 2/2), clayey, silty, medium to fine sand	3.6	15

12. STATIC WATER LEVEL 8.13 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test: Yield:

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: 4.0 ft. to 15.0 ft.
 Effective Size: #2 Uniformity Coefficient:

16. WELL GROUTED? Neat Cement
 Bentonite Bentonite/Cement Other
 Depth: From 0.0 ft. to 2.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: Well Disinfected: Type: Amount:

18. PUMP: Date installed: Mfr. Name: Model no.:
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley CERT NO.: 934
 Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS: Bentonite Seal 2 - 5 ft BGS

Signed: *Robyn Barkley*
 Date: 8/12/21

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Auger Other

If D Level Driller, provide supervising driller's name.



Water Well Record
Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: SCDHEC
Address: 2600 Bull Street
City: Columbia State: SC Zip:
Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE: Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well Monitor Well Replacement

9. WELL DEPTH (completed)
15.00 ft. Date Started: 8/2/2021
Date Completed: 8/6/2021

2. LOCATION OF WELL: COUNTY: Greenwood
Name: Quick Pantry 19
Address: 1802 S. Main Street
City: Greenwood

10. CASING: Threaded Welded
Diameter: 2"
Type: PVC
2.0 in. to 5 ft. depth
Height: Below
Surface: ft. Weight: lb./ft.
Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-14

11. SCREEN:
Type: PVC Diameter: 2"
Slot/Gauge: 0.010" Length: 10
Set Between: 5.00 ft. and 15.00 ft.
Sieve Analysis: Y/N

4. ABANDONMENT:
Grouted Depth: from to ft.

Table with 3 columns: Formation Description, PID (ppm), Depth to Bottom of Stratum. Rows include: Moderate red (5R 4/6), clayey silt; Moderate yellowish brown (10YR 5/4), fine sandy silt; Moderate brown (5YR 3/4), fine sandy, clayey silt.

12. STATIC WATER LEVEL 8.22 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
Pumping Test:
Yield:

14. WATER QUALITY
Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
Installed from: 4.0 ft. to 15.0 ft.
Effective Size: #2 Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0.0 ft. to 2.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type:
Well Disinfected: Type: Amount:

18. PUMP: Date installed:
Mfr. Name: Model no.:
H.P.: Volts: Length of pipe: ft.
Capacity: gpm
TYPE: Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley CERT NO.: 934
Address: Petra-Tech Environmental Level: A B C D
2435 East North St, Ste 1108-202
Greenville, SC 29615
Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS: Bentonite Seal 2 - 4 ft BGS

Signed: Robyn Barkley
Date: 8/6/21

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Auger Other

If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-15

4. ABANDONMENT:
 Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate red (5R 4/6), clayey silt. Soil sample submitted for laboratory analysis.	0.0	5
Dusky brown (5YR 2/2), clayey silt	0.0	10
Moderate brown (5YR 3/4), clayey, silty, medium to fine sand	0.0	15

5. REMARKS:
Bentonite Seal 2 - 4 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
 15.00 ft. Date Started: 8/2/2021
 Date Completed: 8/6/2021

10. CASING: Threaded Welded
 Diameter: 2" PVC
 Type: 2.0 in. to 5 ft. depth
 Height: Below in. to ft. depth
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

11. SCREEN:
 Type: PVC Diameter: 2"
 Slot/Gauge: 0.010" Length: 10'
 Set Between: 5.00 ft. and 15.00 ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL 7.51 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test: Yield:

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: 4.0 ft. to 15.0 ft.
 Effective Size: #2 Uniformity Coefficient:

16. WELL GROUTED?
 Neat Cement Bentonite Bentonite/Cement Other
 Depth: From 0.0 ft. to 2.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: Well Disinfected: Type: Amount:

18. PUMP: Date installed:
 Mfr. Name: Model no.:
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley CERT NO.: 934
 Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: 8/6/21
 If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip: _____
 Phone: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-16

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate red (5R 4/6), clayey silt. Soil sample submitted for laboratory analysis.	0.2	5
Dusky brown (5YR 2/2), clayey silt	1.2	10
Moderate brown (5YR 3/4), clayey, silty, medium to fine sand	0.6	15

5. REMARKS:
Bentonite Seal 2 - 4 ft BGS

6. TYPE:
 Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

7. PERMIT NUMBER: **MWA #** **UST #** 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
15.00 ft. Date Started: **8/2/2021**
 Date Completed: **8/6/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **5** ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: _____ lb./ft.
 Drive Shoe: _____

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **5.00** ft. and **15.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL **7.42** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: **4.0** ft. to **15.0** ft.
 Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **2.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: ft.
 Capacity: _____ gpm
 TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/6/21**
 If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-17

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Grayish brown (5Y 3/2), fine sandy, clayey silt. Soil sample submitted for laboratory analysis.	0.6	5
Grayish brown (5Y 3/2), clayey, silty, fine sand	0.9	10
Dark yellowish brown (5Y 3/2), clayey, silty, medium to fine sand	1.6	13

5. REMARKS:
Bentonite Seal 1 - 2 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Auger Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed):
13.00 ft. Date Started: **8/9/2021**
 Date Completed: **8/13/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
 _____ **2.0** in. to _____ **3** ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe:

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **3.00** ft. and **13.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL 6.23 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: **2.0** ft. to **13.0** ft.
 Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **1.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/13/21**

If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-18

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand. Soil sample submitted for laboratory analysis.	0.6	5
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	2.8	10
Dark yellowish brown (10YR 4/2), moderately micaceous, clayey, silty, medium to fine sand	n/m	14

5. REMARKS:
Bentonite Seal 1.5 - 3 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed) 14.00 ft. Date Started: **8/9/2021**
 Date Completed: **8/13/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **4** ft. depth
 Height: Below _____ ft. depth
 Surface: _____ ft. Weight: _____ lb./ft.
 Drive Shoe:

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **4.00** ft. and **14.00** ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL **7.42** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: **3.0** ft. to **14.0** ft.
 Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **1.5** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: ft.
 Capacity: _____ gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/13/21**
 If D Level Driller, provide supervising driller's name.



Water Well Record

Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # _____ UST # **04785**
8. USE:
 Residential _____ Public Supply _____ Process _____
 Irrigation _____ Air Conditioning _____ Emergency _____
 Test Well _____ Monitor Well _____ Replacement _____
9. WELL DEPTH (completed) **15.00** ft. Date Started: **8/2/2021**
 Date Completed: **8/4/2021**

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

10. CASING: Threaded Welded
 Diameter: 2"
 Type: PVC
2.0 in. to 5 ft. depth
 in. to _____ ft. depth
 Height: Below _____
 Surface: _____ ft. Weight: _____ lb./ft.
 Drive Shoe: _____

3. PUBLIC SYSTEM NAME: 04785 - MW-19

11. SCREEN:
 Type: PVC Diameter: 2"
 Slot/Gauge: 0.010" Length: 10'
 Set Between: 5.00 ft. and 15.00 ft.
 ft. and _____ ft.
 Sieve Analysis: Y/N

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark reddish brown (10R 3/4), clayey, silty, fine sand. Soil sample submitted for laboratory analysis.	0.0	5
Dark yellowish brown (10YR 4/2) to dusky yellowish brown (10YR 2/2), slightly micaceous, clayey, silty, medium to fine sand	0.0	10
Dark yellowish brown (10YR 4/2), moderately micaceous, clayey, silty, medium to fine sand	0.1	15

12. STATIC WATER LEVEL **8.51** ft. below land surface after 24 hours.
13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: 4.0 ft. to 15.0 ft.
 Effective Size: #2 Uniformity Coefficient: _____

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From 0.0 ft. to 2.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: _____
 Submersible _____ Jet (shallow) _____ Turbine _____
 Jet (deep) _____ Reciprocating _____ Centrifugal _____

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
 Signed: *Robyn Barkley*
 Date: 8/4/21
 If D Level Driller, provide supervising driller's name.

5. REMARKS:
 Bentonite Seal 2 - 4 ft BGS

6. TYPE: Mud Rotary _____ Jetted _____ Bored _____
 Dug _____ Air Rotary _____ Driven _____
 Cable tool _____ Auger _____ Other _____



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed) 13.00 ft. Date Started: 8/9/2021
 Date Completed: 8/13/2021

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

10. CASING: Threaded Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **3** ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe:

3. PUBLIC SYSTEM NAME: 04785 - MW-20

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **3.00** ft. and **13.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand. Soil sample submitted for laboratory analysis.	0.2	5
Moderate brown (5YR 3/4), clayey, silty, fine sand	0.0	10
Dark yellowish brown (10YR 4/2), moderately micaceous, clayey, silty, medium to fine sand	0.6	13

12. STATIC WATER LEVEL 6.42 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: **2.0** ft. to **13.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **1.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

5. REMARKS:
Bentonite Seal 1 - 2 ft BGS

Signed: Robyn Barkley
 Date: 8/13/21
 If D Level Driller, provide supervising driller's name.

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: **2600 Bull Street** (last) (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-21

4. ABANDONMENT:		
Grouted Depth:	from _____ to _____ ft.	
Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish brown (10R 4/6), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	0.0	5
Moderate brown (5YR 3/4), clayey, fine sandy silt	0.0	10
Grayish brown (5Y 3/2), clayey, silty, medium to fine sand	0.0	15

5. REMARKS:
Bentonite Seal 2 - 4 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Auger Other

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed) Date Started: **8/2/2021**
15.00 ft. Date Completed: **8/6/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **5** ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe:

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **5.00** ft. and **15.00** ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL 8.74 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: **4.0** ft. to **15.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **2.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: Type: Amount:

18. PUMP: Date installed: _____
 Mfr. Name: Model no.: _____
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Robyn Barkley

Signed: _____
 Date: **8/6/21**

If D Level Driller, provide supervising driller's name.



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # **04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
 15.00 ft. Date Started: **8/9/2021**
 Date Completed: **8/11/2021**

10. CASING: Threaded Welded
 Diameter: **2"**
 Type: **PVC**
 2.0 in. to 5 ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-22

4. ABANDONMENT:
 Grouted Depth: from to ft.

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **5.00** ft. and **15.00** ft.
 Sieve Analysis: Y/N

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark yellowish brown (10YR 4/2), slightly micaceous, clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	0.0	5
Dark yellowish brown (10YR 4/2), clayey, silty, fine sand	0.0	10
Dusky yellowish brown (10YR 2/2), slightly micaceous, fine sandy, clayey silt	0.0	15

12. STATIC WATER LEVEL 8.04 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test: Yield:

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: 4.0 ft. to 15.0 ft.
 Effective Size: #2 Uniformity Coefficient:

16. WELL GROUTED?
 Neat Cement Bentonite Bentonite/Cement Other
 Depth: From 0.0 ft. to 2.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: Well Disinfected: Type: Amount:

18. PUMP: Date installed:
 Mfr. Name: Model no.:
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley CERT NO.: 934
 Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley
 Date: 8/11/21
 If D Level Driller, provide supervising driller's name.

5. REMARKS:
Bentonite Seal 2 - 4 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Auger Other



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 (last) (first)
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

2. LOCATION OF WELL: COUNTY: Greenwood
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-23

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Grayish brown (5Y 3/2), slightly micaceous, clayey, silty, medium to fine sand. Soil sample submitted for laboratory analysis.	0.0	5
Dark yellowish brown (10YR 4/2), moderately micaceous, clayey, silty, medium to fine sand	0.5	10
Dark yellowish brown (10YR 4/2), slightly to moderately micaceous, clayey, silty, medium to fine sand	0.1	15

5. REMARKS:
Bentonite Seal 2 - 4 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Auger Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed)
15.00 ft. Date Started: **8/9/2021**
 Date Completed: **8/11/2021**

10. CASING: Threaded Welded
 Diameter: 2"
 Type: PVC
2.0 in. to 5 ft. depth
 in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe:

11. SCREEN:
 Type: PVC Diameter: 2"
 Slot/Gauge: 0.010" Length: 10'
 Set Between: 5.00 ft. and 15.00 ft.
 ft. and _____ ft.
 Sieve Analysis: Y/N

12. STATIC WATER LEVEL 9.26 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

14. WATER QUALITY
 Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand
 Installed from: 4.0 ft. to 15.0 ft.
 Effective Size: #2 Uniformity Coefficient: _____

16. WELL GROUTED? Neat Cement
 Depth: From 0.0 ft. to 2.0 ft.
 Bentonite Bentonite/Cement Other

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm
 TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley
 Date: 8/11/21

If D Level Driller, provide supervising driller's name.



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**

(last) (first)
 Address: **2600 Bull Street**

City: **Columbia** State: **SC** Zip:

Phone:

2. LOCATION OF WELL: COUNTY: Greenwood

Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - MW-24

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark yellowish orange (10YR 6/6), clayey, silty fine sand. Soil sample submitted for laboratory analysis.	0.3	5
Dark yellowish brown (10YR 4/2), moderately micaceous, silty, coarse to fine sand	0.6	10
Dusky yellowish brown (10YR 2/2), slightly micaceous, slightly clayey, silty, medium to fine sand	0.2	15

5. REMARKS:
Bentonite Seal 2 - 4 ft BGS

6. TYPE:

Mud Rotary	Jetted	Bored
Dug	Air Rotary	Driven
Cable tool	Auger	Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:

Residential	Public Supply	Process
Irrigation	Air Conditioning	Emergency
Test Well	Monitor Well	Replacement

9. WELL DEPTH (completed) 15.00 ft. Date Started: 8/9/2021 Date Completed: 8/13/2021

10. CASING: Threaded Welded

Diameter: 2" Type: PVC

2.0 in. to 5 ft. depth

Height: Below Surface: _____ ft. Weight: _____ lb./ft.

Drive Shoe: _____

11. SCREEN:

Type: PVC Diameter: 2" Slot/Gauge: 0.010" Length: 10' Set Between: 5.00 ft. and 15.00 ft.

Sieve Analysis: Y/N

12. STATIC WATER LEVEL 9.43 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.

ft. after _____ hrs Pumping GPM

Pumping Test: _____ Yield: _____

14. WATER QUALITY

Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand

Installed from: 4.0 ft. to 15.0 ft. Effective Size: #2 Uniformity Coefficient: _____

16. WELL GROUTED?

Neat Cement Bentonite Bentonite/Cement Other

Depth: From 0.0 ft. to 2.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction

Type: _____ Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____

Mfr. Name: _____ Model no.: _____

H.P.: _____ Volts: _____ Length of pipe: _____ ft.

Capacity: _____ gpm

TYPE: Submersible Jet (shallow) Turbine Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley CERT NO.: 934

Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615

Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley

Date: 8/13/21

If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**

(last) (first)
 Address: **2600 Bull Street**

City: **Columbia** State: **SC** Zip: _____

Phone: _____

7. PERMIT NUMBER: MWA # _____ UST # **04785**

8. USE:

Residential	Public Supply	Process
Irrigation	Air Conditioning	Emergency
Test Well	Monitor Well	Replacement

9. WELL DEPTH (completed)

16.00 ft. Date Started: **8/2/2021**
 Date Completed: **8/4/2021**

10. CASING: **Threaded** Welded

Diameter: **2"**
 Type: **PVC**
2.0 in. to **6** ft. depth
 in. to _____ ft. depth

Height: Below
 Surface: _____ ft. Weight: _____ lb./ft.
 Drive Shoe: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**

Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

11. SCREEN:

Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **6.00** ft. and **16.00** ft.
 ft. and _____ ft.
 Sieve Analysis: Y/N

3. PUBLIC SYSTEM NAME: 04785 - MW-25

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

12. STATIC WATER LEVEL **8.62** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.

ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	0.0	5
Dark yellowish brown (10YR 4/2), slightly micaceous, clayey, silty, fine sand	0.6	10
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	1.1	15
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	0.5	16

14. WATER QUALITY

Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) Sand

Installed from: **5.0** ft. to **16.0** ft.
 Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?

Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **3.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction

Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____

Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: _____ ft.
 Capacity: _____ gpm

TYPE: _____
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.:: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

5. REMARKS:
Bentonite Seal 3 - 5 ft BGS

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/4/21**

If D Level Driller, provide supervising driller's name.

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other



Water Well Record
Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:

Name: SCDHEC
Address: 2600 Bull Street
City: Columbia State: SC Zip:
Phone:

2. LOCATION OF WELL:

COUNTY: Greenwood

Name: Quick Pantry 19
Address: 1802 S. Main Street
City: Greenwood

3. PUBLIC SYSTEM NAME:

04785 - DW-1

4. ABANDONMENT:

Grouted Depth: from to ft.

Table with 3 columns: Formation Description, PID (ppm), Depth to Bottom of Stratum. Rows include various soil types like 'Moderate red (5R 4/6), fine sandy, clayey silt'.

5. REMARKS:

Bentonite Seal 36 - 39 ft BGS

6. TYPE:

Mud Rotary, Dug, Cable tool, Jetted, Air Rotary, Auger, Bored, Driven, Other

7. PERMIT NUMBER:

MWA # UST # 04785

8. USE:

Residential, Irrigation, Test Well, Public Supply, Air Conditioning, Monitor Well, Process, Emergency, Replacement

9. WELL DEPTH (completed)

45.00 ft. Date Started: 8/9/2021 Date Completed: 8/12/2021

10. CASING:

Threaded, Welded, Diameter: 2", Type: PVC, 2.0 in. to 40 ft. depth, 6.0 in. to 30.0 ft. depth, Height: Below, Surface: ft., Weight: lb./ft., Drive Shoe:

11. SCREEN:

Type: PVC, Diameter: 2", Slot/Gauge: 0.010", Length: 5', Set Between: 40.00 ft. and 45.00 ft., Sieve Analysis: Y/N

12. STATIC WATER LEVEL 16.06 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.

Pumping Test: ft. after hrs Pumping GPM, Yield:

14. WATER QUALITY

Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack)

Sand, Installed from: 39.0 ft. to 45.0 ft., Effective Size: #2, Uniformity Coefficient:

16. WELL GROUTED?

Neat Cement, Bentonite, Bentonite/Cement, Other, Depth: From 0.0 ft. to 36.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION:

Type: Well Disinfected: Type: Amount:

18. PUMP:

Date installed: Mfr. Name: Model no.: H.P.: Volts: Length of pipe: ft., Capacity: gpm, TYPE: Submersible, Jet (shallow), Turbine, Jet (deep), Reciprocating, Centrifugal

19. WELL DRILLER:

Robyn Barkley, CERT NO.: 934, Address: Petra-Tech Environmental, Level: A B C D, 2435 East North St, Ste 1108-202, Greenville, SC 29615, Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION:

This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley

Date: 8/12/21

If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:Name: **SCDHEC**Address: (last) **2600 Bull Street** (first)City: **Columbia** State: **SC** Zip:

Phone:

2. LOCATION OF WELL:COUNTY: **Greenwood**Name: **Quick Pantry 19**Address: **1802 S. Main Street**City: **Greenwood****3. PUBLIC SYSTEM NAME:**

04785 - DW-2

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate brown (5YR 3/4), fine sandy, clayey silt	1.1	5
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	5.8	10
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	16.7	15
Moderate brown (5YR 3/4), clayey, fine sandy silt	6.3	20
Dark yellowish brown (10YR 4/2), slightly micaceous, clayey, silty fine sand	1.2	25
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	0.3	30
Dark yellowish brown (10YR 4/2), clayey, fine sandy silt	n/m	35
Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand	n/m	40

5. REMARKS:**Bentonite Seal 32 - 34 ft BGS****6. TYPE:****Mud Rotary**

Jetted

Bored

Dug

Air Rotary

Driven

Cable tool

Auger

Other

7. PERMIT NUMBER:**MWA #****UST #**

04785

8. USE:

Residential

Public Supply

Process

Irrigation

Air Conditioning

Emergency

Test Well

Monitor Well

Replacement

9. WELL DEPTH (completed)**40.00** ft.Date Started: **8/9/2021**Date Completed: **8/12/2021****10. CASING:****Threaded**

Welded

Diameter: **2"**Type: **PVC****2.0**in. to **35** ft. depth**6.0**in. to **30.0** ft. depth

Height: Below

Surface: _____ ft.

Weight: _____ lb./ft.

Drive Shoe: _____

11. SCREEN:Type: **PVC**Diameter: **2"**Slot/Gauge: **0.010"**Length: **5'**Set Between: **35.00**ft. and **40.00** ft.

ft. and _____ ft.

Sieve Analysis: Y/N

12. STATIC WATER LEVEL 10.47 ft. below land surface after 24 hours.**13. PUMPING LEVEL Below Land Surface.**

_____ ft. after _____ hrs Pumping GPM

Pumping Test: _____

Yield: _____

14. WATER QUALITY

Chemical Analysis: _____

Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack)**Sand**Installed from: **34.0** ft. to **40.0** ft.Effective Size: **#2** Uniformity Coefficient: _____**16. WELL GROUTED?****Neat Cement**

Bentonite

Bentonite/Cement

Other

Depth: From **0.0** ft. to **32.0** ft.**17. NEAREST SOURCE OF POSSIBLE CONTAMINATION:** _____ ft. direction

Type: _____

Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP:

Date installed: _____

Mfr. Name: _____

Model no.: _____

H.P.: _____

Volts: _____ Length of pipe: _____ ft.

Capacity: _____ gpm

TYPE:

Submersible

Jet (shallow)

Turbine

Jet (deep)

Reciprocating

Centrifugal

19. WELL DRILLER:

Robyn Barkley

CERT NO.: 934

Address: _____

Petra-Tech Environmental

Level: **A** B C D

2435 East North St, Ste 1108-202

Greenville, SC 29615

Telephone: 864.631.2490

Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under

my direction and this report is true to the best of my knowledge and belief.

Signed: _____

Date: _____

8/12/21

If D Level Driller, provide supervising driller's name.



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) **2600 Bull Street** (first)
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # **04785**

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
40.00 ft. Date Started: **8/9/2021**
 Date Completed: **8/12/2021**

10. CASING: **Threaded** Welded
 Diameter: **2"**
 Type: **PVC**
2.0 in. to **35** ft. depth
6.0 in. to **30.0** ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

11. SCREEN:
 Type: **PVC** Diameter: **2"**
 Slot/Gauge: **0.010"** Length: **5'**
 Set Between: **35.00** ft. and **40.00** ft.
 Sieve Analysis: Y/N

3. PUBLIC SYSTEM NAME: 04785 - DW-3

4. ABANDONMENT:
 Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate brown (5YR 3/4), fine sandy, clayey silt. Soil sample submitted for laboratory analysis.	1.1	5
Moderate yellowish brown (10YR 5/4), fine sandy, clayey silt	9.6	10
Moderate yellowish brown (10YR 5/4), clayey, silty, fine sand	3.6	15
Moderate yellowish brown (10YR 5/4), clayey, fine sandy silt	0.2	20
Dark yellowish brown (10YR 5/4), clayey, silty, medium to fine sand	0.1	25
Dark yellowish brown (10YR 5/4), clayey, fine sandy silt	0.2	30
Dusky yellowish brown (10YR 2/2), clayey, fine sandy silt	n/m	35
Dusky yellowish brown (10YR 2/2), clayey, fine sandy silt	n/m	40

12. STATIC WATER LEVEL **8.25** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test:
 Yield:

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: **34.0** ft. to **40.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **32.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type:
 Well Disinfected: Type: Amount:

18. PUMP: Date installed:
 Mfr. Name: Model no.:
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE:
 Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/12/21**

5. REMARKS:
Bentonite Seal 32 - 34 ft BGS

6. TYPE: **Mud Rotary** Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

If D Level Driller, provide supervising driller's name.



Water Well Record
Bureau of Water
 2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**

Address: (last) **2600 Bull Street** (first)

City: **Columbia** State: **SC** Zip:

Phone:

2. LOCATION OF WELL: COUNTY: **Greenwood**

Name: **Quick Pantry 19**

Address: **1802 S. Main Street**

City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - DW-4

4. ABANDONMENT:

Grouted Depth: from _____ to _____ ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate brown (5YR 3/4), clayey, fine sandy silt. Soil sample submitted for laboratory analysis.	0.0	5
Dusky yellowish brown (10YR 2/2), clayey, silty, medium to fine sand	0.5	10
Dusky yellowish brown (10YR 2/2), clayey, silty, medium to fine sand	0.1	15
Dark yellowish brown (10YR 4/2), clayey, silty, medium to fine sand	0.0	20
Dusky yellowish brown (10YR 2/2) to light olive gray (5Y 5/2), slightly micaceous, clayey, silty, medium to fine sand	n/m	25

5. REMARKS: **Bentonite Seal 17 - 19 ft BGS**

6. TYPE: **Mud Rotary** Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other

7. PERMIT NUMBER: MWA # _____ UST # 04785

8. USE:

Residential	Public Supply	Process
Irrigation	Air Conditioning	Emergency
Test Well	Monitor Well	Replacement

9. WELL DEPTH (completed): 25.00 ft. Date Started: **8/11/2021**
 Date Completed: **8/13/2021**

10. CASING: **Threaded** Welded

Diameter: **2"**

Type: **PVC**

Height: Below

Surface: _____ ft. Weight: _____ lb./ft.

Drive Shoe: _____

_____ in. to **20** ft. depth
 _____ in. to **20.0** ft. depth

11. SCREEN:

Type: **PVC** Diameter: **2"**

Slot/Gauge: **0.010"** Length: **5'**

Set Between: **20.00** ft. and **25.00** ft.
 _____ ft. and _____ ft.

Sieve Analysis: Y/N

12. STATIC WATER LEVEL **8.89** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.

_____ ft. after _____ hrs Pumping GPM

Pumping Test: _____
 Yield: _____

14. WATER QUALITY

Chemical Analysis: _____ Bacterial Analysis: _____

15. ARTIFICIAL FILTER (filter pack) **Sand**

Installed from: **19.0** ft. to **25.0** ft.

Effective Size: **#2** Uniformity Coefficient: _____

16. WELL GROUTED?

Neat Cement Bentonite Bentonite/Cement Other

Depth: From **0.0** ft. to **17.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. direction

Type: _____

Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____

Mfr. Name: _____ Model no.: _____

H.P.: _____ Volts: _____ Length of pipe: _____ ft.

Capacity: _____ gpm

TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**

Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615

Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*

Date: **8/13/21**

If D Level Driller, provide supervising driller's name.



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: **2600 Bull Street**
 City: **Columbia** State: **SC** Zip:
 Phone:

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well **Monitor Well** Replacement

9. WELL DEPTH (completed)
20.00 ft. Date Started: **8/16/2021**
 Date Completed: **8/17/2021**

10. CASING: **Threaded** Welded
 Diameter: **4"**
 Type: **PVC**
2.0 in. to **10** ft. depth
 in. to ft. depth
 Height: Below
 Surface: ft. Weight: lb./ft.
 Drive Shoe:

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - RW-1

11. SCREEN:
 Type: **PVC** Diameter: **4"**
 Slot/Gauge: **0.010"** Length: **10'**
 Set Between: **10.00** ft. and **20.00** ft.
 ft. and ft.
 Sieve Analysis: Y/N

4. ABANDONMENT:
 Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate red (5R 4/6), fine sandy, clayey silt	1.6	5
Moderate reddish orange (10R 6/6), clayey silt	3.8	10
Moderate reddish orange (10R 6/6), silty, clay. Soil sample submitted for laboratory analysis.	21.5	15
Dark yellowish brown (10YR 4/2), moderately micaceous, fine sandy, clayey silt	16.8	20

12. STATIC WATER LEVEL **15.79** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 ft. after hrs Pumping GPM
 Pumping Test: Yield:

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: **9.0** ft. to **20.0** ft.
 Effective Size: **#2** Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From **0.0** ft. to **7.0** ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: Well Disinfected: Type: Amount:

18. PUMP: Date installed: Mfr. Name: Model no.:
 H.P.: Volts: Length of pipe: ft.
 Capacity: gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: **A** B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: *Robyn Barkley*
 Date: **8/17/21**

5. REMARKS:
Bentonite Seal 7 - 9 ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool **Auger** Other



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
 Name: **SCDHEC**
 Address: (last) _____ (first) _____
2600 Bull Street
 City: **Columbia** State: **SC** Zip: _____
 Phone: _____

7. PERMIT NUMBER: **MWA #** **UST #** 04785

8. USE:
 Residential Public Supply Process
 Irrigation Air Conditioning Emergency
 Test Well Monitor Well Replacement

9. WELL DEPTH (completed) Date Started: **8/16/2021**
 _____ ft. Date Completed: **8/17/2021**
20.00 ft.

10. CASING: Threaded Welded
 Diameter: 4"
 Type: PVC
 2.0 in. to 10 ft. depth
 _____ in. to _____ ft. depth
 Height: Below
 Surface: _____ ft. Weight: lb./ft.
 Drive Shoe: _____

2. LOCATION OF WELL: COUNTY: **Greenwood**
 Name: **Quick Pantry 19**
 Address: **1802 S. Main Street**
 City: **Greenwood**

11. SCREEN:
 Type: PVC Diameter: 4"
 Slot/Gauge: 0.010" Length: 10'
 Set Between: 10.00 ft. and 20.00 ft.
 _____ ft. and _____ ft.
 Sieve Analysis: Y/N

3. PUBLIC SYSTEM NAME: 04785 - RW-1

12. STATIC WATER LEVEL **15.04** ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
 _____ ft. after _____ hrs Pumping GPM
 Pumping Test: _____
 Yield: _____

4. ABANDONMENT:
 Grouted Depth: from _____ to _____ ft.

14. WATER QUALITY
 Chemical Analysis: Bacterial Analysis:

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish orange (10R 6/6), silty clay	0.3	5
Moderate reddish orange (10R 6/6), slightly micaceous, clayey, fine sandy silt	1.6	10
Moderate reddish orange (10R 6/6) clayey, fine sandy silt. Very strong petroleum odor noted. Soil sample submitted for laboratory analysis.	52	15
Dark yellowish brown (10YR 4/2), slightly micaceous, clayey, fine sandy silt	21	20

15. ARTIFICIAL FILTER (filter pack) **Sand**
 Installed from: 9.0 ft. to 20.0 ft.
 Effective Size: #2 Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
 Depth: From 0.0 ft. to 7.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
 Type: _____
 Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
 Mfr. Name: _____ Model no.: _____
 H.P.: _____ Volts: _____ Length of pipe: ft.
 Capacity: gpm
 TYPE: Submersible Jet (shallow) Turbine
 Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
 Address: Petra-Tech Environmental Level: A B C D
 2435 East North St, Ste 1108-202
 Greenville, SC 29615
 Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

 Signed: _____
 Date: 8/17/21

5. REMARKS:
Bentonite Seal **7** - **9** ft BGS

6. TYPE: Mud Rotary Jetted Bored
 Dug Air Rotary Driven
 Cable tool Auger Other

If D Level Driller, provide supervising driller's name.



**Water Well Record
Bureau of Water**

2600 Bull Street, Columbia, SC 29201-1708; (803) 898-4300

1. WELL OWNER INFORMATION:
Name: **SCDHEC**

(last) (first)
Address: **2600 Bull Street**

City: **Columbia** State: **SC** Zip:

Phone:

2. LOCATION OF WELL: COUNTY: Greenwood

Name: **Quick Pantry 19**
Address: **1802 S. Main Street**
City: **Greenwood**

3. PUBLIC SYSTEM NAME: 04785 - RW-1

4. ABANDONMENT:
Grouted Depth: from to ft.

Formation Description	PID (ppm)	Depth to Bottom of Stratum
Moderate reddish orange (10R 6/6), silty clay	0.5	5
Moderate reddish brown (10R 4/6), fine sandy, clayey silt	6.5	10
Moderate reddish brown (10R 4/6), fine sandy, clayey silt. Soil sample submitted for laboratory analysis.	9.3	15
Dark yellowish brown (10YR 4/2), moderately micaceous, clayey, fine sandy silt	13.9	20

5. REMARKS:
Bentonite Seal 7 - 9 ft BGS

6. TYPE: Mud Rotary Jetted Bored
Dug Air Rotary Driven
Cable tool Auger Other

7. PERMIT NUMBER: MWA # UST # 04785

8. USE:
Residential Public Supply Process
Irrigation Air Conditioning Emergency
Test Well Monitor Well Replacement

9. WELL DEPTH (completed) 20.00 ft. Date Started: **8/16/2021**
Date Completed: **8/17/2021**

10. CASING: Threaded Welded
Diameter: 4"
Type: PVC
2.0 in. to 10 ft. depth
_____ in. to _____ ft. depth
Height: Below
Surface: _____ ft. Weight: lb./ft.
Drive Shoe:

11. SCREEN:
Type: PVC Diameter: 4"
Slot/Gauge: 0.010" Length: 10'
Set Between: 10.00 ft. and 20.00 ft.
_____ ft. and _____ ft.
Sieve Analysis: Y/N

12. STATIC WATER LEVEL 15.46 ft. below land surface after 24 hours.

13. PUMPING LEVEL Below Land Surface.
_____ ft. after _____ hrs Pumping GPM
Pumping Test: _____
Yield:

14. WATER QUALITY
Chemical Analysis: Bacterial Analysis:

15. ARTIFICIAL FILTER (filter pack) Sand
Installed from: 9.0 ft. to 20.0 ft.
Effective Size: #2 Uniformity Coefficient:

16. WELL GROUTED?
Neat Cement Bentonite Bentonite/Cement Other
Depth: From 0.0 ft. to 7.0 ft.

17. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft. direction
Type: _____
Well Disinfected: _____ Type: _____ Amount: _____

18. PUMP: Date installed: _____
Mfr. Name: _____ Model no.: _____
H.P.: _____ Volts: _____ Length of pipe: _____ ft.
Capacity: _____ gpm
TYPE: _____
Submersible Jet (shallow) Turbine
Jet (deep) Reciprocating Centrifugal

19. WELL DRILLER: Robyn Barkley **CERT NO.: 934**
Address: Petra-Tech Environmental Level: A B C D
2435 East North St, Ste 1108-202
Greenville, SC 29615
Telephone: 864.631.2490 Fax: 888.838.9034

20. WATER WELL DRILLER'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Signed: Robyn Barkley
Date: 8/17/21

If D Level Driller, provide supervising driller's name.

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 2413677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 2

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 15.25 ft.

Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 20 ft.

Screen Interval 10 ft. to 20 ft.

Length of water column (LWC=TWD-DGW) 4.95 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 6.4 gals.

Drilling Fluids recovered N/A gals.

Time (military)	<u>0845</u>	<u>0849</u>	<u>0854</u>	<u>0859</u>	<u>0906</u>	<u>0912</u>	
pH (s.u.)*	<u>7.38</u>	<u>7.11</u>	<u>6.97</u>	<u>6.91</u>	<u>6.92</u>	<u>6.89</u>	
Specific Conductivity (mmhos/cm)*	<u>217</u>	<u>201</u>	<u>198</u>	<u>196</u>	<u>195</u>	<u>195</u>	
Water Temperature (C)*	<u>24.61</u>	<u>24.48</u>	<u>24.39</u>	<u>24.35</u>	<u>24.33</u>	<u>24.31</u>	
Turbidity (NTU) *	<u>1100</u>	<u>197</u>	<u>62</u>	<u>37</u>	<u>16.8</u>	<u>10</u>	
Odor	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	
Cumulative Gallons of Water Removed	<u>1.0</u> gals	<u>1.8</u> gals	<u>2.8</u> gals	<u>3.8</u> gals	<u>5.2</u> gals	<u>6.4</u> gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Slow recovery ~.2gpm

Driller Signature: _____

Robyn Barkley

Date: _____

8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 3

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 15.96 ft.

Screen Length/Slot Size 10 ft./0.01 in.

Total Well Depth (TWD) 20 ft.

Screen Interval 10 ft. to 20 ft.

Length of water column (LWC=TWD-DGW) 4.04 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 4.0 gals.

Drilling Fluids recovered N/A gals.

Time (military)	<u>0920</u>	<u>0922</u>	<u>0926</u>	<u>0930</u>	<u>0935</u>	<u>0940</u>	<u>0945</u>
pH (s.u.)*	<u>6.70</u>	<u>6.81</u>	<u>6.47</u>	<u>6.39</u>	<u>6.36</u>	<u>6.33</u>	<u>6.32</u>
Specific Conductivity (mmhos/cm)*	<u>283</u>	<u>261</u>	<u>255</u>	<u>249</u>	<u>245</u>	<u>245</u>	<u>246</u>
Water Temperature (C)*	<u>25.68</u>	<u>25.12</u>	<u>25.37</u>	<u>24.89</u>	<u>24.86</u>	<u>24.80</u>	<u>24.82</u>
Turbidity (NTU) *	<u>11000</u>	<u>102</u>	<u>305</u>	<u>961</u>	<u>82</u>	<u>16.1</u>	<u>10</u>
Odor	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>
Cumulative Gallons of Water Removed	<u>1</u> gals	<u>1.7</u> gals	<u>2.1</u> gals	<u>2.5</u> gals	<u>3.0</u> gals	<u>3.5</u> gals	<u>4.0</u> gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Slow Recovery ~.1 gpm

Driller Signature: _____

Robyn Barkley

Date: _____

8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter	Conductivity meter	Temperature meter	Turbidity meter
serial no. 2233570	serial no. 2413677	serial no. 24113677	serial no. AG36883
4.01 su <u>X</u>	23 us _____		0 NTU <u>X</u>
7.00 su <u>X</u>	84 us <u>X</u>		1 NTU _____
10.00 su <u>X</u>	447 us <u>X</u>		10 NTU _____
	1413 us <u>X</u>		100 NTU <u>X</u>

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 4 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 15.19 ft. Screen Length/Slot Size 10 ft./ 0.01 in.
 Total Well Depth (TWD) 20 ft. Screen Interval 10 ft. to 20 ft.
 Length of water column (LWC=TWD-DGW) 4.81 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 7 gals. Drilling Fluids recovered N/A gals.

Time (military)	1005	1010	1015	1020	1025	1030	1035
pH (s.u.)*	6.68	6.35	6.21	6.15	6.13	6.10	6.08
Specific Conductivity (mmhos/cm)*	85	77	75	73	70	69	67
Water Temperature (C)*	24.80	24.51	24.36	24.31	24.20	24.19	24.16
Turbidity (NTU) *	11000	692	305	110	65	23	10
Odor	Y	Y	Y	Y	Y	Y	Y
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	1 gals	2 gals	3 gals	4 gals	5 gals	6 gals	7 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Slow recovery ~.2 gpm

Driller Signature: Robyn Barkley

Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/18/21 Field Personnel: _____
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570	Conductivity meter serial no. 2413677	Temperature meter serial no. 24113677	Turbidity meter serial no. AG36883
4.01 su <u>X</u>	23 us _____		0 NTU <u>X</u>
7.00 su <u>X</u>	84 us <u>X</u>		1 NTU _____
10.00 su <u>X</u>	447 us <u>X</u>		10 NTU _____
	1413 us <u>X</u>		100 NTU <u>X</u>

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 5 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 14.76 ft. Screen Length/Slot Size 10 ft. / 0.01 in.
 Total Well Depth (TWD) 20 ft. Screen Interval 10 ft. to 20 ft.
 Length of water column (LWC=TWD-DGW) 5.24 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 6 gals. Drilling Fluids recovered N/A gals.

Time (military)	1310	1320	1325	1330	1335	1340	
pH (s.u.)*	6.61	6.31	6.08	6.02	5.99	5.94	
Specific Conductivity (mmhos/cm)*	280	271	267	262	260	264	
Water Temperature (C)*	24.20	24.11	24.08	23.99	23.97	23.97	
Turbidity (NTU) *	1000	391	206	105	53	10	
Odor	Y	Y	Y	Y	Y	Y	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1 gals	2 gals	3 gals	4 gals	5 gals	6 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Slow recovery ~ 2 gpm

Driller Signature: Roby Barkley Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/18/21 Field Personnel:
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
---	--	---	--

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 6 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 15.03 ft. Screen Length/Slot Size 10 ft. / 0.01 in.
 Total Well Depth (TWD) 20 ft. Screen Interval 10 ft. to 20 ft.
 Length of water column (LWC=TWD-DGW) 4.97 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 3.0 gals. Drilling Fluids recovered N/A gals.

Time (military)	1355	1400	1405	1415	1425		
pH (s.u.)*	5.99	5.61	5.49	5.47	5.46		
Specific Conductivity (mmhos/cm)*	406	391	382	380	379		
Water Temperature (C)*	24.80	24.72	24.60	24.61	24.51		
Turbidity (NTU) *	1100	246	95	20	10		
Odor	N	N	N	N	N		
		Dry	Dry	Dry	Dry		
Cumulative Gallons of Water Removed	1 gals	1.5 gals	2.0 gals	2.5 gals	3.0 gals		

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Slow recovery ~.1gpm

Driller Signature: Roby Barkley Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/17/21 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
Air Rotary Mud Rotary Sonic

Monitoring Well ID# 7 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 11.14 ft. Screen Length/Slot Size 10 ft/ 0.01 in.

Total Well Depth (TWD) 18 ft. Screen Interval 8 ft. to 18 ft.

Length of water column (LWC=TWD-DGW) 6.86 ft.

Type of Drilling Fluids used: NIA

Total Gallons of Water Removed: 13 gals.

Drilling Fluids recovered NIA gals.

Time (military)	1410	1414	1419	1425	1428	1434	
pH (s.u.)*	6.68	6.57	6.50	6.43	6.41	6.38	
Specific Conductivity (mmhos/cm)*	416	402	397	391	390	387	
Water Temperature (C)*	23.62	23.18	23.05	22.95	22.89	22.87	
Turbidity (NTU) *	+1000	506	207	105	36	10	
Odor	Y	Y	Y	Y	Y	Y	
			Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1 gals	3 gals	5.5 gals	8.5 gals	10 gals	13 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery Rate ~.5 gpm

Driller Signature: Roby Barkley

Date: 8/17/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/17/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 8

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 10.82 ft.

Screen Length/Slot Size 10 ft / 0.01 in.

Total Well Depth (TWD) 15 ft.

Screen Interval 5 ft. to 15 ft.

Length of water column (LWC=TWD-DGW) 4.18 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 6.6 gals.

Drilling Fluids recovered N/A gals.

Time (military)	1450	1455	1500	1503	1507	1512	
pH (s.u.)*	6.55	6.38	6.29	6.24	6.20	6.19	
Specific Conductivity (mmhos/cm)*	262	231	212	209	208	209	
Water Temperature (C)*	23.96	22.68	22.25	21.93	21.89	21.84	
Turbidity (NTU) *	+1000	41	72	20	16	10	
Odor	Y	Y	Y	Y	Y	Y	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.0 gals	2.5 gals	3.0 gals	3.9 gals	5.1 gals	6.6 gals	

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery Rate ~ .3 gpm.

Driller Signature: _____

Roby Barkley

Date: 8/17/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/17/24 Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions:

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su
7.00 su
10.00 su

Conductivity meter
serial no. 2413677
23 us
84 us
447 us
1413 us

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU
1 NTU
10 NTU
100 NTU

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
Air Rotary Mud Rotary Sonic

Monitoring Well ID# 9 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 10.76 ft. Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 17.5 ft. Screen Interval 7.5 ft. to 17.5 ft.

Length of water column (LWC=TWD-DGW) 6.74 ft.

Type of Drilling Fluids used: MA

Total Gallons of Water Removed: 10.5 gals.

Drilling Fluids recovered N/A gals.

Time (military)	1325	1329	1333	1336	1339	1343	
pH (s.u.)*	6.37	6.11	5.96	5.87	5.85	5.82	
Specific Conductivity (mmhos/cm)*	207	197	192	190	190	187	
Water Temperature (C)*	23.96	22.83	22.79	22.71	22.68	22.64	
Turbidity (NTU) *	1000	905	602	305	42	10	
Odor	Y	Y	Y	Y	Y	Y	
			Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.5 gals	3.5 gals	5.5 gals	7.0 gals	8.5 gals	10.5 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ .5 gpm

Driller Signature:

Robyn Barkley

Date:

8/17/24

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/17/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 10

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 3.35 ft.

Screen Length/Slot Size 10 ft. / 0.01 in.

Total Well Depth (TWD) 12 ft.

Screen Interval 2 ft. to 12 ft.

Length of water column (LWC=TWD-DGW) 8.65 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 7.7 gals.

Drilling Fluids recovered N/A gals.

Time (military)	<u>1530</u>	<u>1540</u>	<u>1543</u>	<u>1549</u>	<u>1555</u>	<u>1601</u>	
pH (s.u.)*	<u>7.01</u>	<u>6.95</u>	<u>6.80</u>	<u>6.71</u>	<u>6.68</u>	<u>6.66</u>	
Specific Conductivity (mmhos/cm)*	<u>327</u>	<u>320</u>	<u>316</u>	<u>307</u>	<u>305</u>	<u>301</u>	
Water Temperature (C)*	<u>25.70</u>	<u>25.60</u>	<u>25.49</u>	<u>25.45</u>	<u>25.43</u>	<u>25.40</u>	
Turbidity (NTU) *	<u>11000</u>	<u>196</u>	<u>90</u>	<u>65</u>	<u>18</u>	<u>10</u>	
Odor	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	
Cumulative Gallons of Water Removed	<u>1.5</u> gals	<u>3.5</u> gals	<u>4.1</u> gals	<u>5.3</u> gals	<u>6.5</u> gals	<u>7.7</u> gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Slow recovery ~.2 ypm

Driller Signature: _____

Robyn Barkley

Date: 8/17/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/17/21 Field Personnel: _____
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 11 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 6.5 ft. Screen Length/Slot Size 10 ft./0.01 in.
 Total Well Depth (TWD) 14 ft. Screen Interval 4 ft. to 14 ft.
 Length of water column (LWC=TWD-DGW) 7.85 ft. Type of Drilling Fluids used: MIA
 Total Gallons of Water Removed: 16.5 gals. Drilling Fluids recovered MIA gals.

Time (military)	1620	1623	1625	1628	1631	1633	1635
pH (s.u.)*	6.80	6.71	6.53	6.49	6.42	6.40	6.40
Specific Conductivity (mmhos/cm)*	341	336	329	326	320	320	318
Water Temperature (C)*	20.11	23.80	21.61	19.81	19.65	19.60	19.58
Turbidity (NTU) *	+1000	921	301	607	82	16	10
Odor	N	N	N	N	N	N	N
			Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	1.5 gals	4.5 gals	6.5 gals	9.5 gals	12.5 gals	14.5 gals	16.5 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ 1 gpm

Driller Signature: Robyn Barkley Date: 8/17/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/17/21 Field Personnel:
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 12 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 9.76 ft. Screen Length/Slot Size 10 ft./0.01 in.
 Total Well Depth (TWD) 17 ft. Screen Interval 7 ft. to 17 ft.
 Length of water column (LWC=TWD-DGW) 7.24 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 12.3 gals. Drilling Fluids recovered N/A gals.

Time (military)	<u>1655</u>	<u>1658</u>	<u>1702</u>	<u>1705</u>	<u>1710</u>	<u>1713</u>	
pH (s.u.)*	<u>7.05</u>	<u>6.96</u>	<u>6.90</u>	<u>6.81</u>	<u>6.78</u>	<u>6.76</u>	
Specific Conductivity (mmhos/cm)*	<u>521</u>	<u>518</u>	<u>515</u>	<u>512</u>	<u>510</u>	<u>513</u>	
Water Temperature (C)*	<u>22.68</u>	<u>22.47</u>	<u>22.31</u>	<u>22.26</u>	<u>22.19</u>	<u>22.16</u>	
Turbidity (NTU) *	<u>4000</u>	<u>321</u>	<u>291</u>	<u>161</u>	<u>102</u>	<u>10</u>	
Odor	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	
Cumulative Gallons of Water Removed	<u>1.5</u> gals	<u>3.3</u> gals	<u>5.7</u> gals	<u>7.5</u> gals	<u>10.5</u> gals	<u>12.3</u> gals	

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.6 gpm

Driller Signature: Robyn Barkley Date: 8/17/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/18/21 Field Personnel: _____
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 13 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 8.13 ft. Screen Length/Slot Size 10 ft./ 0.01 in.
 Total Well Depth (TWD) 15 ft. Screen Interval 5 ft. to 15 ft.
 Length of water column (LWC=TWD-DGW) 6.87 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 10.5 gals. Drilling Fluids recovered N/A gals.

Time (military)	0840	0843	0847	0851	0854	0859	
pH (s.u.)*	6.48	6.37	6.18	6.12	6.10	6.07	
Specific Conductivity (mmhos/cm)*	145	139	136	132	135	132	
Water Temperature (C)*	23.80	23.45	23.31	23.27	23.26	23.24	
Turbidity (NTU) *	1000	405	209	42	15	10	
Odor	Y	Y	Y	Y	Y	Y	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.0 gals	2.5 gals	4.5 gals	6.5 gals	8.0 gals	10.5 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.5 gpm

Driller Signature: Robyn Barkley Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/18/21 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. 24113677 _____	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 14 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 8.22 ft. Screen Length/Slot Size 10 ft./ 0.01 in.
 Total Well Depth (TWD) 15 ft. Screen Interval 5 ft. to 15 ft.
 Length of water column (LWC=TWD-DGW) 6.78 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 10 gals. Drilling Fluids recovered N/A gals.

Time (military)	0925	0928	0934	0936	0938	0940	0943
pH (s.u.)*	6.45	6.38	6.27	6.19	6.17	6.16	6.14
Specific Conductivity (mmhos/cm)*	125	86	75	73	70	70	69
Water Temperature (C)*	23.96	23.80	23.60	23.51	23.49	23.45	23.48
Turbidity (NTU) *	+1000	861	496	82	23	12	10
Odor	N	N	N	N	N	N	N
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	1.0 gals	2.5 gals	5.5 gals	6.5 gals	7.5 gals	8.5 gals	10.0 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.5 gpm

Driller Signature: Roby Barkley

Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/18/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter

serial no. 2233570

4.01 su X

7.00 su X

10.00 su X

Conductivity meter

serial no. 2413677

23 us _____

84 us X

447 us X

1413 us X

Temperature meter

serial no. 24113677

Turbidity meter

serial no. AG36883

0 NTU X

1 NTU _____

10 NTU _____

100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 15

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 7.51 ft.

Screen Length/Slot Size 10 ft. / 0.01 in.

Total Well Depth (TWD) 15 ft.

Screen Interval 5 ft. to 15 ft.

Length of water column (LWC=TWD-DGW) 7.49 ft.

Type of Drilling Fluids used: M/A

Total Gallons of Water Removed: 10.5 gals.

Drilling Fluids recovered M/A gals.

Time (military)	<u>1020</u>	<u>1028</u>	<u>1030</u>	<u>1032</u>	<u>1035</u>	<u>1037</u>	<u>1039</u>
pH (s.u.)*	<u>6.28</u>	<u>6.11</u>	<u>5.96</u>	<u>5.91</u>	<u>5.88</u>	<u>5.86</u>	<u>5.84</u>
Specific Conductivity (mmhos/cm)*	<u>120</u>	<u>106</u>	<u>99</u>	<u>97</u>	<u>95</u>	<u>95</u>	<u>94</u>
Water Temperature (C)*	<u>23.45</u>	<u>23.20</u>	<u>23.11</u>	<u>22.96</u>	<u>22.91</u>	<u>22.89</u>	<u>22.87</u>
Turbidity (NTU) *	<u>>1000</u>	<u>610</u>	<u>405</u>	<u>360</u>	<u>102</u>	<u>19</u>	<u>10</u>
Odor	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>
Cumulative Gallons of Water Removed	<u>1.0</u> gals	<u>5.0</u> gals	<u>6.0</u> gals	<u>7.0</u> gals	<u>8.5</u> gals	<u>9.5</u> gals	<u>10.5</u> gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.5gpm

Driller Signature: _____

Roby Barkley

Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/18/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter

serial no. 2233570

4.01 su X

7.00 su X

10.00 su X

Conductivity meter

serial no. 2413677

23 us _____

84 us X

447 us X

1413 us X

Temperature meter

serial no. 24113677

Turbidity meter

serial no. AG36883

0 NTU X

1 NTU _____

10 NTU _____

100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 16

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 7.42 ft.

Screen Length/Slot Size 10 ft./0.01 in.

Total Well Depth (TWD) 15 ft.

Screen Interval 5 ft. to 15 ft.

Length of water column (LWC=TWD-DGW) 7.58 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 9.0 gals.

Drilling Fluids recovered N/A gals.

Time (military)	1505	1508	1512	1516	1518	1520	
pH (s.u.)*	5.96	5.80	5.75	5.70	5.69	5.67	
Specific Conductivity (mmhos/cm)*	146	138	129	125	123	121	
Water Temperature (C)*	23.68	23.57	23.50	23.59	23.56	23.51	
Turbidity (NTU) *	>1000	451	210	70	16	10	
Odor	Y	Y	Y	Y	Y	Y	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.5 gals	3.0 gals	5.0 gals	7.0 gals	8.0 gals	9.0 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ 1.5 gpm

Driller Signature: _____

Robyn Barkley

Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/18/21 Field Personnel: _____
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 17 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 6.23 ft. Screen Length/Slot Size 10 ft. / 0.01 in.
 Total Well Depth (TWD) 13 ft. Screen Interval 3 ft. to 13 ft.
 Length of water column (LWC=TWD-DGW) 6.77 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 7.5 gals. Drilling Fluids recovered N/A gals.

Time (military)	1540	1550	1553	1558	1603	1605	
pH (s.u.)*	6.40	6.39	6.36	6.31	6.30	6.27	
Specific Conductivity (mmhos/cm)*	426	420	418	417	415	416	
Water Temperature (C)*	25.43	24.96	24.81	24.79	24.77	24.76	
Turbidity (NTU) *	1000	521	192	60	20	10	
Odor	Y	Y	Y	Y	Y	Y	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.5 gals	3.0 gals	3.9 gals	5.4 gals	6.9 gals	7.5 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.3 gpm

Driller Signature: _____

Robyn Barkley

Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/18/21 Field Personnel:
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 18 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 7.42 ft. Screen Length/Slot Size 10 ft. / 0.01 in.
 Total Well Depth (TWD) 14 ft. Screen Interval 4 ft. to 14 ft.
 Length of water column (LWC=TWD-DGW) 6.58 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 9.0 gals. Drilling Fluids recovered N/A gals.

Time (military)	1615	1620	1624	1626	1630		
pH (s.u.)*	6.37	6.11	5.99	5.96	5.94		
Specific Conductivity (mmhos/cm)*	275	269	264	262	261		
Water Temperature (C)*	24.11	23.26	23.20	23.19	23.16		
Turbidity (NTU) *	1000	200	45	12	10		
Odor	Y	Y	Y	Y	Y		
		Dry	Dry	Dry	Dry		
Cumulative Gallons of Water Removed	1.0 gals	4.0 gals	5.4 gals	6.6 gals	9.0 gals		

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are ± 10%.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ 0.6 gpm

Driller Signature: Roby Barkley Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# 19

Well Casing Diameter 2 inches

Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 8.51 ft.

Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 15 ft.

Screen Interval 5 ft. to 15 ft.

Length of water column (LWC=TWD-DGW) 6.49 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 123 gals.

Drilling Fluids recovered N/A gals.

Time (military)	1050	1056	1059	1103	1105	1108	
pH (s.u.)*	5.91	5.86	5.79	5.71	5.69	5.67	
Specific Conductivity (mmhos/cm)*	61	52	49	47	46	46	
Water Temperature (C)*	22.85	22.60	22.56	22.50	22.49	22.47	
Turbidity (NTU) *	1000	812	362	90	23	10	
Odor	N	N	N	N	N	N	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.5 gals	5.1 gals	6.9 gals	9.3 gals	10.5 gals	12.3 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ 1.6 gpm

Driller Signature: _____

Roby Barkley

Date: _____

8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/19/21
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570	Conductivity meter serial no. 2413677	Temperature meter serial no. <u>2413677</u>	Turbidity meter serial no. AG36883
4.01 su <u>X</u>	23 us _____		0 NTU <u>X</u>
7.00 su <u>X</u>	84 us <u>X</u>		1 NTU _____
10.00 su <u>X</u>	447 us <u>X</u>		10 NTU _____
	1413 us <u>X</u>		100 NTU <u>X</u>

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 20 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 6.42 ft. Screen Length/Slot Size 10 ft./0.01 in.
 Total Well Depth (TWD) 13 ft. Screen Interval 3 ft. to 13 ft.
 Length of water column (LWC=TWD-DGW) 6.58 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 15.0 gals. Drilling Fluids recovered N/A gals.

Time (military)	1125	1129	1133	1135	1137	1139	
pH (s.u.)*	6.97	6.81	6.79	6.75	6.73	6.71	
Specific Conductivity (mmhos/cm)*	196	192	188	185	185	182	
Water Temperature (C)*	21.65	20.81	20.38	20.26	20.22	20.18	
Turbidity (NTU)*	>1000	610	405	260	17	10	
Odor	N	N	N	N	N	N	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.0 gals	5.0 gals	9.0 gals	11.0 gals	13.0 gals	15.0 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~1 gpm

Driller Signature: Roby Barkley Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/19/21
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 21 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 8.74 ft. Screen Length/Slot Size 10 ft./ 0.01 in.
 Total Well Depth (TWD) 15 ft. Screen Interval 5 ft. to 15 ft.
 Length of water column (LWC=TWD-DGW) 6.26 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 12.4 gals. Drilling Fluids recovered N/A gals.

Time (military)	1205	1210	1213	1215	1218	1221	1224
pH (s.u.)*	7.06	6.81	6.61	6.59	6.51	6.48	6.45
Specific Conductivity (mmhos/cm)*	199	180	175	172	168	165	164
Water Temperature (C)*	22.85	21.92	21.80	21.60	21.56	21.49	21.46
Turbidity (NTU) *	+1000	391	250	102	36	11	10
Odor	N	N	N	N	N	N	N
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	1.0 gals	4.0 gals	5.8 gals	7.0 gals	8.8 gals	10.6 gals	12.4 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.6 gpm

Driller Signature: Roby Barkley Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570	Conductivity meter serial no. 2413677	Temperature meter serial no. 24113677	Turbidity meter serial no. AG36883
4.01 su <u>X</u>	23 us _____		0 NTU <u>X</u>
7.00 su <u>X</u>	84 us <u>X</u>		1 NTU _____
10.00 su <u>X</u>	447 us <u>X</u>		10 NTU _____
	1413 us <u>X</u>		100 NTU <u>X</u>

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 22 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 8.04 ft. Screen Length/Slot Size 10 ft./0.01 in.
 Total Well Depth (TWD) 15 ft. Screen Interval 5 ft. to 15 ft.
 Length of water column (LWC=TWD-DGW) 6.96 ft. Type of Drilling Fluids used: MIA
 Total Gallons of Water Removed: 19.5 gals. Drilling Fluids recovered MIA gals.

Time (military)	<u>1245</u>	<u>1249</u>	<u>1251</u>	<u>1255</u>	<u>1257</u>	<u>1259</u>	<u>1302</u>
pH (s.u.)*	<u>6.76</u>	<u>6.56</u>	<u>6.47</u>	<u>6.39</u>	<u>6.37</u>	<u>6.35</u>	<u>6.29</u>
Specific Conductivity (mmhos/cm)*	<u>299</u>	<u>290</u>	<u>282</u>	<u>275</u>	<u>269</u>	<u>266</u>	<u>264</u>
Water Temperature (C)*	<u>22.15</u>	<u>20.96</u>	<u>20.03</u>	<u>20.01</u>	<u>19.92</u>	<u>19.90</u>	<u>19.88</u>
Turbidity (NTU)*	<u>>1000</u>	<u>805</u>	<u>267</u>	<u>110</u>	<u>62</u>	<u>16</u>	<u>10</u>
Odor	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>
		<u>Day</u>	<u>Day</u>	<u>Day</u>	<u>Day</u>	<u>Day</u>	<u>Day</u>
Cumulative Gallons of Water Removed	<u>1.5</u> gals	<u>5.5</u> gals	<u>8.5</u> gals	<u>12.5</u> gals	<u>14.5</u> gals	<u>16.5</u> gals	<u>19.5</u> gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~1gpm

Driller Signature: Robyn Barkley

Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stern Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 23 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 9.26 ft. Screen Length/Slot Size 10 ft./0.01 in.
 Total Well Depth (TWD) 15 ft. Screen Interval 5 ft. to 15 ft.
 Length of water column (LWC=TWD-DGW) 5.74 ft. Type of Drilling Fluids used: N/A
 Total Gallons of Water Removed: 13 gals. Drilling Fluids recovered N/A gals.

Time (military)	<u>1325</u>	<u>1330</u>	<u>1333</u>	<u>1338</u>	<u>1342</u>	<u>1345</u>	
pH (s.u.)*	<u>7.11</u>	<u>6.91</u>	<u>6.86</u>	<u>6.82</u>	<u>6.80</u>	<u>6.80</u>	
Specific Conductivity (mmhos/cm)*	<u>396</u>	<u>391</u>	<u>385</u>	<u>382</u>	<u>380</u>	<u>379</u>	
Water Temperature (C)*	<u>22.61</u>	<u>22.49</u>	<u>22.46</u>	<u>22.40</u>	<u>22.38</u>	<u>22.31</u>	
Turbidity (NTU) *	<u>41000</u>	<u>307</u>	<u>260</u>	<u>91</u>	<u>22</u>	<u>10</u>	
Odor	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	
Cumulative Gallons of Water Removed	<u>1.0</u> gals	<u>4.0</u> gals	<u>5.8</u> gals	<u>8.8</u> gals	<u>11.2</u> gals	<u>13.0</u> gals	

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ 6 gpm

Driller Signature: Roby Barkley

Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/19/21
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter	Conductivity meter	Temperature meter	Turbidity meter
serial no. 2233570	serial no. 2413677	serial no. 24113677	serial no. AG36883
4.01 su <u>X</u>	23 us _____		0 NTU <u>X</u>
7.00 su <u>X</u>	84 us <u>X</u>		1 NTU _____
10.00 su <u>X</u>	447 us <u>X</u>		10 NTU _____
	1413 us <u>X</u>		100 NTU <u>X</u>

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# 24 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches
 Depth to Ground Water (DGW) 9.43 ft. Screen Length/Slot Size 10 ft./0.01 in.
 Total Well Depth (TWD) 15 ft. Screen Interval 5 ft. to 15 ft.
 Length of water column (LWC=TWD-DGW) 5.57 ft. Type of Drilling Fluids used: MIA
 Total Gallons of Water Removed: 10.5 gals. Drilling Fluids recovered MIA gals.

Time (military)	1410	1415	1420	1423	1426	1429	
pH (s.u.)*	5.80	5.75	5.69	5.66	5.64	5.61	
Specific Conductivity (mmhos/cm)*	430	426	420	415	412	413	
Water Temperature (C)*	24.80	24.20	23.96	23.61	23.59	23.56	
Turbidity (NTU) *	1000	712	301	120	14	10	
Odor	N	N	N	N	N	N	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.0 gals	3.5 gals	6.0 gals	7.5 gals	9.0 gals	10.5 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.5 gpm

Driller Signature: Robyn Barkley Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
Air Rotary Mud Rotary Sonic

Monitoring Well ID# 25 Well Casing Diameter 2 inches Borehole Diameter 6.5 inches

Depth to Ground Water (DGW) 8.62 ft. Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 16 ft. Screen Interval 6 ft. to 16 ft.

Length of water column (LWC=TWD-DGW) 7.38 ft. Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 14.5 gals. Drilling Fluids recovered N/A gals.

Time (military)	1445	1455	1458	1500	1502	1503	
pH (s.u.)*	6.31	6.08	5.97	5.91	5.90	5.87	
Specific Conductivity (mmhos/cm)*	272	265	259	253	251	249	
Water Temperature (C)*	20.90	20.61	20.46	20.35	20.31	20.28	
Turbidity (NTU) *	1100	290	160	72	23	10	
Odor	N	N	N	N	N	N	
		Dry	Dry	Dry	Dry	Dry	
Cumulative Gallons of Water Removed	1.5 gals	6.5 gals	9.5 gals	11.5 gals	13.5 gals	14.5 gals	gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~1 gpm

Driller Signature: _____

Robyn Barkley

Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>2413677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
Air Rotary Mud Rotary Sonic

Monitoring Well ID# DW-1 Well Casing Diameter 2 inches Borehole Diameter 6 inches
Depth to Ground Water (DGW) 16.06 ft. Screen Length/Slot Size 5 ft./0.01 in.
Total Well Depth (TWD) 45 ft. Screen Interval 40 ft. to 45 ft.
Length of water column (LWC=TWD-DGW) 28.94 ft. Type of Drilling Fluids used: Baroid E2 Mud
Total Gallons of Water Removed: 16 gals. Drilling Fluids recovered ~5 gals.

Time (military)	1750	1755	1800	1804	1806	1810	1812
pH (s.u.)*	6.72	6.38	6.11	5.96	5.92	5.90	5.89
Specific Conductivity (mmhos/cm)*	146	135	129	126	120	118	116
Water Temperature (C)*	23.99	22.85	22.77	22.68	22.61	22.59	22.54
Turbidity (NTU) *	+1000	405	192	71	42	12	10
Odor	N	N	N	N	N	N	N
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	5 gals	7.5 gals	10 gals	12 gals	13 gals	15 gals	16 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ 0.5 gpm

Driller Signature: _____

Robyn Barkley

Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/19/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 24113677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# DW-2

Well Casing Diameter 2 inches

Borehole Diameter 6 inches

Depth to Ground Water (DGW) 10.47 ft.

Screen Length/Slot Size 5 ft./ 0.01 in.

Total Well Depth (TWD) 40 ft.

Screen Interval 35 ft. to 40 ft.

Length of water column (LWC=TWD-DGW) 29.53 ft.

Type of Drilling Fluids used: Baroid E2 Mud

Total Gallons of Water Removed: 17 gals.

Drilling Fluids recovered 25 gals.

Time (military)	<u>1655</u>	<u>1700</u>	<u>1703</u>	<u>1707</u>	<u>1710</u>	<u>1715</u>	<u>1719</u>
pH (s.u.)*	<u>6.60</u>	<u>6.45</u>	<u>6.30</u>	<u>6.19</u>	<u>6.12</u>	<u>6.10</u>	<u>6.07</u>
Specific Conductivity (mmhos/cm)*	<u>106</u>	<u>92</u>	<u>86</u>	<u>81</u>	<u>79</u>	<u>77</u>	<u>76</u>
Water Temperature (C)*	<u>21.20</u>	<u>20.80</u>	<u>20.68</u>	<u>20.59</u>	<u>20.53</u>	<u>20.51</u>	<u>20.49</u>
Turbidity (NTU) *	<u>+1000</u>	<u>902</u>	<u>451</u>	<u>260</u>	<u>102</u>	<u>28</u>	<u>10</u>
Odor	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>N</u>
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>
Cumulative Gallons of Water Removed	<u>5</u> gals	<u>7.5</u> gals	<u>9.0</u> gals	<u>11.0</u> gals	<u>12.5</u> gals	<u>15.0</u> gals	<u>17</u> gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~0.5 gpm

Driller Signature: _____

Roby Barkley

Date: _____

8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/19/21 Field Personnel: _____
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
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Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# DW-3 Well Casing Diameter 2 inches Borehole Diameter 6 inches
 Depth to Ground Water (DGW) 8.25 ft. Screen Length/Slot Size 5 ft./ 0.01 in.
 Total Well Depth (TWD) 40 ft. Screen Interval 35 ft. to 40 ft.
 Length of water column (LWC=TWD-DGW) 31.75 ft. Type of Drilling Fluids used: Baroid E2 Mud
 Total Gallons of Water Removed: 17 gals. Drilling Fluids recovered ~5 gals.

Time (military)	1615	1621	1625	1627	1631	1636	1639
pH (s.u.)*	6.99	6.78	6.66	6.55	6.50	6.51	6.48
Specific Conductivity (mmhos/cm)*	261	196	188	185	183	182	182
Water Temperature (C)*	22.80	21.90	21.80	21.62	21.57	21.56	21.54
Turbidity (NTU) *	>1000	785	600	305	101	25	10
Odor	N	N	N	N	N	N	N
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	5 gals	8 gals	10 gals	11 gals	13 gals	15.5 gals	17 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.5 gpm

Driller Signature: Robyn Barkley Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC
 Date: 8/19/21
 Drilling Company: Petra-Tech Environmental
 Driller's Certification Number: 934-A

Site ID#: UST Permit 04785
 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers
 Driller's Name: R. Barkley
 Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting
 * Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570 4.01 su <u>X</u> 7.00 su <u>X</u> 10.00 su <u>X</u>	Conductivity meter serial no. 2413677 23 us _____ 84 us <u>X</u> 447 us <u>X</u> 1413 us <u>X</u>	Temperature meter serial no. <u>24113677</u>	Turbidity meter serial no. AG36883 0 NTU <u>X</u> 1 NTU _____ 10 NTU _____ 100 NTU <u>X</u>
--	---	--	---

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
 Air Rotary Mud Rotary Sonic

Monitoring Well ID# DW-4 Well Casing Diameter 2 inches Borehole Diameter 6 inches
 Depth to Ground Water (DGW) 8.89 ft. Screen Length/Slot Size 5 ft./0.01 in.
 Total Well Depth (TWD) 25 ft. Screen Interval 20 ft. to 25 ft.
 Length of water column (LWC=TWD-DGW) 16.11 ft. Type of Drilling Fluids used: Baroid E2 Mud
 Total Gallons of Water Removed: 20 gals. Drilling Fluids recovered 25 gals.

Time (military)	1525	1529	1533	1535	1537	1539	1540
pH (s.u.)*	6.80	6.61	6.47	6.35	6.29	6.25	6.23
Specific Conductivity (mmhos/cm)*	118	112	110	105	103	100	101
Water Temperature (C)*	21.16	20.08	19.91	19.76	19.73	19.70	19.67
Turbidity (NTU) *	41000	305	136	82	19	16	10
Odor	N	N	N	N	N	N	N
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	5 gals	9 gals	13 gals	15 gals	17 gals	19 gals	20 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are ± 10%.
 Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~1 gpm

Driller Signature: Roby Barkley Date: 8/19/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/18/21

Field Personnel:

J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter
serial no. 2233570
4.01 su X
7.00 su X
10.00 su X

Conductivity meter
serial no. 2413677
23 us _____
84 us X
447 us X
1413 us X

Temperature meter
serial no. 2413677

Turbidity meter
serial no. AG36883
0 NTU X
1 NTU _____
10 NTU _____
100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# Rw-1

Well Casing Diameter 4 inches

Borehole Diameter 8.5 inches

Depth to Ground Water (DGW) 15.79 ft.

Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 20 ft.

Screen Interval 10 ft. to 20 ft.

Length of water column (LWC=TWD-DGW) 4.21 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 12.5 gals.

Drilling Fluids recovered N/A gals.

Time (military)	<u>1645</u>	<u>1655</u>	<u>1705</u>	<u>1710</u>	<u>1712</u>	<u>1715</u>	
pH (s.u.)*	<u>6.35</u>	<u>6.16</u>	<u>5.99</u>	<u>5.96</u>	<u>5.90</u>	<u>5.87</u>	
Specific Conductivity (mmhos/cm)*	<u>248</u>	<u>225</u>	<u>216</u>	<u>210</u>	<u>208</u>	<u>206</u>	
Water Temperature (C)*	<u>25.72</u>	<u>26.80</u>	<u>24.99</u>	<u>24.93</u>	<u>24.90</u>	<u>24.89</u>	
Turbidity (NTU)*	<u>1000</u>	<u>496</u>	<u>205</u>	<u>85</u>	<u>37</u>	<u>10</u>	
Odor	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	<u>Y</u>	
		<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	<u>Dry</u>	
Cumulative Gallons of Water Removed	<u>3.5</u> gals	<u>6.5</u> gals	<u>9.5</u> gals	<u>11.0</u> gals	<u>11.6</u> gals	<u>12.5</u> gals	

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.3 gpm. Slow recovery

Driller Signature: _____

Roby Barkley

Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04785

Date: 8/18/21

Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block

Submersible Pump

Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter

serial no. 2233570

4.01 su X

7.00 su X

10.00 su X

Conductivity meter

serial no. 2413877

23 us _____

84 us X

447 us X

1413 us X

Temperature meter

serial no. 24113677

Turbidity meter

serial no. AG36883

0 NTU X

1 NTU _____

10 NTU _____

100 NTU X

Drilling Method

Hollow Stem Augers

Solid Flight Augers

Direct Push

Air Rotary

Mud Rotary

Sonic

Monitoring Well ID# Rw-2

Well Casing Diameter 4 inches

Borehole Diameter 8.5 inches

Depth to Ground Water (DGW) 15.04 ft.

Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 20 ft.

Screen Interval 10 ft. to 20 ft.

Length of water column (LWC=TWD-DGW) 4.96 ft.

Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 16.5 gals.

Drilling Fluids recovered N/A gals.

Time (military)	1725	1730	1734	1739	1744	1747	1750
pH (s.u.)*	6.80	6.42	6.30	6.18	6.09	6.08	6.05
Specific Conductivity (mmhos/cm)*	185	160	146	139	136	135	132
Water Temperature (C)*	24.26	23.91	23.80	23.72	23.70	23.69	23.64
Turbidity (NTU) *	1000	802	260	90	51	17	10
Odor	Y	Y	Y	Y	Y	Y	Y
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	4 gals	6.5 gals	8.5 gals	11.0 gals	13.5 gals	15.0 gals	16.5 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process:

Well development consisted of overpumping with a submersible pump and

periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~ .5 gpm

Driller Signature: _____

Robyn Barkley

Date: 8/18/21

Well Development Field Form

Facility Name: Quick Pantry 19 - Greenwood, SC

Site ID#: UST Permit 04765

Date: 8/18/21 Field Personnel: J. Slagh / T. Beaver / R. Barkley / R. McCormack / C. Summers

Drilling Company: Petra-Tech Environmental

Driller's Name: R. Barkley

Driller's Certification Number: 934-A

Weather Conditions: _____

Well Development Method

Surge Block Submersible Pump Air Lifting

* Bailing can be combined with any of the above methods, but not utilized alone for development.

Quality Assurance

pH meter serial no. 2233570	Conductivity meter serial no. 2413677	Temperature meter serial no. 24113677	Turbidity meter serial no. AG36883
4.01 su <u>X</u>	23 us _____		0 NTU <u>X</u>
7.00 su <u>X</u>	84 us <u>X</u>		1 NTU _____
10.00 su <u>X</u>	447 us <u>X</u>		10 NTU _____
	1413 us <u>X</u>		100 NTU <u>X</u>

Drilling Method

Hollow Stem Augers Solid Flight Augers Direct Push
Air Rotary Mud Rotary Sonic

Monitoring Well ID# RW-3 Well Casing Diameter 4 inches Borehole Diameter 8.5 inches

Depth to Ground Water (DGW) 15.46 ft. Screen Length/Slot Size 10 ft./ 0.01 in.

Total Well Depth (TWD) 20 ft. Screen Interval 10 ft. to 20 ft.

Length of water column (LWC=TWD-DGW) 4.54 ft. Type of Drilling Fluids used: N/A

Total Gallons of Water Removed: 17.5 gals. Drilling Fluids recovered N/A gals.

Time (military)	1800	1810	1813	1816	1820	1822	1827
pH (s.u.)*	6.68	6.49	6.30	6.27	6.21	6.20	6.18
Specific Conductivity (mmhos/cm)*	126	99	97	92	90	90	89
Water Temperature (C)*	24.80	23.60	23.48	23.30	23.25	23.22	23.19
Turbidity (NTU) *	+1000	705	390	120	22	15	10
Odor	Y	Y	Y	Y	Y	Y	Y
		Dry	Dry	Dry	Dry	Dry	Dry
Cumulative Gallons of Water Removed	4 gals	9 gals	10.5 gals	12 gals	14 gals	15 gals	17.5 gals

* Development is completed once groundwater turbidity is ≤ 10 NTU and all parameters are $\pm 10\%$.

Detailed description of Well Development process: Well development consisted of overpumping with a submersible pump and periodic oscillation of the pump to remove silt/sediment from the monitoring well. Recovery rate ~.5 gpm.

Driller Signature: Robyn Barkley

Date: 8/18/21

APPENDIX F

Aquifer Calculations

SUMMARY of SLUG TEST

SOUTH CAROLINA
Department of Health and Environmental Control (DHEC)

Site Data

SITE ID# 04785

COUNTY: Greenwood

FACILITY NAME: Quick Pantry # 19

Slug Data

See Appendix F Table _____ Figure _____ for a list of all data measurements.
 (water level logs, etc.) (Complete as appropriate)

Water Level Recovery Data was measured by Insitu Troll™ Data Logger
 (Hermit Data Logger, Manually with Water Level Indicator, etc.) (List Method).

Complete the following table for each well tested.

COMPLETE A SECOND SHEET IF MORE THAN FOUR WELLS ARE TESTED.

	MW-6	MW-20	DW-1	DW-2
Slug Test Conducted in well(s) number				
Initial Rise/Drawdown in well (feet)	-2.28	-1.389	-1.641	-3.021
Radius of Well Casing (feet)	0.08333	0.08333	0.08333	0.08333
Effective Radius of Well (feet)	0.177	0.177	0.177	0.177
Static Saturated Aquifer Thickness (feet)	70	70	70	70
Length of Well Screen (feet)	10	10	5	5
Static Height of Water Column in Well (feet)	5.021	7.419	21.39	28.87

Calculations

See Appendix F Table _____ Figure _____ for calculations. (Complete as appropriate).
 The method for aquifer calculations was Bouwer-Rice (i.e. Bouwer-Rice, Cooper, etc.)

Calculated values by well were as follows:

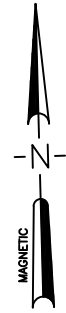
	MW-6	MW-20	DW-1	DW-2
Slug Test Conducted in well(s) number				
Hydraulic Conductivity	2.217 ft/day	2.177 ft/day	2.21 ft/day	2.379 ft/day

Thickness of the aquifer used to calculate hydraulic conductivity was 70 feet.

The aquifer is _____ confined _____ semi-confined X water table
 (Check as appropriate)

The estimated seepage velocity is 33.79 feet per year based on a hydraulic conductivity of 2.197 ft/day, a hydraulic gradient of 0.02107 ft/ft, and a porosity of 50 percent for Clay Loam soil (list type i.e., silty sand, clay, etc.).

SUMMARY of SLUG TEST



SCALE: 1" = 30'
30 15 0 30 60



Hydraulic Gradient
 $7.06 / 335 = 0.02107 \text{ ft/ft}$

335 ft

7.06 ft

335 ft

**Vertical Potential Hydraulic Gradient
Between Shallow MW-12 and Deep DW-2**

$$\frac{Dh}{DI} = \frac{[(GW \text{ Elevation DW-2})-(GW \text{ Elevation MW-12})]}{[(Base \text{ of Screen MW-12})-(Base \text{ of Screen DW-2})]}$$

$$\frac{Dh}{DI} = \frac{602.33 - 600.67}{594.62 - (571.79)} = 0.07271 \text{ ft/ft}$$

Head Elevation of DW-2 is slightly higher than MW-12 so Vertical Flow is Upward (Discharging)

**Vertical Potential Hydraulic Gradient
Between Shallow MW-13 and Deep DW-3**

$$\frac{Dh}{DI} = \frac{[(GW \text{ Elevation DW-3})-(GW \text{ Elevation MW-13})]}{[(Base \text{ of Screen MW-13})-(Base \text{ of Screen DW-3})]}$$

$$\frac{Dh}{DI} = \frac{601.64 - 599.23}{595.45 - (570.33)} = 0.09594 \text{ ft/ft}$$

Head Elevation of DW-3 is slightly higher than MW-13 so Vertical Flow is Upward (Discharging)



KLM Environmental, LLC

Phase I-Phase II-Underground Storage Tanks-Soil & Water Sampling-Well Installation

Appendix F
Vertical Gradient
Quick Pantry # 19
Greenwood, SC
UST # 04785

MW-6 Slug Test

Site Name: Quick Pantry # 19
 Location: Greenwood, SC
 Test Date: 9/2/21
 Client: GPM Southeast
 Project Number: 21547
 Import File: Z:\21547 Quick Pantry # 19\Tier II Work Plan\MW-6.txt

Well Label: MW-6
 Aquifer Thickness: 70. feet
 Screen Length: 10. feet
 Casing Radius: 1. Inches
 Effective Radius: 2.125 Inches
 Gravel Pack Porosity: 50. %
 Corrected Casing Radius: 1.661 Inches
 Static Water Level: 5.021 feet
 Water Table to Screen Bottom: 5.021 feet
 Anisotropy Ratio: 1.
 Time Adjustment: 5. Seconds

Test starts with trial 20

There are 120 time and drawdown measurements

Maximum head is 2.28 feet

Minimum head is -1.e-006 feet

Trial	Time (Seconds)	Adjusted Time (Seconds)	Drawdown (feet)	Head (feet)	Head Ratio
1	0.	-5.	4.967	5.356e-002	2.35e-002
2	0.25	-4.75	4.968	5.34e-002	2.342e-002
3	0.5	-4.5	4.967	5.359e-002	2.351e-002
4	0.75	-4.25	4.97	5.111e-002	2.242e-002
5	1.	-4.	4.969	5.205e-002	2.283e-002
6	1.25	-3.75	4.969	5.173e-002	2.269e-002
7	1.5	-3.5	4.968	5.341e-002	2.343e-002
8	1.75	-3.25	4.918	0.1031	4.524e-002
9	2.	-3.	4.943	7.839e-002	3.439e-002
10	2.25	-2.75	4.972	4.854e-002	2.129e-002
11	2.5	-2.5	4.941	8.019e-002	3.518e-002
12	2.75	-2.25	4.96	6.06e-002	2.658e-002
13	3.	-2.	4.954	6.721e-002	2.948e-002
14	3.25	-1.75	4.945	7.596e-002	3.332e-002
15	3.5	-1.5	5.021	-1.e-006	-4.387e-007
16	3.75	-1.25	4.916	0.1055	4.627e-002
17	4.	-1.	4.987	3.442e-002	1.51e-002
18	4.25	-0.75	4.908	0.1133	4.968e-002
19	4.5	-0.5	4.289	0.7324	0.3213
20	4.75	-0.25	3.633	1.388	0.6088
21	5.	0.	2.741	2.28	1.
22	5.25	0.25	3.554	1.467	0.6437
23	5.5	0.5	3.821	1.2	0.5264
24	5.75	0.75	3.765	1.256	0.5511
25	6.	1.	3.707	1.314	0.5764
26	6.36	1.36	3.752	1.269	0.5566
27	6.72	1.72	3.771	1.25	0.5484
28	7.14	2.14	3.783	1.238	0.543
29	7.56	2.56	3.832	1.189	0.5216
30	7.98	2.98	3.859	1.162	0.5099
31	8.46	3.46	3.888	1.133	0.4971
32	9.	4.	3.93	1.091	0.4788
33	9.48	4.48	3.962	1.059	0.4646
34	10.08	5.08	3.998	1.023	0.4487
35	10.68	5.68	4.029	0.9923	0.4353
36	11.28	6.28	4.062	0.9589	0.4206
37	11.94	6.94	4.095	0.9255	0.406
38	12.66	7.66	4.127	0.8941	0.3922
39	13.44	8.44	4.158	0.863	0.3786
40	14.22	9.22	4.187	0.8335	0.3657
41	15.06	10.06	4.213	0.8078	0.3544
42	15.96	10.96	4.236	0.7851	0.3444
43	16.92	11.92	4.257	0.7642	0.3352
44	17.88	12.88	4.275	0.7456	0.3271
45	18.96	13.96	4.29	0.7305	0.3205

Quick Pantry # 19

46	20.1	15.1	4.305	0.7159	0.314
47	21.3	16.3	4.316	0.705	0.3092
48	22.56	17.56	4.326	0.6947	0.3047
49	23.88	18.88	4.334	0.6865	0.3012
50	25.32	20.32	4.344	0.6774	0.2972
51	26.82	21.82	4.35	0.6714	0.2945
52	28.38	23.38	4.358	0.6632	0.2909
53	30.06	25.06	4.364	0.6575	0.2884
54	31.86	26.86	4.368	0.6529	0.2864
55	33.72	28.72	4.374	0.6468	0.2837
56	35.76	30.76	4.38	0.6411	0.2812
57	37.86	32.86	4.384	0.6368	0.2793
58	40.08	35.08	4.388	0.6332	0.2778
59	42.48	37.48	4.393	0.6276	0.2753
60	45.	40.	4.396	0.6247	0.2741
61	47.64	42.64	4.402	0.6195	0.2718
62	50.46	45.46	4.404	0.6167	0.2705
63	53.46	48.46	4.409	0.6119	0.2684
64	56.64	51.64	4.41	0.6106	0.2679
65	60.	55.	4.413	0.6076	0.2665
66	63.6	58.6	4.419	0.6023	0.2642
67	67.2	62.2	4.421	0.5996	0.263
68	71.4	66.4	4.425	0.5958	0.2614
69	75.6	70.6	4.428	0.5934	0.2603
70	79.8	74.8	4.429	0.5923	0.2598
71	84.6	79.6	4.433	0.5884	0.2581
72	90.	85.	4.434	0.5871	0.2575
73	94.8	89.8	4.434	0.5868	0.2574
74	100.8	95.8	4.439	0.5819	0.2553
75	106.8	101.8	4.441	0.5804	0.2546
76	112.8	107.8	4.443	0.5782	0.2537
77	119.4	114.4	4.444	0.577	0.2531
78	126.6	121.6	4.447	0.5738	0.2517
79	134.4	129.4	4.449	0.5724	0.2511
80	142.2	137.2	4.45	0.5711	0.2505
81	150.6	145.6	4.45	0.5705	0.2503
82	159.6	154.6	4.454	0.5672	0.2488
83	169.2	164.2	4.455	0.566	0.2483
84	178.8	173.8	4.457	0.5637	0.2473
85	189.6	184.6	4.459	0.5623	0.2467
86	201.	196.	4.461	0.5601	0.2457
87	213.	208.	4.462	0.5593	0.2453
88	225.6	220.6	4.463	0.5579	0.2448
89	238.8	233.8	4.464	0.557	0.2443
90	253.2	248.2	4.466	0.5551	0.2435
91	268.2	263.2	4.466	0.5548	0.2434
92	283.8	278.8	4.468	0.5526	0.2424
93	300.6	295.6	4.469	0.5523	0.2423
94	318.6	313.6	4.47	0.5507	0.2416
95	337.2	332.2	4.472	0.549	0.2408
96	357.6	352.6	4.475	0.5457	0.2394
97	378.6	373.6	4.474	0.5467	0.2398
98	400.8	395.8	4.477	0.5437	0.2385
99	424.8	419.8	4.478	0.5433	0.2383
100	450.	445.	4.48	0.5408	0.2373
101	476.4	471.4	4.481	0.5403	0.237
102	504.6	499.6	4.482	0.5394	0.2366
103	534.6	529.6	4.483	0.5378	0.2359
104	566.4	561.4	4.484	0.5373	0.2357
105	600.	595.	4.485	0.5364	0.2353
106	636.	631.	4.487	0.5344	0.2344
107	672.	667.	4.487	0.5341	0.2343
108	714.	709.	4.489	0.5322	0.2335
109	756.	751.	4.49	0.5314	0.2331
110	798.	793.	4.49	0.5314	0.2331
111	846.	841.	4.492	0.5291	0.2321
112	900.	895.	4.494	0.5268	0.2311
113	948.	943.	4.494	0.5267	0.231
114	1008	1003	4.495	0.5264	0.2309
115	1068	1063	4.497	0.5241	0.2299
116	1128	1123	4.499	0.5219	0.2289

Quick Pantry # 19

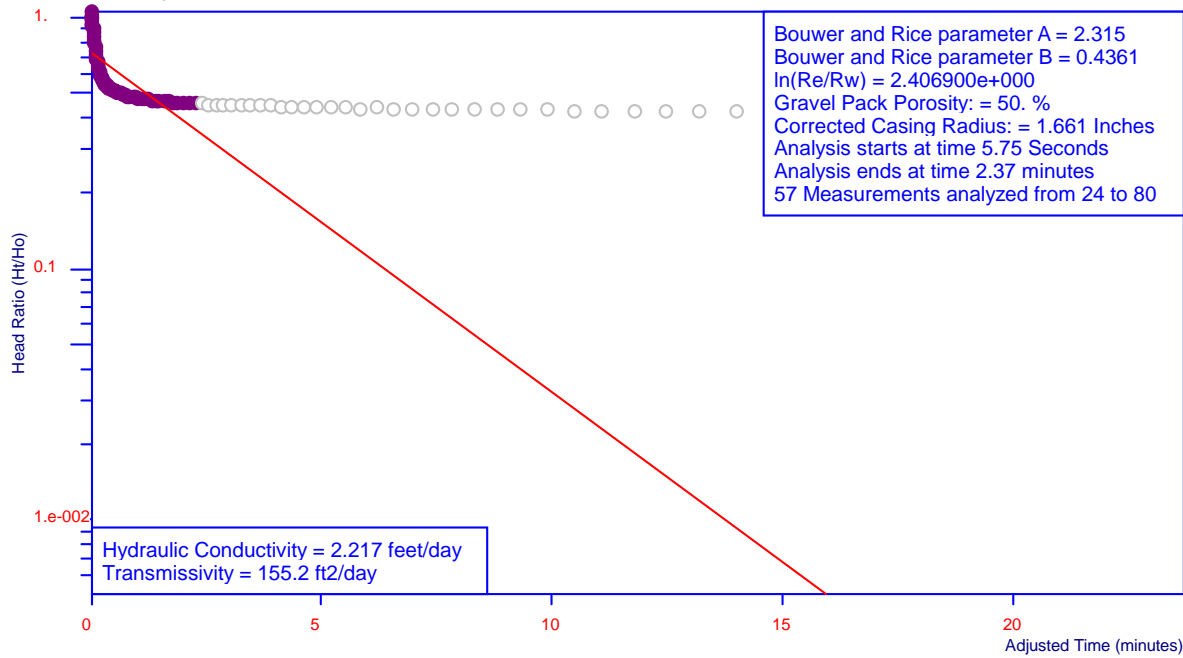
117	1194	1189	4.5	0.5207	0.2284
118	1266	1261	4.501	0.5197	0.228
119	1344	1339	4.502	0.5194	0.2279
120	1422	1417	4.504	0.5169	0.2268

MW-6 Slug Test 9/2/21

Quick Pantry # 19 Greenwood, SC

Bouwer and Rice Graph

MW-6



Project Number: 21547 for GPM Southeast
Analysis by Starpoint Software

H_o is 1.256 feet at 5.75 Seconds

MW-20 Slug Test

Site Name: Quick Pantry # 19
 Location: Greenwood, SC
 Test Date: 9/2/21
 Client: GPM Southeast
 Project Number: 21547
 Import File: Z:\21547 Quick Pantry # 19\Tier II Work Plan\MW-20.txt

Well Label: MW-20
 Aquifer Thickness: 70. feet
 Screen Length: 10. feet
 Casing Radius: 1. Inches
 Effective Radius: 2.125 Inches
 Gravel Pack Porosity: 50. %
 Corrected Casing Radius: 1.661 Inches
 Static Water Level: 7.419 feet
 Water Table to Screen Bottom: 7.419 feet
 Anisotropy Ratio: 1.
 Time Adjustment: 4.251 Seconds

Test starts with trial 17

There are 117 time and drawdown measurements

Maximum head is 1.389 feet

Minimum head is 0. feet

Trial	Time (Seconds)	Adjusted Time (Seconds)	Drawdown (feet)	Head (feet)	Head Ratio
1	0.	-4.251	7.388	3.054e-002	2.198e-002
2	0.251	-4.	7.393	2.576e-002	1.854e-002
3	0.501	-3.75	7.398	2.092e-002	1.506e-002
4	0.751	-3.5	7.391	2.796e-002	2.012e-002
5	1.001	-3.25	7.407	1.195e-002	8.603e-003
6	1.251	-3.	7.399	2.042e-002	1.47e-002
7	1.501	-2.75	7.4	1.873e-002	1.348e-002
8	1.751	-2.5	7.405	1.427e-002	1.027e-002
9	2.001	-2.25	7.407	1.182e-002	8.508e-003
10	2.251	-2.	7.41	8.682e-003	6.249e-003
11	2.501	-1.75	7.411	7.696e-003	5.539e-003
12	2.751	-1.5	7.414	5.255e-003	3.782e-003
13	3.001	-1.25	7.406	1.318e-002	9.486e-003
14	3.251	-1.	7.419	1.2e-004	8.637e-005
15	3.501	-0.75	6.068	1.351	0.9722
16	3.751	-0.5	7.266	0.1534	0.1104
17	4.001	-0.25	6.143	1.276	0.9187
18	4.251	0.	6.03	1.389	1.
19	4.501	0.25	6.058	1.361	0.9797
20	4.751	0.5	6.052	1.367	0.9842
21	5.001	0.75	6.054	1.365	0.9821
22	5.251	1.	6.075	1.344	0.9673
23	5.501	1.25	6.089	1.33	0.9572
24	5.751	1.5	6.104	1.315	0.9466
25	6.001	1.75	6.124	1.295	0.9321
26	6.361	2.11	6.146	1.273	0.9159
27	6.721	2.47	6.174	1.245	0.8963
28	7.141	2.89	6.2	1.219	0.8775
29	7.561	3.31	6.228	1.191	0.8572
30	7.981	3.73	6.254	1.165	0.8387
31	8.461	4.21	6.284	1.135	0.8168
32	9.001	4.75	6.314	1.105	0.7951
33	9.481	5.23	6.343	1.076	0.7744
34	10.08	5.83	6.378	1.041	0.7496
35	10.68	6.43	6.408	1.011	0.7275
36	11.28	7.03	6.437	0.9825	0.7071
37	11.94	7.69	6.469	0.9504	0.684
38	12.66	8.41	6.499	0.92	0.6621
39	13.44	9.19	6.53	0.889	0.6398
40	14.22	9.97	6.557	0.8618	0.6202
41	15.06	10.81	6.584	0.8349	0.6009
42	15.96	11.71	6.609	0.8104	0.5832
43	16.92	12.67	6.634	0.7847	0.5648
44	17.88	13.63	6.657	0.7617	0.5482
45	18.96	14.71	6.681	0.7379	0.5311

Quick Pantry # 19

46	20.1	15.85	6.704	0.7155	0.5149
47	21.3	17.05	6.724	0.695	0.5002
48	22.56	18.31	6.744	0.6747	0.4856
49	23.88	19.63	6.762	0.6568	0.4727
50	25.32	21.07	6.779	0.6398	0.4605
51	26.82	22.57	6.797	0.6222	0.4478
52	28.38	24.13	6.814	0.6051	0.4355
53	30.06	25.81	6.83	0.5894	0.4242
54	31.86	27.61	6.848	0.5711	0.411
55	33.72	29.47	6.862	0.5568	0.4008
56	35.76	31.51	6.879	0.5403	0.3888
57	37.86	33.61	6.894	0.5246	0.3775
58	40.08	35.83	6.91	0.5089	0.3663
59	42.48	38.23	6.927	0.4924	0.3544
60	45.	40.75	6.942	0.4767	0.3431
61	47.64	43.39	6.957	0.4619	0.3324
62	50.46	46.21	6.974	0.4453	0.3205
63	53.46	49.21	6.991	0.428	0.3081
64	56.64	52.39	7.008	0.4107	0.2956
65	60.	55.75	7.026	0.3926	0.2826
66	63.6	59.35	7.045	0.3741	0.2692
67	67.2	62.95	7.064	0.355	0.2555
68	71.4	67.15	7.085	0.3337	0.2402
69	75.6	71.35	7.106	0.3125	0.2249
70	79.8	75.55	7.126	0.2933	0.2111
71	84.6	80.35	7.146	0.2733	0.1967
72	90.	85.75	7.167	0.2523	0.1816
73	94.8	90.55	7.181	0.2376	0.171
74	100.8	96.55	7.198	0.2214	0.1594
75	106.8	102.5	7.214	0.2054	0.1478
76	112.8	108.5	7.228	0.1913	0.1377
77	119.4	115.1	7.24	0.1789	0.1287
78	126.6	122.3	7.253	0.1664	0.1197
79	134.4	130.1	7.264	0.1552	0.1117
80	142.2	137.9	7.275	0.1442	0.1038
81	150.6	146.3	7.286	0.1331	9.577e-002
82	159.6	155.3	7.293	0.1259	9.058e-002
83	169.2	164.9	7.303	0.1161	8.354e-002
84	178.8	174.6	7.312	0.1074	7.729e-002
85	189.6	185.3	7.317	0.102	7.339e-002
86	201.	196.7	7.325	9.443e-002	6.796e-002
87	213.	208.7	7.332	8.737e-002	6.288e-002
88	225.6	221.3	7.338	8.065e-002	5.804e-002
89	238.8	234.5	7.344	7.506e-002	5.402e-002
90	253.2	248.9	7.349	7.002e-002	5.039e-002
91	268.2	263.9	7.354	6.471e-002	4.657e-002
92	283.8	279.5	7.358	6.065e-002	4.365e-002
93	300.6	296.3	7.363	5.596e-002	4.028e-002
94	318.6	314.3	7.367	5.157e-002	3.711e-002
95	337.2	332.9	7.371	4.803e-002	3.456e-002
96	357.6	353.3	7.375	4.431e-002	3.189e-002
97	378.6	374.3	7.376	4.339e-002	3.123e-002
98	400.8	396.5	7.379	4.034e-002	2.904e-002
99	424.8	420.5	7.381	3.757e-002	2.704e-002
100	450.	445.8	7.381	3.78e-002	2.72e-002
101	476.4	472.1	7.381	3.751e-002	2.699e-002
102	504.6	500.3	7.383	3.63e-002	2.613e-002
103	534.6	530.3	7.384	3.546e-002	2.552e-002
104	566.4	562.1	7.384	3.53e-002	2.541e-002
105	600.	595.7	7.383	3.6e-002	2.591e-002
106	636.	631.7	7.383	3.582e-002	2.578e-002
107	672.	667.7	7.385	3.421e-002	2.462e-002
108	714.	709.7	7.387	3.229e-002	2.324e-002
109	756.	751.7	7.387	3.229e-002	2.324e-002
110	798.	793.7	7.387	3.183e-002	2.291e-002
111	846.	841.7	7.387	3.246e-002	2.336e-002
112	900.	895.7	7.387	3.151e-002	2.268e-002
113	948.	943.7	7.387	3.192e-002	2.298e-002
114	1008	1004	7.387	3.235e-002	2.329e-002
115	1068	1064	7.385	3.411e-002	2.455e-002
116	1128	1124	7.385	3.367e-002	2.423e-002

Quick Pantry # 19

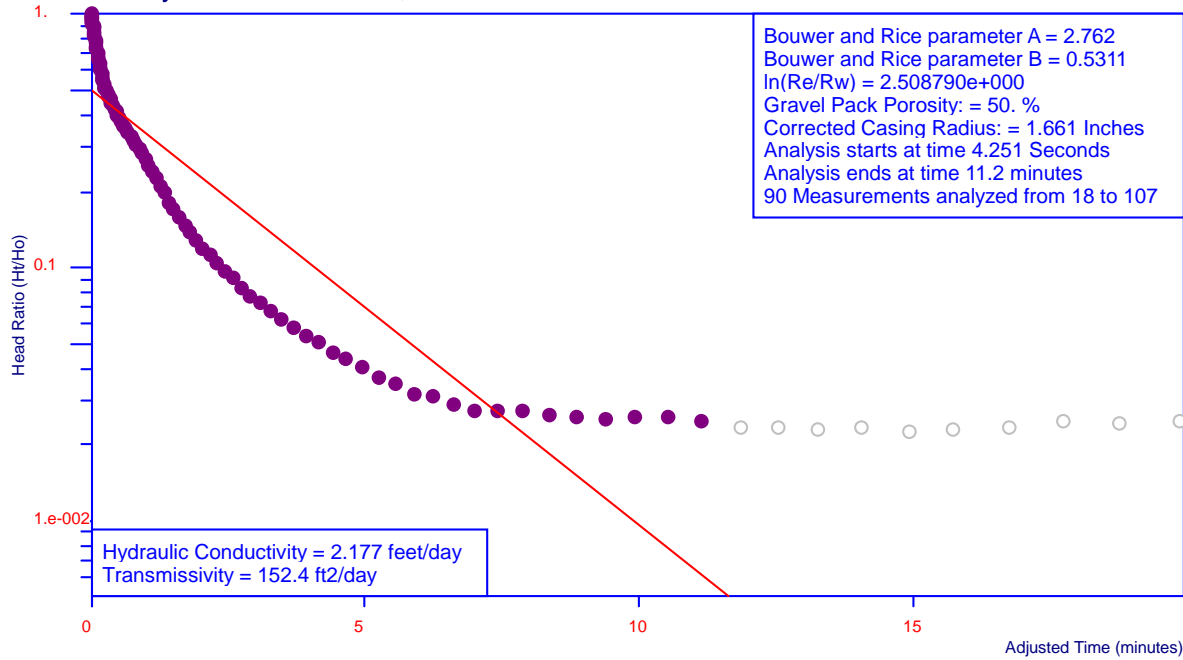
117	1194	1190	7.385	3.414e-002	2.457e-002
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MW-20 Slug Test 9/2/21

Quick Pantry # 19 Greenwood, SC

Bouwer and Rice Graph

MW-20



Project Number: 21547 for GPM Southeast
Analysis by Starpoint Software

DW-1 Slug Test

Site Name: Quick Pantry # 19
 Location: Greenwood, SC
 Test Date: 9/2/21
 Client: GPM Southeast
 Project Number: 21547
 Import File: Z:\21547 Quick Pantry # 19\Tier II Work Plan\DW-1.txt

Well Label: DW-1
 Aquifer Thickness: 70. feet
 Screen Length: 5. feet
 Casing Radius: 1. Inches
 Effective Radius: 2.125 Inches
 Gravel Pack Porosity: 50. %
 Corrected Casing Radius: 1.661 Inches
 Static Water Level: 21.39 feet
 Water Table to Screen Bottom: 21.39 feet
 Anisotropy Ratio: 1.
 Time Adjustment: 5.25 Seconds

Test starts with trial 21

There are 124 time and drawdown measurements

Maximum head is 1.641 feet

Minimum head is 0. feet

Trial	Time (Seconds)	Adjusted Time (Seconds)	Drawdown (feet)	Head (feet)	Head Ratio
1	0.	-5.25	21.29	0.1004	6.115e-002
2	0.25	-5.	21.3	9.113e-002	5.553e-002
3	0.5	-4.75	21.3	9.202e-002	5.607e-002
4	0.75	-4.5	21.29	9.788e-002	5.964e-002
5	1.	-4.25	21.3	8.706e-002	5.305e-002
6	1.25	-4.	21.29	0.1022	6.23e-002
7	1.506	-3.744	21.29	0.1007	6.136e-002
8	1.75	-3.5	21.3	8.714e-002	5.309e-002
9	2.	-3.25	21.29	0.1011	6.16e-002
10	2.25	-3.	21.29	9.542e-002	5.814e-002
11	2.5	-2.75	21.3	9.39e-002	5.721e-002
12	2.75	-2.5	21.3	9.39e-002	5.721e-002
13	3.	-2.25	21.3	9.368e-002	5.708e-002
14	3.25	-2.	21.3	9.095e-002	5.542e-002
15	3.5	-1.75	21.3	9.e-002	5.484e-002
16	3.75	-1.5	21.33	5.817e-002	3.544e-002
17	4.	-1.25	21.3	9.19e-002	5.599e-002
18	4.25	-1.	21.29	0.105	6.396e-002
19	4.5	-0.75	20.6	0.7915	0.4823
20	4.75	-0.5	20.25	1.136	0.6922
21	5.	-0.25	19.96	1.433	0.8732
22	5.25	0.	19.75	1.641	1.
23	5.5	0.25	19.76	1.627	0.9912
24	5.75	0.5	19.78	1.612	0.9819
25	6.	0.75	19.79	1.599	0.9742
26	6.36	1.11	19.8	1.594	0.9709
27	6.72	1.47	19.82	1.573	0.9585
28	7.14	1.89	19.83	1.558	0.9494
29	7.56	2.31	19.84	1.553	0.9463
30	7.98	2.73	19.85	1.537	0.9367
31	8.46	3.21	19.86	1.53	0.932
32	9.	3.75	19.88	1.515	0.923
33	9.48	4.23	19.89	1.502	0.9152
34	10.08	4.83	19.9	1.49	0.9079
35	10.68	5.43	19.92	1.475	0.8986
36	11.28	6.03	19.93	1.457	0.8877
37	11.94	6.69	19.94	1.446	0.881
38	12.66	7.41	19.96	1.432	0.8724
39	13.44	8.19	19.97	1.418	0.8639
40	14.22	8.97	19.99	1.404	0.8558
41	15.06	9.81	20.	1.389	0.8465
42	15.96	10.71	20.02	1.374	0.8374
43	16.92	11.67	20.03	1.357	0.827
44	17.88	12.63	20.05	1.342	0.8176
45	18.96	13.71	20.07	1.323	0.8063

Quick Pantry # 19

46	20.1	14.85	20.09	1.304	0.7943
47	21.3	16.05	20.1	1.286	0.7834
48	22.56	17.31	20.13	1.264	0.7704
49	23.88	18.63	20.14	1.247	0.7595
50	25.32	20.07	20.17	1.224	0.746
51	26.82	21.57	20.19	1.204	0.7336
52	28.38	23.13	20.21	1.184	0.7212
53	30.06	24.81	20.23	1.16	0.7069
54	31.86	26.61	20.25	1.138	0.6932
55	33.72	28.47	20.28	1.113	0.6784
56	35.76	30.51	20.3	1.087	0.6623
57	37.86	32.61	20.33	1.063	0.6478
58	40.08	34.83	20.35	1.038	0.6322
59	42.48	37.23	20.38	1.01	0.6154
60	45.	39.75	20.41	0.9806	0.5975
61	47.64	42.39	20.44	0.9538	0.5812
62	50.46	45.21	20.46	0.9258	0.5641
63	53.46	48.21	20.49	0.8962	0.5461
64	56.64	51.39	20.52	0.8691	0.5295
65	60.	54.75	20.55	0.8377	0.5104
66	63.6	58.35	20.58	0.8064	0.4913
67	67.2	61.95	20.61	0.7776	0.4738
68	71.4	66.15	20.65	0.7449	0.4539
69	75.6	70.35	20.67	0.7155	0.4359
70	79.8	74.55	20.71	0.6832	0.4163
71	84.6	79.35	20.74	0.6501	0.3961
72	90.	84.75	20.77	0.6158	0.3752
73	94.8	89.55	20.8	0.5864	0.3573
74	100.8	95.55	20.84	0.5547	0.338
75	106.8	101.6	20.87	0.524	0.3193
76	112.8	107.5	20.9	0.493	0.3004
77	119.4	114.2	20.93	0.4628	0.282
78	126.6	121.3	20.95	0.4357	0.2655
79	134.4	129.2	20.99	0.4048	0.2466
80	142.2	137.	21.01	0.3785	0.2306
81	150.6	145.3	21.04	0.3519	0.2144
82	159.6	154.4	21.06	0.3256	0.1984
83	169.2	164.	21.09	0.3016	0.1838
84	178.8	173.6	21.11	0.2799	0.1705
85	189.6	184.3	21.13	0.2586	0.1576
86	201.	195.7	21.15	0.2369	0.1443
87	213.	207.8	21.17	0.2181	0.1329
88	225.6	220.3	21.19	0.1972	0.1202
89	238.8	233.5	21.21	0.1813	0.1105
90	253.2	248.	21.22	0.165	0.1006
91	268.2	263.	21.24	0.1495	9.11e-002
92	283.8	278.6	21.25	0.1353	8.246e-002
93	300.6	295.3	21.27	0.1226	7.469e-002
94	318.6	313.3	21.28	0.1123	6.843e-002
95	337.2	331.9	21.29	0.1009	6.151e-002
96	357.6	352.3	21.3	9.047e-002	5.512e-002
97	378.6	373.3	21.31	8.357e-002	5.092e-002
98	400.8	395.6	21.32	7.448e-002	4.538e-002
99	424.8	419.6	21.32	6.949e-002	4.234e-002
100	450.	444.8	21.33	6.355e-002	3.872e-002
101	476.4	471.2	21.33	5.589e-002	3.405e-002
102	504.6	499.3	21.34	5.213e-002	3.176e-002
103	534.6	529.3	21.34	4.872e-002	2.969e-002
104	566.4	561.2	21.35	4.341e-002	2.645e-002
105	600.	594.8	21.35	4.118e-002	2.509e-002
106	636.	630.8	21.35	3.909e-002	2.382e-002
107	672.	666.8	21.35	3.507e-002	2.137e-002
108	714.	708.8	21.36	2.757e-002	1.68e-002
109	756.	750.8	21.36	2.803e-002	1.708e-002
110	798.	792.7	21.36	2.639e-002	1.608e-002
111	846.	840.7	21.37	2.159e-002	1.315e-002
112	900.	894.7	21.38	1.384e-002	8.433e-003
113	948.	942.8	21.38	1.474e-002	8.981e-003
114	1008	1003	21.38	1.19e-002	7.251e-003
115	1068	1063	21.38	1.179e-002	7.184e-003
116	1128	1123	21.39	4.63e-003	2.821e-003

Quick Pantry # 19

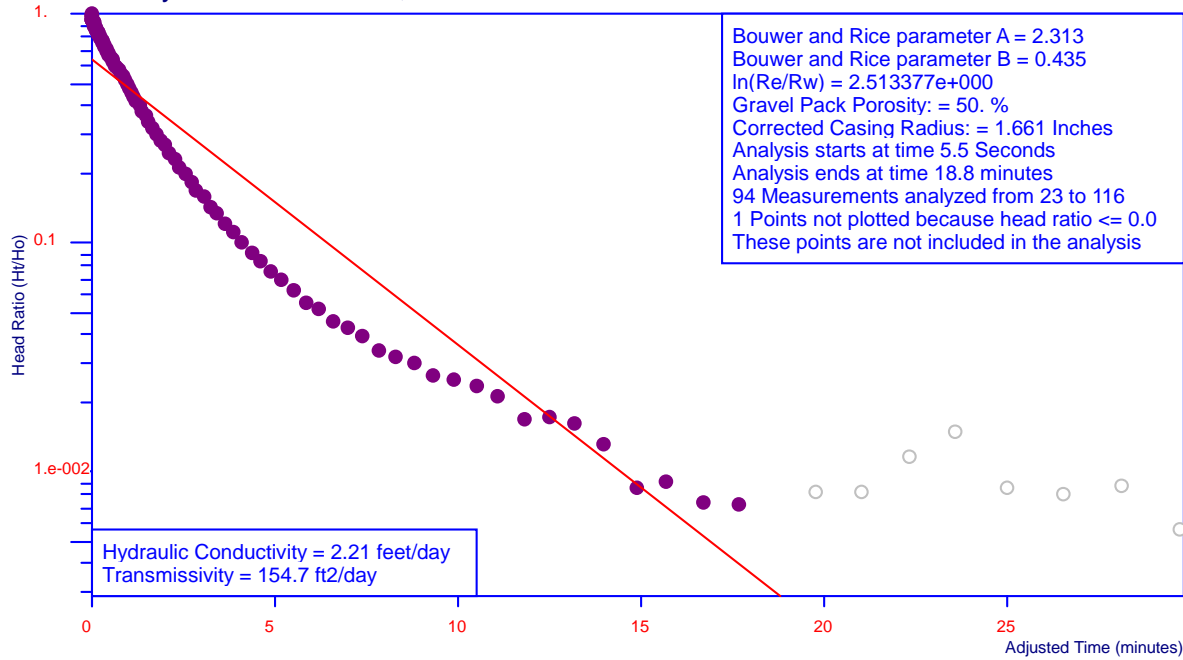
117	1194	1189	21.38	1.328e-002	8.092e-003
118	1266	1261	21.38	1.345e-002	8.195e-003
119	1344	1339	21.37	1.887e-002	1.15e-002
120	1422	1417	21.37	2.445e-002	1.49e-002
121	1506	1501	21.38	1.391e-002	8.475e-003
122	1596	1591	21.38	1.301e-002	7.927e-003
123	1692	1687	21.38	1.432e-002	8.725e-003
124	1788	1783	21.38	9.22e-003	5.618e-003

DW-1 Slug Test 9/2/21

Bouwer and Rice Graph

Quick Pantry # 19 Greenwood, SC

DW-1



Project Number: 21547 for GPM Southeast
Analysis by Starpoint Software

Ho is 1.627 feet at 5.5 Seconds

DW-2 Slug Test

Site Name: Quick Pantry # 19
 Location: Greenwood, SC
 Test Date: 9/2/21
 Client: GPM Southeast
 Project Number: 21547
 Import File: Z:\21547 Quick Pantry # 19\Tier II Work Plan\DW-2.txt

Well Label: DW-2
 Aquifer Thickness: 70. feet
 Screen Length: 5. feet
 Casing Radius: 1. Inches
 Effective Radius: 2.125 Inches
 Gravel Pack Porosity: 50. %
 Corrected Casing Radius: 1.661 Inches
 Static Water Level: 28.87 feet
 Water Table to Screen Bottom: 28.87 feet
 Anisotropy Ratio: 1.
 Time Adjustment: 3.751 Seconds

Test starts with trial 15

There are 119 time and drawdown measurements

Maximum head is 3.021 feet

Minimum head is -4.42e-003 feet

Trial	Time (Seconds)	Adjusted Time (Seconds)	Drawdown (feet)	Head (feet)	Head Ratio
1	0.	-3.751	28.74	0.1277	4.225e-002
2	0.251	-3.5	28.74	0.1305	4.318e-002
3	0.501	-3.25	28.75	0.1227	4.06e-002
4	0.751	-3.	28.74	0.1262	4.178e-002
5	1.001	-2.75	28.74	0.1253	4.148e-002
6	1.251	-2.5	28.74	0.1313	4.347e-002
7	1.501	-2.25	28.75	0.1183	3.915e-002
8	1.751	-2.	28.75	0.123	4.07e-002
9	2.001	-1.75	28.74	0.1265	4.187e-002
10	2.251	-1.5	28.75	0.12	3.973e-002
11	2.501	-1.25	28.76	0.114	3.772e-002
12	2.751	-1.	28.76	0.1128	3.733e-002
13	3.001	-0.75	28.76	0.1149	3.802e-002
14	3.251	-0.5	28.75	0.1209	4.e-002
15	3.501	-0.25	28.44	0.4331	0.1433
16	3.751	0.	25.85	3.021	1.
17	4.001	0.25	27.5	1.37	0.4533
18	4.251	0.5	27.2	1.668	0.552
19	4.501	0.75	27.2	1.669	0.5524
20	4.751	1.	27.25	1.621	0.5366
21	5.001	1.25	27.24	1.627	0.5384
22	5.251	1.5	27.25	1.617	0.5352
23	5.501	1.75	27.27	1.598	0.5288
24	5.751	2.	27.27	1.6	0.5294
25	6.001	2.25	27.27	1.596	0.5281
26	6.361	2.61	27.29	1.582	0.5235
27	6.721	2.97	27.29	1.576	0.5216
28	7.141	3.39	27.3	1.567	0.5186
29	7.561	3.81	27.31	1.56	0.5164
30	7.981	4.23	27.32	1.553	0.5141
31	8.461	4.71	27.33	1.544	0.5111
32	9.001	5.25	27.33	1.538	0.5089
33	9.481	5.73	27.34	1.53	0.5065
34	10.08	6.33	27.35	1.522	0.5037
35	10.68	6.93	27.36	1.514	0.5012
36	11.28	7.53	27.36	1.507	0.4987
37	11.94	8.19	27.37	1.499	0.496
38	12.66	8.91	27.38	1.491	0.4935
39	13.44	9.69	27.39	1.482	0.4904
40	14.22	10.47	27.4	1.473	0.4876
41	15.06	11.31	27.41	1.463	0.4843
42	15.96	12.21	27.41	1.456	0.4817
43	16.92	13.17	27.43	1.444	0.4779
44	17.88	14.13	27.44	1.434	0.4745
45	18.96	15.21	27.45	1.423	0.4711

Quick Pantry # 19

46	20.1	16.35	27.46	1.413	0.4676
47	21.3	17.55	27.47	1.401	0.4637
48	22.56	18.81	27.48	1.39	0.4601
49	23.88	20.13	27.49	1.378	0.456
50	25.32	21.57	27.5	1.366	0.4522
51	26.82	23.07	27.52	1.354	0.448
52	28.38	24.63	27.53	1.34	0.4434
53	30.06	26.31	27.54	1.326	0.4388
54	31.86	28.11	27.56	1.312	0.4342
55	33.72	29.97	27.57	1.299	0.4299
56	35.76	32.01	27.59	1.284	0.4249
57	37.86	34.11	27.6	1.266	0.4192
58	40.08	36.33	27.62	1.25	0.4136
59	42.48	38.73	27.64	1.234	0.4083
60	45.	41.25	27.65	1.217	0.4027
61	47.64	43.89	27.67	1.198	0.3965
62	50.46	46.71	27.69	1.179	0.3902
63	53.46	49.71	27.71	1.159	0.3837
64	56.64	52.89	27.73	1.139	0.3769
65	60.	56.25	27.75	1.119	0.3703
66	63.6	59.85	27.77	1.097	0.3631
67	67.2	63.45	27.79	1.075	0.3559
68	71.4	67.65	27.82	1.052	0.3482
69	75.6	71.85	27.84	1.028	0.3403
70	79.8	76.05	27.87	1.005	0.3325
71	84.6	80.85	27.89	0.9803	0.3244
72	90.	86.25	27.92	0.9517	0.315
73	94.8	91.05	27.94	0.9276	0.307
74	100.8	97.05	27.97	0.8992	0.2976
75	106.8	103.1	28.	0.8711	0.2883
76	112.8	109.1	28.03	0.8445	0.2795
77	119.4	115.7	28.05	0.8159	0.27
78	126.6	122.9	28.08	0.7865	0.2603
79	134.4	130.7	28.11	0.7553	0.25
80	142.2	138.5	28.15	0.7243	0.2397
81	150.6	146.9	28.18	0.6943	0.2298
82	159.6	155.9	28.21	0.6614	0.2189
83	169.2	165.5	28.24	0.6313	0.2089
84	178.8	175.1	28.27	0.5993	0.1983
85	189.6	185.9	28.3	0.5691	0.1883
86	201.	197.3	28.33	0.5356	0.1773
87	213.	209.3	28.37	0.5046	0.167
88	225.6	221.9	28.4	0.4722	0.1563
89	238.8	235.1	28.43	0.4419	0.1462
90	253.2	249.5	28.46	0.4092	0.1354
91	268.2	264.5	28.49	0.3795	0.1256
92	283.8	280.1	28.52	0.3484	0.1153
93	300.6	296.9	28.55	0.3198	0.1058
94	318.6	314.9	28.58	0.2911	9.634e-002
95	337.2	333.5	28.61	0.2639	8.735e-002
96	357.6	353.9	28.63	0.2363	7.819e-002
97	378.6	374.9	28.66	0.2107	6.973e-002
98	400.8	397.1	28.68	0.1881	6.226e-002
99	424.8	421.1	28.71	0.1638	5.42e-002
100	450.	446.3	28.73	0.1428	4.726e-002
101	476.4	472.7	28.75	0.1233	4.082e-002
102	504.6	500.9	28.76	0.1055	3.491e-002
103	534.6	530.9	28.78	8.984e-002	2.973e-002
104	566.4	562.7	28.79	7.591e-002	2.512e-002
105	600.	596.2	28.81	6.381e-002	2.112e-002
106	636.	632.2	28.82	5.032e-002	1.665e-002
107	672.	668.2	28.83	4.38e-002	1.45e-002
108	714.	710.2	28.84	3.411e-002	1.129e-002
109	756.	752.2	28.84	2.639e-002	8.734e-003
110	798.	794.2	28.85	2.079e-002	6.881e-003
111	846.	842.2	28.86	1.368e-002	4.528e-003
112	900.	896.2	28.86	1.075e-002	3.558e-003
113	948.	944.2	28.86	7.25e-003	2.4e-003
114	1008	1004	28.87	4.07e-003	1.347e-003
115	1068	1064	28.87	2.01e-003	6.652e-004
116	1128	1124	28.87	5.e-004	1.655e-004

Quick Pantry # 19

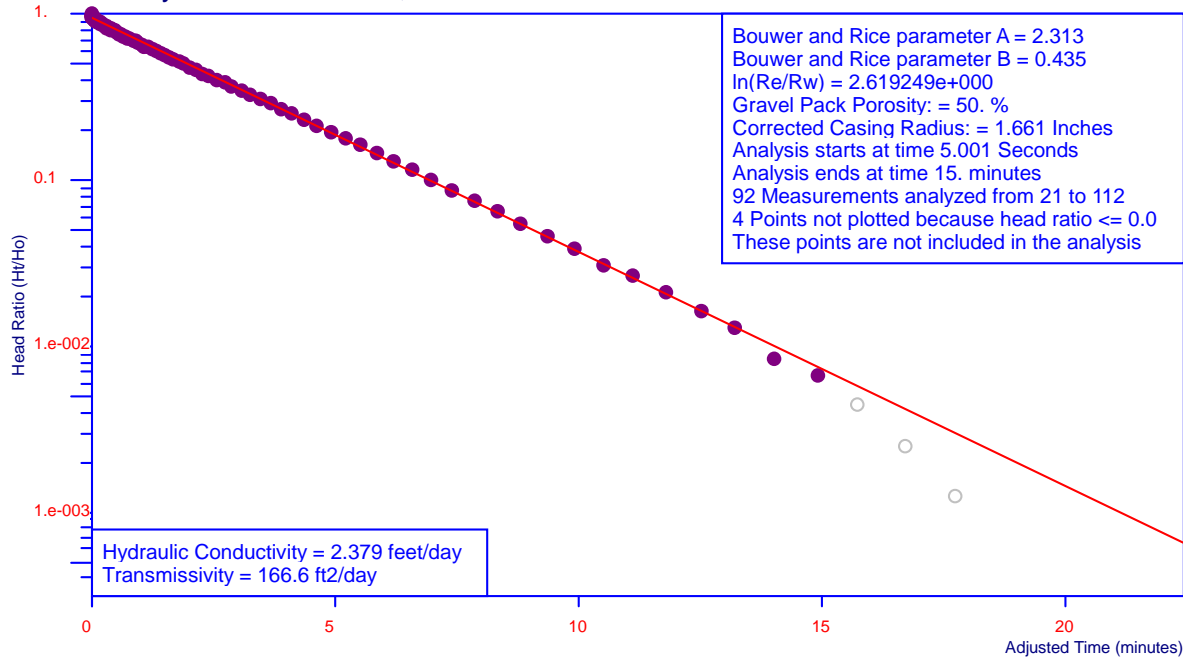
117	1194	1190	28.87	-2.5e-003	-8.274e-004
118	1266	1262	28.87	-3.89e-003	-1.287e-003
119	1344	1340	28.87	-4.42e-003	-1.463e-003

DW-2 Slug Test 9/2/21

Bouwer and Rice Graph

Quick Pantry # 19 Greenwood, SC

DW-2



Bouwer and Rice parameter A = 2.313
Bouwer and Rice parameter B = 0.435
 $\ln(R_e/R_w) = 2.619249e+000$
Gravel Pack Porosity: = 50. %
Corrected Casing Radius: = 1.661 Inches
Analysis starts at time 5.001 Seconds
Analysis ends at time 15. minutes
92 Measurements analyzed from 21 to 112
4 Points not plotted because head ratio ≤ 0.0
These points are not included in the analysis

Hydraulic Conductivity = 2.379 feet/day
Transmissivity = 166.6 ft²/day

Project Number: 21547 for GPM Southeast
Analysis by Starpoint Software

H_o is 1.627 feet at 5.001 Seconds

TABLE 2
Historical Groundwater Data (feet)
Quick Pantry # 19
Greenwood, SC

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	GW Elevation
MW-1	8/25/21	623.56	X-28.5	17.06	17.75	FP
	9/1/21			17.35	18.02	FP
MW-2	8/25/21	623.38	10-20	17.03	18.36	FP
	9/1/21			17.32	18.51	FP
MW-3	8/25/21	625.10	10-20	18.31	18.35	FP
	9/1/21			18.51	18.56	FP
MW-4	8/25/21	623.30	10-20	16.98	18.98	FP
	9/1/21			17.18	19.19	FP
MW-5	8/25/21	622.12	10-20	15.27	17.73	FP
	9/1/21			15.38	17.92	FP
MW-6	8/25/21	622.84	10-20	--	14.35	608.49
	9/1/21			--	14.49	608.35
MW-7	8/25/21	614.92	8-18	11.45	11.92	FP
	9/1/21			11.59	11.87	FP
MW-8	8/25/21	615.10	5-15	10.45	13.53	FP
	9/1/21			10.63	13.89	FP
MW-9	8/25/21	615.58	7.5-17.5	11.03	11.09	FP
	9/1/21			11.32	11.36	FP
MW-10	8/25/21	608.68	2-12	--	3.62	605.06
	9/1/21			--	4.08	604.60
MW-11	8/25/21	606.78	4-14	--	6.76	600.02
	9/1/21			--	7.06	599.72
MW-12	8/25/21	611.62	7-17	10.30	10.49	FP
	9/1/21			10.39	10.95	FP
MW-13	8/25/21	610.45	5-15	7.91	11.18	FP
	9/1/21			8.08	11.22	FP
MW-14	8/25/21	608.36	5-15	8.01	10.38	FP
	9/1/21			8.07	10.32	FP
MW-15	9/1/21	610.20	5-15	--	7.89	602.31
MW-16	9/1/21	605.95	5-15	--	7.78	598.17
MW-17	8/25/21	601.53	3-13	3.78	3.81	FP
	9/1/21			3.94	3.99	FP
MW-18	8/25/21	604.03	4-14	6.27	6.31	FP
	9/1/21			6.37	6.42	FP
MW-19	9/1/21	605.81	5-15	--	9.07	596.74
MW-20	9/1/21	601.51	3-13	--	5.41	596.10

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	GW Elevation
MW-21	9/1/21	604.50	5-15	--	8.91	595.59
MW-22	9/1/21	600.57	5-15	--	8.81	591.76
MW-23	9/1/21	602.51	5-15	--	10.71	591.80
MW-24	9/1/21	602.73	5-15	--	11.05	591.68
MW-25	8/25/21	606.98	6-16	--	8.23	598.75
	9/1/21			--	8.31	598.67
RW-1	9/1/21	624.54	10-20	18.35	19.22	FP
RW-2	9/1/21	623.44	10-20	17.27	18.12	FP
RW-3	9/1/21	623.34	10-20	17.48	18.25	FP
DW-1	9/1/21	624.84	40-45	--	18.87	605.97
DW-2	9/1/21	611.79	35-40	--	9.46	602.33
DW-3	9/1/21	610.33	35-40	--	8.69	601.64
DW-4	9/1/21	602.27	20-25	--	10.47	591.80

APPENDIX G

Disposal Manifest

GREENVILLE COUNTY SOLID WASTE
TWIN CHIMNEYS LANDFILL
11075 Augusta Road
Honea Path, SC 29654

Weighed: Nick
Deposit: Nick
BILL TO: 466
Petra-Tech Environmental LLC
2435 E. North St Suite 1108-202
Greenville SC 29615

Vehicle ID:
Reference: SW00224
Grid: CLASS 3-4
PO#: PETRA-TECH ENVIRONMENTAL
Job Name: BLACK TK

Origin: GREENVILLE COUNTY
DATE IN: 08/18/2021 TIME IN: 15:54:07
DATE OUT: 08/18/2021 TIME OUT: 16:11:34

INBOUND TICKET Number: 04-00630463

SCALE 2 GROSS WT. 20000 LB
SCALE 7 TARE WT. 11820 LB
NET WEIGHT 8180 LB

Qty	Description	Amount
4.09	Dirt Disposal	

TICKET AMOUNT:

X

Please print or type
(Font designed for use on electronic manifest)

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

04-00630463

5. Generator's Name and Mailing Address

Petra-Tech Environmental, LLC (Agent)
2435 E. North St, Ste 1108-202, Greenville, SC

Generator's Site Address (if different than mailing address)

Quick Pantry 19 - UST 04785
1802 S. Main St, Greenwood, SC

Generator's Phone: 864.631.2490

6. Transporter 1 Company Name

Petra-Tech Environmental, LLC

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

Twin Chimneys Landfill
11075 Augusta Rd

U.S. EPA ID Number

*231001-1102

Facility's Phone: 864.243.9672 Honea Path, SC 29654

9. Waste Shipping Name and Description

1 Non Haz / Non Regulated Soil Cuttings
waste Profile #231001-1102

10. Containers

No.

Type

11. Total Quantity

12. Unit
Wt/Vol.

1

Dump
Trailer

4.09

Tons

2.

Quick Pantry 19 - UST 04785

see right
ticket

3.

4.

13. Special Handling Instructions and Additional Information

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeror's Printed/Typed Name

Petra-Tech Env (Agent)

Signature

Month Day Year
8 | 18 | 21

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Petra-Tech Environmental, LLC

Signature

Month Day Year
8 | 18 | 21

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator. Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Twin Chimneys Landfill

Signature

Month Day Year
8 | 18 | 21

GENERATOR

INTL

TRANSPORTER

DESIGNATED FACILITY



Solid Waste Division

Marcia L. Papin
Solid Waste Manager
Mpapin@greenvillecounty.org

(864) 243-9672

www.greenvillecounty.org

Expiration Date: April 10, 2023

Petra-Tech Environmental
Attn: Lindsey Grooms
2435 E. North Street
Suite 1108-202
Greenville South Carolina 29614

RE: Disposal Requirements for Drill Cuttings at Twin Chimneys Landfill - Facility ID #231001-1102

Mr. Grooms:

This office has determined that drill cuttings are suitable for disposal in the Twin Chimneys Landfill in Greenville County. I have received and reviewed your analytical data. Please have your hauler reference the special waste identification number SW-00065 when disposing of this material. The materials for disposal are as outlined:

Reddish brown, dry soil

All disposals are subject to the following conditions:


1. May be brought to the landfill during the hours of 7:30 a.m. to 3:00 p. m., Monday through Friday.
2. Waste must be in solid form. No liquid or hazardous waste will be accepted.
3. Precautions must be taken to prevent leaking or spillage during transport.
4. Special handling waste must be brought in separately from other waste. Otherwise, the entire load will be charged at a special handling rate,

5. Drums must be triple rinsed, with holes punched in them. Lids must be removed prior to disposal.
6. The driver must notify the weigh master of the waste origin and the type of waste in the load.
7. All waste approved by this letter must come into the Twin Chimneys Landfill; otherwise, this letter becomes null and void.
8. The current charge will be . . . per ton. Rates are subject to change by ordinance of County Council. If you or your haulers are not on the charge system, you must pay at the gate with cash or a company check.
9. This letter will run for FIVE YEARS ONLY.
10. Violations of any of the conditions in this approval will result in immediate termination of this approval by the Solid Waste Division.
11. Disposal must not have adverse effects upon the landfill proper, nor upon the safe and efficient operation of the landfill.
12. All containers deemed empty and landfilled will conform to the Solid Waste Division's definition of empty.

THERE SHALL BE NO EXCEPTIONS TO THIS POLICY

If you have any questions concerning this approval, please do not hesitate to contact this office at (864) 243-9672.

Sincerely,


Marcia Papin
Solid Waste Manager

cc: File

GREENVILLE COUNTY SOLID WASTE
TWIN CHIMNEYS LANDFILL
11075 Augusta Road
Honea Path, SC 29654

Weighed: Nick
Deposit: Nick
BILL TO: 466
Petra-Tech Environmental LLC
2435 E. North St Suite 1108-202
Greenville SC 29615

Vehicle ID:
Reference: SW00224
Grid: CLASS 3-4
PO#: PETRA-TECH ENVIRONMENTAL

Origin: GREENVILLE COUNTY
DATE IN: 08/20/2021 TIME IN: 09:53:07
DATE OUT: 08/20/2021 TIME OUT: 10:03:57

INBOUND TICKET Number: 04-00630691

SCALE 2 GROSS WT.	21360 LB
SCALE 7 TARE WT.	14320 LB
NET WEIGHT	7040 LB

Qty	Description	Amount
	3.52 Dirt Disposal	
	TICKET AMOUNT:	

X _____

Please print or type
(Form designed for use on electronic filing system)

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

04-00630691

5. Generator's Name and Mailing Address

Petra-Tech Environmental, LLC (Agent)
2435 E. North St, Ste 1108-202, Greenville, SC

Generator's Site Address (if different than mailing address)

1802 S. Main St
Greenwood, SC

Generator's Phone: 864.631.2490

6. Transporter 1 Company Name

Petra-Tech Environmental, LLC

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

Twin Chimneys Landfill
11075 Augusta Rd

U.S. EPA ID Number

Facility's Phone: 864.243.9672 Honea Path, SC 29654

*231001-1102

9. Waste Shipping Name and Description

1. Non Haz / Non Regulated Soil Cuttings
waste Profile #231001-1102

10. Containers

No.

Type

11. Total
Quantity

12. Unit
Wt./Vol.

1

Dump
Trailer

3.52

Tons

2. Quick Pantry 19 - UST 04785
Greenwood, SC

3.

4.

13. Special Handling Instructions and Additional Information

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeror's Printed/Typed Name

Petra-Tech Env (Agent)

Signature

Month Day Year

8 | 20 | 21

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Petra-Tech Environmental, LLC

Signature

Month Day Year

8 | 20 | 21

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Twin Chimneys Landfill

Signature

Month Day Year

8 | 20 | 21



Solid Waste Division

Marcia L. Papin
Solid Waste Manager
Mpapin@greenvillecounty.org

(864) 243-9672

www.greenvillecounty.org

Expiration Date: April 10, 2023

Petra-Tech Environmental
Attn: Lindsey Grooms
2435 E. North Street
Suite 1108-202
Greenville South Carolina 29614

RE: Disposal Requirements for Drill Cuttings at Twin Chimneys Landfill – Facility ID #231001-1102

Mr. Grooms:

This office has determined that drill cuttings are suitable for disposal in the Twin Chimneys Landfill in Greenville County. I have received and reviewed your analytical data. Please have your hauler reference the special waste identification number SW-00065 when disposing of this material. The materials for disposal are as outlined:

Reddish brown, dry soil

All disposals are subject to the following conditions:


1. May be brought to the landfill during the hours of 7:30 a.m. to 3:00 p. m., Monday through Friday.
2. Waste must be in solid form. No liquid or hazardous waste will be accepted.
3. Precautions must be taken to prevent leaking or spillage during transport.
4. Special handling waste must be brought in separately from other waste. Otherwise, the entire load will be charged at a special handling rate,

5. Drums must be triple rinsed, with holes punched in them. Lids must be removed prior to disposal.
6. The driver must notify the weigh master of the waste origin and the type of waste in the load.
7. All waste approved by this letter must come into the Twin Chimneys Landfill; otherwise, this letter becomes null and void.
8. The current charge will be . . . per ton. Rates are subject to change by ordinance of County Council. If you or your haulers are not on the charge system, you must pay at the gate with cash or a company check.
9. This letter will run for FIVE YEARS ONLY.
10. Violations of any of the conditions in this approval will result in immediate termination of this approval by the Solid Waste Division.
11. Disposal must not have adverse effects upon the landfill proper, nor upon the safe and efficient operation of the landfill.
12. All containers deemed empty and landfilled will conform to the Solid Waste Division's definition of empty.

THERE SHALL BE NO EXCEPTIONS TO THIS POLICY

If you have any questions concerning this approval, please do not hesitate to contact this office at (864) 243-9672.

Sincerely,


Marcia Papin
Solid Waste Manager

cc: File

JS82521B Petroleum Contact Water Disposal Volumes Spreadsheet

Site Name	Location	UST Permit #	Description	Volume (gallons)
1) City Foods	Darlington Cnty, SC	02751	Purge Water	55
2) Quick Pantry 19	Greenwood Cnty, SC	04785	Purge Water / Decon Water / Drilling Fluids / Development Water	375
3) Firmr Corner Mart 1	Greenville Cnty, SC	04246	AFVR Water	535
4) Chesnee Service Center	Spartanburg Cnty, SC	08616	Purge Water	55
5) Pickens Operations Center	Pickens Cnty, SC	15797	Purge Water / Decon Water / Development Water	40
6)				
7)				
8)				
9)				
10)				
11)				
12)				
13)				
14)				
15)				
			Total Disposal Volume	1060

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

JS 82521 B

5. Generator's Name and Mailing Address

Patra-tech

Generator's Site Address (if different than mailing address)

15 Sulphur Springs Rd
Greenville, SC 29617

6035 E Wade Hampton Blvd
Taylors SC 29687

Various VST Reg. Sites

Generator's Phone:

6. Transporter 1 Company Name

Blue Frog Reclamation

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

Blue Frog Reclamation
15 Sulphur Springs Rd.
Greenville, SC 29617

U.S. EPA ID Number

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. Non Hazardous Non Regulated PCW

No. Type

3,200 gal

Per State ticket
1,060 gal

2. see spreadsheet

3.

4.

13. Special Handling Instructions and Additional Information

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offero's Printed/Typed Name

Signature

Month Day Year
8 25 21

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year
8 25 21

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

3. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Lawren Yockel

Signature

Lawren Yockel

Month Day Year
8 25 21

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

JS82521B

5. Generator's Name and Mailing Address:

15 Sulphur Springs Rd.
Greenville, SC 29617

Generator's Site Address (if different than mailing address)

Generator's Phone:

6. Transporter 1 Company Name

Blue Frog Reclamation

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

Waste Recovery Services

305 S. Main St

Mauldin, SC 29662

U.S. EPA ID Number

Facility's Phone:

9. Waste Shipping Name and Description

1. Non Hazardous Non Regulated PCW Profiles 18391

10. Containers

No. Type

11. Total Quantity

12. Unit Wt./Vol.

2,200 gal

Per 5 (ale) HAZOP
1,060 gal

GENERATOR

13. Special Handling Instructions and Additional Information

#18391

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offeor's Printed/Typed Name

Signature

Month Day Year
8 25 21

INTL

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

17b. Alternate Facility (or Generator)

Manifest Reference Number:

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

116371

SCALE TICKET

08/25/2021	01:43PM
Progressive	12400
RCD I.D.	27609
Inbound weight	43940 lb

08/25/2021	02:28PM
Progressive	12407
RCD I.D.	27609
Gross	43940 lb
Tare	35100 lb
Net	8840 lb

Scale Company: W&S

Weighed By: TD

Carrier: Blue Frog

Customer: Elabo

PO/BOL/Manifest 382521B

Tractor Number: 10

Trailer Number: 1A

Driver Signature: _____

WHITE - Driver YELLOW - Driver CARD - Scale

**NON-HAZARDOUS
WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

5. Generator's Name and Mailing Address

Mike Patey/Buchan Mater
311 Oakmonte Circle
Greenwood, SC 29649

Generator's Site Address (if different than mailing address)

Quick Pantry 19
1802 South Main St.
Greenwood, SC

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

KLM Environmental LLC

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

US Water Recovery
511 Old Mt. Holly, Goose Creek, SC

U.S. EPA ID Number

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. Purge water Quick Pantry 19
on hold pending minimum disposal amt. of 1,000 gal

48 gal

2.

3.

4.

13. Special Handling Instructions and Additional Information

14. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offoror's Printed/Typed Name

Signature

Month Day Year

Graham Robinson

G.R.

9 3 21

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Graham Robinson

G.R.

9 3 21

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

APPENDIX H

Zoning Information

APPENDIX I

Fate and Transport Modeling

APPENDIX J

Access Agreements



KLM Environmental, LLC

Phase I Phase II Underground Storage Tanks Soil & Water Sampling Well Installation
PO Box 2704 843-870-4285 Phone
Goose Creek, SC 29445 843-797-1893 Fax

May 10, 2021

Greenwood Mills, Inc.
1800 Calhoun Road
Greenwood, SC 29649

Property Manager:

I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your property has been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your property is in close proximity to the target site, and is listed as Parcel ID # 6855-416-278 located at the intersection of Main Street South and Kirksey Drive. This location is currently a vacant lot. Groundwater contaminants have been identified across the intersection from your property. In order to ensure your property is not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination from the Quick Pantry # 19 site. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and she can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your site to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC

Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

Printed Name: Barry Putnam Signature: Barry Putnam

Phone Contact: 864-388-2616

- | | | |
|-----|-----|---|
| Yes | No | |
| () | (x) | Do you have or have you ever had an irrigation well installed on this property? |
| () | (x) | Do you have or have you ever had a drinking supply well installed on this property? |

Not to our knowledge.

21547



KLM Environmental, LLC

Phase I-Phase II Underground Storage Tanks-Soil & Water Sampling-Well Installation
PO Box 2704
Goose Creek, SC 29445
843-870-4285 Phone
843-797-1893 Fax

April 6, 2021

Housing Authority of the City of Greenwood
PO Box 973
Greenwood, SC 29648

Property Manager:

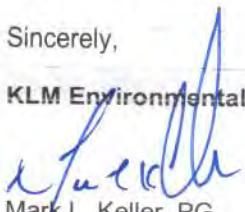
I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your properties have been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your properties are down Foundry Road in close proximity to the target site, and are listed as PIN # 6855555128 and PIN # 6855550186. These are the current locations of a housing project and the John Lamb Community Center, respectively. In order to ensure your properties are not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination currently on the Quick Pantry # 19 property. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and he can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your site to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC


Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

Printed Name: Patrick Prince Signature: 

Phone Contact: 864 993-1562

- | | | |
|-----|-----|---|
| Yes | No | |
| () | (X) | Do you have or have you ever had an irrigation well installed on this property? |
| () | (X) | Do you have or have you ever had a drinking supply well installed on this property? |



KLM Environmental, LLC

Phase I/Phase II Underground Storage Tanks/Soil & Water Sampling/Well Installation
PO Box 2704
Goose Creek, SC 29445
843-870-4285 Phone
843-797-1893 Fax

21547

April 6, 2021

City of Greenwood
PO Box 40
Greenwood, SC 29648

Property Manager:

I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your property has been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your property is in close proximity to the target property and is listed as PIN # 6855515137. In order to ensure your property is not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination currently on the Quick Pantry # 19 property. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and he can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your site to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC

Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

Printed Name: Ryan Thomas Signature: [Handwritten Signature]

Phone Contact: (864) 942-8411 (c) (317) 370-2797

- Yes No
() (x) Do you have or have you ever had an irrigation well installed on this property?
- () (x) Do you have or have you ever had a drinking supply well installed on this property?



KLM Environmental, LLC

Phase I/Phase II Underground Storage Tanks-Soil & Water Sampling-Well Installation
PO Box 2704
Goose Creek, SC 29445
843-870-4285 Phone
843-797-1893 Fax

April 6, 2021

Ansel D. Brewer
PO Box 2038
Greenwood, SC 29646

Property Manager:

I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your properties have been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your properties are across Kirksey Drive W, and are listed as PIN # 6855399207 and PIN # 6855391191. In order to ensure your properties are not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination currently on the Quick Pantry # 19 property. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and he can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your properties to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC

Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

ON 6855-391-191 AND 2 between Power Pole and DRIVE WAY

Printed Name: *D Ansel Brewer* Signature *D Ansel Brewer OK*

Phone Contact: *864-993-1004* *6855-399-207*

- | | | |
|-----|---|---|
| Yes | No | |
| () | (<input checked="" type="checkbox"/>) | Do you have or have you ever had an irrigation well installed on this property? |
| () | (<input checked="" type="checkbox"/>) | Do you have or have you ever had a drinking supply well installed on this property? |



KLM Environmental, LLC

Phase I/Phase II Underground Storage Tanks-Soil & Water Sampling-Well Installation
PO Box 2704
Goose Creek, SC 29445
843-870-4285 Phone
843-797-1893 Fax

April 6, 2021

Darrell L. Smith
6272 Hwy 184 E
Greenwood, SC 29638

Property Manager:

I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your property has been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your property is next door and is listed as PIN # 6855410173. In order to ensure your property is not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination currently on the Quick Pantry # 19 property. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and he can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your site to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC

Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

Printed Name: DARRELL L. SMITH Signature Paul L. Smith

Phone Contact: 864-378-0051

- | | | |
|-----|-----|---|
| Yes | No | |
| () | (X) | Do you have or have you ever had an irrigation well installed on this property? |
| () | (X) | Do you have or have you ever had a drinking supply well installed on this property? |



KLM Environmental, LLC

Phase I-Phase II-Underground Storage Tanks-Soil & Water Sampling-Well Installation
PO Box 2704
Goose Creek, SC 29445
843-870-4285 Phone
843-797-1893 Fax

May 10, 2021

Greenwood County Health Department
528 Monument Street, Room B-03
Greenwood, SC 29646

Property Manager:

I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your property has been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your property is in close proximity to the target site, and is listed as Parcel ID # 6855-393-234 at 1736 Main Street South. This is the current location of the Greenwood Health Department. Groundwater contaminants have been identified near the property line with Brewer Enterprises. In order to ensure your property is not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination from the Quick Pantry # 19 site. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and she can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your site to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC

Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

Printed Name: _____ **Signature** _____

Phone Contact: _____

Yes No
() () Do you have or have you ever had an irrigation well installed on this property?

() () Do you have or have you ever had a drinking supply well installed on this property?



KLM Environmental, LLC

Phase I-Phase II-Underground Storage Tanks-Soil & Water Sampling-Well Installation
PO Box 2704 843-870-4285 Phone
Goose Creek, SC 29445 843-797-1893 Fax

April 6, 2021

Timothy H. Stewart
308 Reflections Dr.
Greenwood, SC 29646

Property Manager:

I am writing to you to inform you that assessment activities to include temporary groundwater screening locations and the installation of monitoring wells on your property has been requested by the South Carolina Department of Health and Environmental Control (SCDHEC) in reference to the Quick Pantry # 19 convenience store located at 1802 Main Street South, Greenwood, SC. Your property is in close proximity to the target property and is listed as PIN # 6855409164. In order to ensure your property is not being affected by any contamination that may be present the SCDHEC needs an assessment performed to determine the extent of identified groundwater contamination currently on the Quick Pantry # 19 property. The points shown on the attached map are only proposed temporary water sample locations. Not all of the locations will be needed as the assessment progresses, locations will be eliminated based on findings in the field. Following the temporary water sample locations, monitoring wells may be requested to be installed at a much lower frequency. The wells will be flush mounted with the ground similar to a water meter cover.

The SCDHEC Project Manager is Ms. Caitlin Reilly and he can be reached at 803-898-3807 should you have any questions regarding the work. The SCDHEC SUPERB Fund and the site owner will pay for all costs of any work performed under the release reported at the site. There is no cost to you for performing this assessment. We are requesting permission to install the temporary water sample points, future requested monitoring wells, and sample periodically to monitor for any contaminants. We would also request permission to collect a sample from any supply well or irrigation well located on your site to ensure it does not contain any contaminants. Please sign where indicated at the bottom of the page and answer the questions as best you can and forward the form back to us in the enclosed envelope.

If you have any questions, you may contact me directly at 843-870-4285.

Sincerely,

KLM Environmental, LLC

Mark L. Keller, PG
President

Please sign below as an indication of permission to install sampling points as the SCDHEC requires.

Printed Name: _____ **Signature** _____

Phone Contact: _____

- | | | |
|------------|-----------|--|
| Yes | No | |
| () | () | Do you have or have you ever had an irrigation well installed on this property? |
| () | () | Do you have or have you ever had a drinking supply well installed on this property? |

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Tuesday, April 20, 2021 12:24 PM
To: MKELLER131@COMCAST.NET
Subject: SC811 2104202402 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2104202402 Old Number:
Notice Type: Normal Created By: mkeller131@comcast.net

Created On: 04/20/21 12:24 PM Update On: 05/12/2021
Locate Date: 04/23/21 11:59 PM Good Through: 05/17/2021
Work Date: 04/23/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM Environmental Duration: 1 week
Work Done For: SC DHEC

County: GREENWOOD Place: GREENWOOD
Street: 1802 MAIN ST S
Intersection: FOUNDRY ROAD
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY // EXTRA INSTRUCTIONS: MARK ENTIRE PROPERTY
ON ALL
SIDES

DIRECTIONS: Site is JR Food Mart. Mart entire property. Will be conducting over 1000 feet of drilling in over 50 locations due to leak from underground tank

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

DISCLAIMERS:

Color Code marking used by SC811 facility members are:
Red - Electric Yellow - Gas Orange - Communication, Telephone, Cable TV Blue - Water Green - Sewer

Member facility operators only mark the underground utility lines they install and maintain. Some utilities on the property are considered private facilities and may not be located. For a list of private locators who can assist please visit <https://www.sc811.com/resources/membership/private-locators/>

By South Carolina state law member operators have 3 full working days excluding the day the ticket is created, weekends and holidays to respond.

You may proceed with your work after all member operators have positively responded. You can check the member responses by contacting SC811 or using our online portal. If you need a portal account, someone at our help desk can assist you.

Once all excavation has been completed you are responsible for closing out your notice. Again, you can contact SC811 or utilize the portal.

Per the 2012 state law 'Tolerance zone' means:

- (a) if the diameter of the facility is known, the distance of one-half of the known diameter plus twenty-four inches on either side of the designated center line;
- (b) if the diameter of the facility is not marked, twenty-four inches on either side of the outside-edge of the mark indicating a facility; or
- (c) for subaqueous facilities, a clearance of fifteen feet on either side of the indicated facility.

When the excavation site cannot be clearly and adequately identified within the area described in the notice, the excavator must designate the route, specific area to be excavated, or both, by pre-marking before the operator performs a locate. Pre-marking must be made with white paint, flags or stakes.

If any damage result from excavation or demolition where the damage results in the escape of any flammable, toxic, or corrosive gas or liquid, or electricity or endangers life, health or property, immediately notify emergency services, including 911, the notification center and the operator, if known.

Remember: If this involves a damage, please contact the facility owner/operator and fill out your damage report on

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If you are not the intended addressee, please notify PUPS/SC811 at (800) 290-2783 press 1 and delete this message.

Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Tuesday, April 20, 2021 12:26 PM
To: MKELLER131@COMCAST.NET
Subject: SC811 2104202415 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2104202415 Old Number:
Notice Type: Normal Created By: mkeller131@comcast.net

Created On: 04/20/21 12:26 PM Update On: 05/12/2021
Locate Date: 04/23/21 11:59 PM Good Through: 05/17/2021
Work Date: 04/23/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM Environmental Duration: 1 week
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 1810 MAIN ST S
Intersection: FOUNDRY RD.
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY // EXTRA INSTRUCTIONS: MARK ENTIRE PROPERTY

DIRECTIONS: Site is Bridgestone Tire/ Palmetto Automotive. Mark entire property

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: DPCZ07
Member Name: Duke Energy - DPCZ07
Locate Contact: Angela Huyck (843) 536-7203
Damage Contact: Duke Power-On (800) 769-3766

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

DISCLAIMERS:

Color Code marking used by SC811 facility members are:
Red - Electric Yellow - Gas Orange - Communication, Telephone, Cable TV Blue - Water Green - Sewer

Member facility operators only mark the underground utility lines they install and maintain.
Some utilities on the property are considered private facilities and may not be located.
For a list of private locators who can assist please visit <https://www.sc811.com/resources/membership/private-locators/>

By South Carolina state law member operators have 3 full working days excluding the day the ticket is created, weekends and holidays to respond.

You may proceed with your work after all member operators have positively responded.
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Once all excavation has been completed you are responsible for closing out your notice. Again, you can contact SC811 or utilize the portal.

Per the 2012 state law 'Tolerance zone' means:

- (a) if the diameter of the facility is known, the distance of one-half of the known diameter plus twenty-four inches on either side of the designated center line;
- (b) if the diameter of the facility is not marked, twenty-four inches on either side of the outside-edge of the mark indicating a facility; or
- (c) for subaqueous facilities, a clearance of fifteen feet on either side of the indicated facility.

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Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Thursday, May 6, 2021 11:26 AM
To: MKELLER131@COMCAST.NET
Subject: SC811 2105061696 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2105061696 Old Number:
Notice Type: Normal Created By: mkeller131@comcast.net

Created On: 05/06/21 11:25 AM Update On: 05/28/2021
Locate Date: 05/12/21 11:59 PM Good Through: 06/03/2021
Work Date: 05/12/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM ENVIRONMENTAL Duration: 3 WEEKS
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 201 FOUNDRY RD
Intersection: TENNESSEE CT.
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE REAR OF THE PROPERTY // EXTRA INSTRUCTIONS: THE AREA BETWEEN
NEW YORK
CT. AND OHIO CT. IN THE OPEN AREA BEHIND THE HOUSES

DIRECTIONS: SITE IS HOUSEING AUTHORITY. INVESTIGATION OF A FUEL LEAK IS BEING PERFORMED.

THIS SITE MAY BE NEEDED TO INVESTIGATE THE EXTENT. PLEASE CONTACT MARK KELLER AT 843-870-4285 TO ADVISE THE MOST LIKELY AREA NEEDED FOR MAKING. THE AREA BETWEEN NEW YORK CT AND OHIO CT HAS A DRAINAGE PIPE THAT IS SUSPECTED IN THE MOVEMENT OF THE LEAK. THIS FIELD AREA IS WHERE MARKING OF UTILITIES WILL BE NEEDED

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

DISCLAIMERS:

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Red - Electric Yellow - Gas Orange - Communication, Telephone, Cable TV Blue - Water Green - Sewer

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Once all excavation has been completed you are responsible for closing out your notice. Again, you can contact SC811 or utilize the portal.

Per the 2012 state law 'Tolerance zone' means:

- (a) if the diameter of the facility is known, the distance of one-half of the known diameter plus twenty-four inches on either side of the designated center line;
- (b) if the diameter of the facility is not marked, twenty-four inches on either side of the outside-edge of the mark indicating a facility; or
- (c) for subaqueous facilities, a clearance of fifteen feet on either side of the indicated facility.

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Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Thursday, May 6, 2021 12:14 PM
To: MKELLER131@COMCAST.NET
Subject: SC811 2105061975 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2105061975 Old Number:
Notice Type: Normal Created By: slp

Created On: 05/06/21 12:13 PM Update On: 05/28/2021
Locate Date: 05/12/21 11:59 PM Good Through: 06/03/2021
Work Date: 05/12/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM ENVIRONMENTAL Duration: 3 WEEKS
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 122 FOUNDRY RD
Intersection: MAIN STREET
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY

DIRECTIONS: SITE IS THE FORMER FOUNDRY PROPERTY AT THE CORNER OF MAIN STREET AND FOUNDRY

ROAD. MARK ENTIRE PROPERTY ALONG FOUNDRY ROAD AND ANY UTILITEIS KNOWN
INTERNAL OF THIS PROPERTY. SOIL DRILLING AND EXCAVATION WORK WILL COMMENCE ON MAY
17TH TO INVESTIGATE THE EXTENT OF A FUEL LEAK

**NOTE TO SC811:
INTERSECTION SHOWS AS MAIN ST S**

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

DISCLAIMERS:

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weekends and holidays to respond.

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Once all excavation has been completed you are responsible for closing out your notice. Again, you can contact SC811 or utilize the portal.

Per the 2012 state law 'Tolerance zone' means:

- (a) if the diameter of the facility is known, the distance of one-half of the known diameter plus twenty-four inches on either side of the designated center line;
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Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Thursday, May 6, 2021 12:20 PM
To: MKELLER131@COMCAST.NET
Subject: SC811 2105062014 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2105062014 Old Number:
Notice Type: Normal Created By: slp

Created On: 05/06/21 12:19 PM Update On: 05/28/2021
Locate Date: 05/12/21 11:59 PM Good Through: 06/03/2021
Work Date: 05/12/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM ENVIRONMENTAL Duration: 3 WEEKS
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 106 KIRKSEY DR E
Intersection: MAIN STREET S
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY

DIRECTIONS: MARK ENTIRE PROPERTY

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

DISCLAIMERS:

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Again, you can contact SC811 or utilize the portal.

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- (b) if the diameter of the facility is not marked, twenty-four inches on either side of the outside-edge of the mark indicating a facility; or
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Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Thursday, May 6, 2021 12:21 PM
To: MKELLER131@COMCAST.NET
Subject: SC811 2105062021 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2105062021 Old Number:
Notice Type: Normal Created By: slp

Created On: 05/06/21 12:20 PM Update On: 05/28/2021
Locate Date: 05/12/21 11:59 PM Good Through: 06/03/2021
Work Date: 05/12/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM ENVIRONMENTAL Duration: 3 WEEKS
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 108 KIRKSEY DR E
Intersection: MIAN STREET S
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY

DIRECTIONS: MARK ENTIRE PROPERTY

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

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Red - Electric Yellow - Gas Orange - Communication, Telephone, Cable TV Blue - Water Green - Sewer

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- (b) if the diameter of the facility is not marked, twenty-four inches on either side of the outside-edge of the mark indicating a facility; or

(c) for subaqueous facilities, a clearance of fifteen feet on either side of the indicated facility.

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Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Thursday, May 6, 2021 12:25 PM
To: MKELLER131@COMCAST.NET
Subject: SC811 2105062048 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2105062048 Old Number:
Notice Type: Normal Created By: slp

Created On: 05/06/21 12:24 PM Update On: 05/28/2021
Locate Date: 05/12/21 11:59 PM Good Through: 06/03/2021
Work Date: 05/12/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM Environmental Duration: 3 weeks
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 104 KIRKSEY DR E
Intersection: MAIN STREET
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY

DIRECTIONS: site is wooded acreage across from JR Food Mart. Site is 16 acres. Known water supply line runs through the middle of the acreage. KLM will be

performing over 300 test borings to find the source and extent of a fuel leak.
Please mark entire property

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

DISCLAIMERS:

Color Code marking used by SC811 facility members are:
Red - Electric Yellow - Gas Orange - Communication, Telephone, Cable TV Blue - Water Green - Sewer

Member facility operators only mark the underground utility lines they install and maintain.
Some utilities on the property are considered private facilities and may not be located.
For a list of private locators who can assist please visit <https://www.sc811.com/resources/membership/private-locators/>

By South Carolina state law member operators have 3 full working days excluding the day the ticket is created, weekends and holidays to respond.

You may proceed with your work after all member operators have positively responded.
You can check the member responses by contacting SC811 or using our online portal.
If you need a portal account, someone at our help desk can assist you.

Once all excavation has been completed you are responsible for closing out your notice. Again, you can contact SC811 or utilize the portal.

Per the 2012 state law 'Tolerance zone' means:

- (a) if the diameter of the facility is known, the distance of one-half of the known diameter plus twenty-four inches on either side of the designated center line;
- (b) if the diameter of the facility is not marked, twenty-four inches on either side of the outside-edge of the mark indicating a facility; or
- (c) for subaqueous facilities, a clearance of fifteen feet on either side of the indicated facility.

When the excavation site cannot be clearly and adequately identified within the area described in the notice, the excavator must designate the route, specific area to be excavated, or both, by pre-marking before the operator performs a locate. Pre-marking must be made with white paint, flags or stakes.

If any damage result from excavation or demolition where the damage results in the escape of any flammable, toxic, or corrosive gas or liquid, or electricity or endangers life, health or property, immediately notify emergency services, including 911, the notification center and the operator, if known.

Remember: If this involves a damage, please contact the facility owner/operator and fill out your damage report on

The information contained in this message may be CONFIDENTIAL and is for the intended addressee only. Any unauthorized use, including copying, review, distribution and disclosure of this information is prohibited.

If you are not the intended addressee, please notify PUPS/SC811 at (800) 290-2783 press 1 and delete this message.

Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

Mark Lee Keller

From: tickets@sc1pups.org
Sent: Thursday, May 6, 2021 11:16 AM
To: MKELLER131@COMCAST.NET
Subject: SC811 2105061634 Normal Ticket

SC811 NOTICE INFORMATION

SC811 Notice Number: 2105061634 Old Number:
Notice Type: Normal Created By: mkeller131@comcast.net

Created On: 05/06/21 11:15 AM Update On: 05/28/2021
Locate Date: 05/12/21 11:59 PM Good Through: 06/03/2021
Work Date: 05/12/21 11:59 PM

CALLER INFORMATION

KLM ENVIRONMENTAL, LLC
PO BOX 2704
GOOSE CREEK, SC 29445
Caller: Mark Keller Phone: (843) 870-4285 Ext:
Caller Email: MKELLER131@COMCAST.NET

SITE CONTACT INFORMATION:

Site Contact Name: Mark Keller Phone: (843) 870-4285 Ext:
Site Contact Email: MKELLER131@COMCAST.NET
CallBack: 8438704285

EXCAVATION INFORMATION:

Work Type: BORING
Work Done By: KLM ENVIRONMENTAL Duration: 3 WEEKS
Work Done For: SCDHEC

County: GREENWOOD Place: GREENWOOD
Street: 112 KIRKSEY DR E
Intersection: MAIN STREET
Subdivision:

Explosives: No | Premark: No | Drilling/Boring: Yes | Near Railroad: No

INSTRUCTIONS: MARK THE ENTIRE PROPERTY

DIRECTIONS: MARK ENTIRE PROPERTY

REMARKS:

MEMBER UTILITIES NOTIFIED:

Member Code: EMBZ11
Member Name: Centurylink formerly Embarq - EMBZ11
Locate Contact: Cal Horton (843) 670-7121
Damage Contact: Not Provided

Member Code: GWC38
Member Name: Greenwood CPW
Locate Contact: ERIC SMITH (864) 377-2132
Damage Contact: None Provided GWC38 (864) 942-8117

Member Code: GMD22
Member Name: Greenwood Metropolitan District
Locate Contact: Not Provided
Damage Contact: Not Provided

Member Code: SGRAZ01
Member Name: Segra Communications - SGRAZ01
Locate Contact: Dewayne Begley (470) 249-5124
Damage Contact: Jim Keesaer (803) 230-1849

Member Code: WFL30
Member Name: WC Fiber, LLC
Locate Contact: BRANDON WILSON (864) 391-6071
Damage Contact: BRANDON WILSON (864) 391-6071

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Remember: If this involves a damage, please contact the facility owner/operator and fill out your damage report on

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Please do not reply to this ticket, questions concerning this locate request contact (888) 721-7877

APPENDIX K

Checklist

Contractor Checklist

For each report submitted to the UST Management Division, the contractor will be required to verify that all data elements for the required scope of work have been provided. For items not required for the scope of work, the N/A box should be checked. For items required and not completed or provided, the No box should be checked and a thorough description of the reason must be provided.

Item #	Item	Yes	No	N/A
1	Is Facility Name, Permit #, and address provided?	✓		
2	Is UST Owner/Operator name, address, & phone number provided?	✓		
3	Is name, address, & phone number of current property owner provided?	✓		
4	Is the DHEC Certified UST Site Rehabilitation Contractor's Name, Address, telephone number, and certification number provided?	✓		
5	Is the name, address, telephone number, and certification number of the well driller that installed borings/monitoring wells provided?	✓		
6	Is the name, address, telephone number, and certification number of the certified laboratory(ies) performing analytical analyses provided?	✓		
7	Has the facility history been summarized?	✓		
8	Has the regional geology and hydrogeology been described?	✓		
9	Are the receptor survey results provided as required?	✓		
10	Has current use of the site and adjacent land been described?	✓		
11	Has the site-specific geology and hydrogeology been described?	✓		
12	Has the primary soil type been described?	✓		
13	Have field screening results been described?	✓		
14	Has a description of the soil sample collection and preservation been detailed?	✓		
15	Has the field screening methodology and procedure been detailed?	✓		
16	Has the monitoring well installation and development dates been provided?	✓		
17	Has the method of well development been detailed?	✓		
18	Has justification been provided for the locations of the monitoring wells?	✓		
19	Have the monitoring wells been labeled in accordance with the UST QAPP guidelines?	✓		
20	Has the groundwater sampling methodology been detailed?	✓		
21	Have the groundwater sampling dates and groundwater measurements been provided?	✓		
22	Has the purging methodology been detailed?	✓		
23	Has the volume of water purged from each well been provided along with measurements to verify that purging is complete?	✓		
24	If free-product is present, has the thickness been provided?	✓		
25	Does the report include a brief discussion of the assessment done and the results?	✓		
26	Does the report include a brief discussion of the aquifer evaluation and results?	✓		
27	Does the report include a brief discussion of the fate & transport models used?			✓

Item #	Item	Yes	No	N/A
28	Are the site-conceptual model tables included? (Tier 1 Risk Evaluation)			✓
29	Have the exposure pathways been analyzed? (Tier 2 Risk Evaluation)			✓
30	Have the SSTLs for each compound and pathway been calculated? (Tier 2 Risk Evaluation)			✓
31	Have recommendations for further action been provided and explained?	✓		
32	Has the soil analytical data for the site been provided in tabular format? (Table 1)	✓		
33	Has the potentiometric data for the site been provided in tabular format? (Table 2)	✓		
34	Has the current and historical laboratory data been provided in tabular format?	✓		
35	Have the aquifer characteristics been provided and summarized on the appropriate form?	✓		
36	Have the Site conceptual model tables been included? (Tier 1 Risk Evaluation)			✓
37	Has the topographic map been provided with all required elements? (Figure 1)	✓		
38	Has the site base map been provided with all required elements? (Figure 2)	✓		
39	Have the CoC site maps been provided? (Figure 3 & Figure 4)	✓		
40	Has the site potentiometric map been provided? (Figure 5)	✓		
41	Have the geologic cross-sections been provided? (Figure 6)	✓		
42	Have maps showing the predicted migration of the CoCs through time been provided? (Tier 2 Risk Evaluation)	✓		
43	Has the site survey been provided and include all necessary elements? (Appendix A)	✓		
44	Have the sampling logs, chain of custody forms, and the analytical data package been included with all required elements? (Appendix B)	✓		
45	Is the laboratory performing the analyses properly certified?	✓		
46	Has the tax map been included with all necessary elements? (Appendix C)	✓		
47	Have the soil boring/field screening logs been provided? (Appendix D)	✓		
48	Have the well completion logs and SCDHEC Form 1903 been provided? (Appendix E)	✓		
49	Have the aquifer evaluation forms, data, graphs, equations, etc. been provided? (Appendix F)	✓		
50	Have the disposal manifests been provided? (Appendix G)	✓		
51	Has a copy of the local zoning regulations been provided? (Appendix H)			✓
52	Has all fate and transport modeling been provided? (Appendix I)			✓
53	Have copies of all access agreements obtained by the contractor been provided? (Appendix J)	✓		
54	Has a copy of this form been attached to the final report and are explanations for any missing or incomplete data been provided?	✓		

Explanation for missing and incomplete information?

From: [Briney, Stephanie M.](#)
To: [Mark Keller](#)
Cc: [Dunn, Robert](#)
Subject: RE: Grain Size
Date: Tuesday, March 1, 2022 4:36:00 PM
Attachments: [image001.png](#)

Okay, thank you for the explanation and that makes sense. I know you all did a lot of work under the Tier II.

Stephanie Briney, Manager
Corrective Action & Field Support Section
Underground Storage Tank Management Division
Bureau of Land and Waste Management
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0595
Cell: (803) 608-0455
Fax: (803)-898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Tuesday, March 1, 2022 3:35 PM
To: Briney, Stephanie M. <brineysm@dhec.sc.gov>
Subject: Re: Grain Size

***** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. *****

No. We had them survey the site after probing was completed or the probe locations would have been lost due to the very large number, the months it took to complete just the probing, overgrowth of the field and woods areas that were cleared by machinery, and a local game where the kids collected our marker flags. We then used their survey to survey the wells in once we had them installed.

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Mar 1, 2022, at 3:06 PM, Briney, Stephanie M. <brineysm@dhec.sc.gov> wrote:

Mark,

Thank you for providing this information so quickly. I noticed on the survey map it does not show the monitoring well locations. Did the surveyors provide you with a separate map for the monitoring wells???

Stephanie Briney, Manager
Corrective Action & Field Support Section
Underground Storage Tank Management Division
Bureau of Land and Waste Management
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0595
Cell: (803) 608-0455
Fax: (803)-898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Tuesday, March 1, 2022 11:55 AM
To: Briney, Stephanie M. <brineysm@dhec.sc.gov>; Dunn, Robert <DUNNRA@dhec.sc.gov>
Subject: Grain Size

***** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. *****

Stephanie and Robert,

Here are the grain size tests. Also attached is the map sent to us by Davis & Floyd with their stamp.

Thanks

Mark

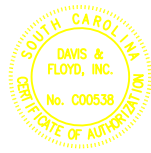
Mark L. Keller, PG
President

 **KLM Environmental, LLC**

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

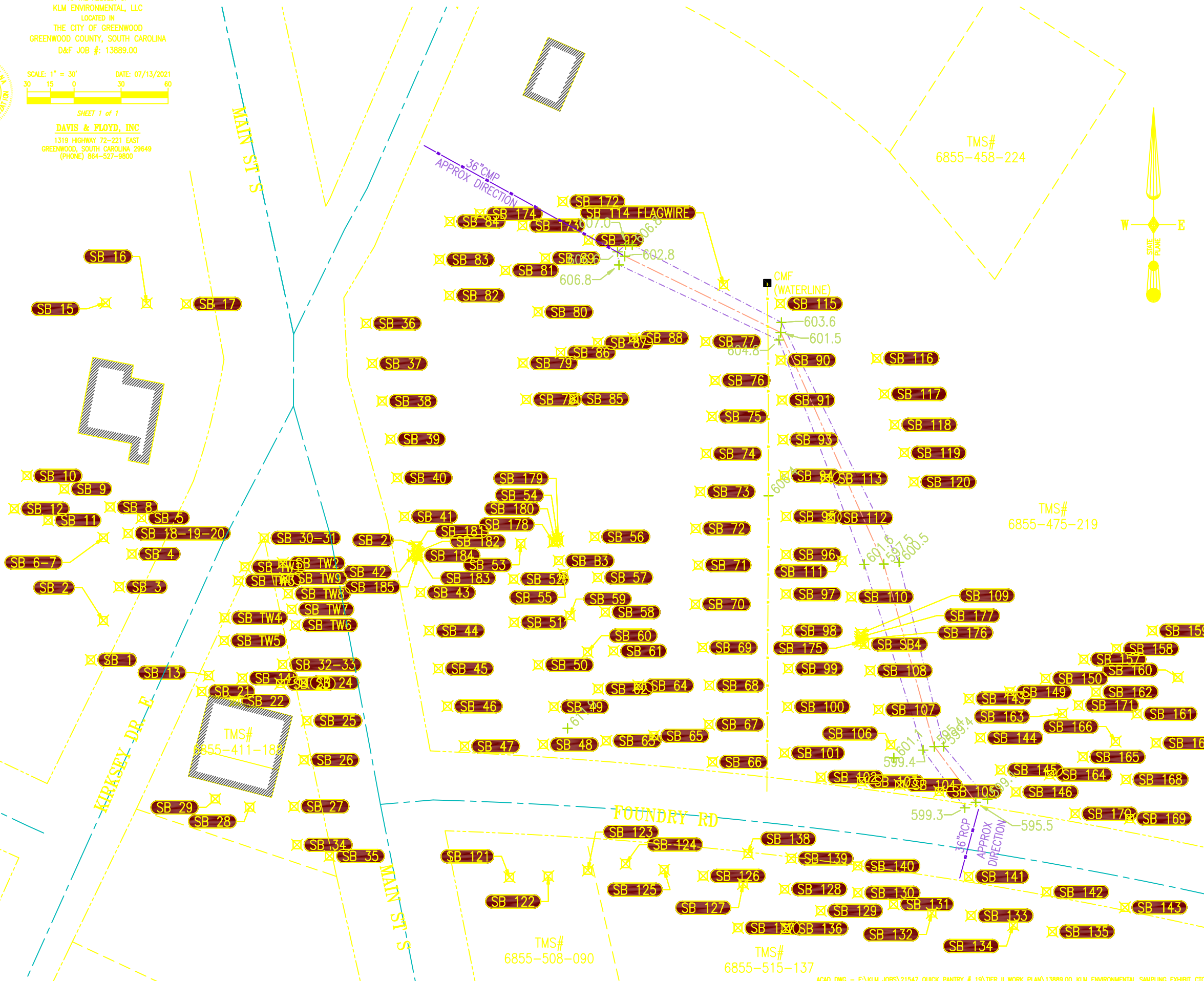
ENVIRONMENTAL SAMPLING EXHIBIT

SHOWING
SOIL BORINGS
ACROSS MULTIPLE PROPERTIES
AT THE REQUEST OF
KLM ENVIRONMENTAL, LLC
LOCATED IN
THE CITY OF GREENWOOD
GREENWOOD COUNTY, SOUTH CAROLINA
D&F JOB #: 13889.00



SHEET 1 of 1

DAVIS & FLOYD, INC.
1319 HIGHWAY 72-221 EAST
GREENWOOD, SOUTH CAROLINA 29649
(PHONE) 864-527-9500



Point Table			Point Table			Point Table		
Point #	Elevation	Description	Point #	Elevation	Description	Point #	Elevation	Description
1000	629.71	SB 1	1084	599.76	SB 146	1159	606.23	SB 94
1001	630.68	SB 2	1085	600.65	SB 164	1160	605.93	SB 93
1002	628.85	SB 3	1086	614.30	SB 121	1161	605.60	SB 91
1003	626.50	SB 4	1087	611.72	SB 122	1162	605.52	SB 90
1004	625.29	SB 5	1088	610.82	SB 123	1166	604.10	SB 115
1005	625.81	SB 18-19-20	1089	610.20	SB 124	1171	606.62	SB 66
1006	626.64	SB 6-7	1090	609.54	SB 125	1172	608.65	SB 67
1007	625.34	SB 8	1091	609.85	SB 126	1173	610.68	SB 68
1008	625.45	SB 9	1092	609.60	SB 127	1174	609.73	SB 69
1009	627.24	SB 11	1093	609.81	SB 137	1175	610.08	SB 70
1010	627.59	SB 12	1094	610.09	SB 136	1176	608.39	SB 71
1011	625.42	SB 10	1095	609.29	SB 128	1177	608.36	SB 72
1012	621.04	SB 15	1096	602.86	SB 138	1178	607.37	SB 73
1013	621.32	SB 16	1097	608.89	SB 129	1179	606.92	SB 74
1014	621.02	SB 17	1098	606.23	SB 130	1180	606.84	SB 75
1019	623.65	SB 30-31	1099	600.70	SB 140	1181	606.56	SB 76
1020	625.58	SB 13	1100	601.44	SB 139	1182	606.93	SB 77
1021	625.40	SB 21	1101	598.85	SB 141	1183	612.36	SB 48
1022	624.82	SB 22	1102	597.82	SB 142	1184	612.49	SB 49
1023	624.76	SB 14	1103	597.25	SB 143	1185	613.13	SB 50
1024	623.82	SB 23	1104	614.90	SB 47	1186	613.26	SB 51
1025	623.88	SB 32-33	1105	614.71	SB 46	1187	612.64	SB 52
1026	622.10	SB 24	1106	615.26	SB 45	1188	611.78	SB 53
1027	622.30	SB 25	1107	615.24	SB 44	1189	611.89	SB 54
1028	622.49	SB 26	1108	615.79	SB 43	1190	611.93	SB 179
1029	623.27	SB 27	1109	615.58	SB 42	1191	611.88	SB 180
1030	624.87	SB 28	1110	615.38	SB 185	1192	611.95	SB 178
1031	625.30	SB 29	1111	615.36	SB 184	1193	612.37	SB 83
1032	623.35	SB 34	1112	615.39	SB 183	1194	612.71	SB 55
1033	621.17	SB 35	1113	615.57	SB 182	1195	613.24	SB 59
1034	622.85	SB TW6	1114	615.56	SB 181	1196	613.47	SB 60
1035	623.21	SB TW7	1115	615.76	SB 2	1197	612.74	SB 62
1036	622.92	SB TW8	1116	615.88	SB 41	1198	611.14	SB 63
1037	622.97	SB TW9	1117	616.09	SB 40	1199	609.80	SB 65
1038	623.01	SB TW2	1118	615.84	SB 39	1200	612.91	SB 64
1039	624.02	SB TW1	1119	615.76	SB 38	1201	613.47	SB 61
1040	624.25	SB TW3	1120	615.52	SB 37	1202	613.21	SB 58
1041	625.23	SB TW4	1121	615.78	SB 36	1203	612.06	SB 57
1042	625.39	SB TW5	1134	601.42	SB 106	1204	611.24	SB 56
1061	599.46	SB 105	1135	602.34	SB 107	1208	604.48	SB 120
1062	600.75	SB 104	1136	602.89	SB 108	1209	605.20	SB 119
1063	602.13	SB 103	1137	603.51	SB 84	1210	606.38	SB 118
1064	603.03	SB 102	1138	603.68	SB 175	1211	605.81	SB 117
1065	601.00	SB 170	1139	603.61	SB 176	1212	606.04	SB 116
1066	601.23	SB 169	1140	603.80	SB 177	1214	605.30	SB 114 FLAGWIRE
1067	602.17	SB 168	1141	603.89	SB 109	1215	607.36	SB 88
1068	603.36	SB 166	1142	604.54	SB 110	1216	608.04	SB 87
1069	604.32	SB 162	1143	604.65	SB 111	1217	608.82	SB 86
1070	605.17	SB 157	1144	603.86	SB 112	1218	609.00	SB 79
1071	607.02	SB 158	1148	604.87	SB 132	1221	608.91	SB 80
1072	604.67	SB 167	1149	603.88	SB 133	1223	607.61	SB 92
1073	607.65	SB 160	1150	602.70	SB 134	1230	608.46	SB 172
1074	607.65	SB 160	1151	602.50	SB 135	1231	608.85	SB 173
1075	607.05	SB 159	1152	604.64	SB 101	1232	608.77	SB 89
1076	601.93	SB 165	1153	606.26	SB 100	1233	608.84	SB 81
1077	603.82	SB 163	1154	608.10	SB 99	1234	608.97	SB 83
1078	603.83	SB 171	1155	608.07	SB 98	1235	608.92	SB 82
1079	603.10	SB 150	1156	608.17	SB 97	1236	608.84	SB 174
1080	601.85	SB 149	1157	607.42	SB 96	1237	609.00	SB 84
1081	601.95	SB 143	1158	606.66	SB 95			
1082	600.52	SB 144						
1083	600.29	SB 145						



ANALYTICAL ENVIRONMENTAL SERVICES, INC.

September 27, 2021

Mark Keller
KLM Environmental, LLC

118 Springhall Dr Ste E
Goose Creek SC 29445

RE: Quick Pantry # 19

Dear Mark Keller:

Order No: 2109G20

Analytical Environmental Services, Inc. received 4 samples on September 14, 2021 9:51 am for the analyses presented in following report.

“No problems were encountered during the analyses except as noted in the Case Narrative or by qualifiers in the report or QC Summary. Additionally, all results for the associated Quality Control samples were within EPA and/or AES established limits.

AES’ certifications are as follows:

-South Carolina Certification number 98016003 for Clean Water Act and for Solid and Hazardous Waste, effective until 6/30/21.

These results relate only to the items tested as received. This report may only be reproduced in full.

If you have any questions regarding these test results, please feel free to call.

Sincerely,

Eben Buchanan
Project Manager

CHAIN OF CUSTODY

COMPANY: KLM Env.		ADDRESS: PO Box 2704 Goose Creek, SC 29445			ANALYSIS REQUESTED				Visit our website www.aesatlanta.com for downloadable COCs and to log in to your AESAccess account.		Number of Containers
PHONE: 843-870-4285		EMAIL:									
SAMPLED BY: Jimmy Slaght		SIGNATURE:									
#	SAMPLE ID	SAMPLED:		GRAB	COMPOSITE	MATRIX (see codes)	PRESERVATION (see codes)				REMARKS
		DATE	TIME								
1	MW-12	9/13/21	1010	X		50	X				
2	MW-13	↓	0945	X		50	X				
3	DW-2	↓	1000	X		50	X				
4	DW-3	↓	1020	X		50	X				
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											

RELINQUISHED BY:		DATE/TIME:		RECEIVED BY: Chill		DATE/TIME: 9/14/21 9:51am		PROJECT INFORMATION			RECEIPT	
1.				1.				PROJECT NAME: Quip Panting 19			Total # of Containers	
2.				2.				PROJECT #:			Turnaround Time (TAT) Request in Business Days	
3.				3.				SITE ADDRESS: 1802 S Main St., Greenwood SC			<input type="checkbox"/> Standard <input type="checkbox"/> 4-Day Rush* <input type="checkbox"/> 3-Day Rush* <input type="checkbox"/> 2-Day Rush* <input type="checkbox"/> Next Day Rush* <input type="checkbox"/> Other _____ <input type="checkbox"/> Same-Day Rush* (auth req.)	
SPECIAL INSTRUCTIONS/COMMENTS:				SHIPMENT METHOD				SEND REPORT TO:			*Surcharges apply for Rush TAT	
				OUT: / /		VIA:		INVOICE TO (IF DIFFERENT FROM ABOVE):			REGULATORY PROGRAM (if any):	
				IN: / /		VIA:		QUOTE #:			DATA PACKAGE: I <input type="radio"/> II <input type="radio"/> III <input type="radio"/> IV <input type="radio"/>	
				Client		<input checked="" type="radio"/> FedEx <input type="radio"/> UPS <input type="radio"/> US mail <input type="radio"/> courier other: _____						

CLIENT: KLM Environmental, LLC
Project: Quick Pantry # 19
Lab Order: 2109G20

CASE NARRATIVE

Grain Size was subcontracted to another laboratory for analysis. Please see attached subcontractor report.



104 Corporate Boulevard, Suite 420
West Columbia, SC 29169
T/ 803-796-6240
F/ 803-796-6250

TRANSMITTAL

TO:	Eben Buchanan	DATE:	9/22/21
COMPANY:	Analytical Environmental Services	SUBJECT:	Lab Results
ADDRESS:	3080 Presidential Dr. Atlanta, GA 30340	PROJECT NAME/NO.:	AES Lab Testing Schnabel Reference Number: 20C19054.00 Task no. 06-09 Quick Pantry 19
FROM:	Stephen Hahn	CC:	


COPIES	DATE	NO.	DESCRIPTION
1	--	4	Gradation curves

AS REQUESTED
 FOR APPROVAL
 PLEASE REPLY
 FOR YOUR USE

Attached, please find our lab results for sample(s):

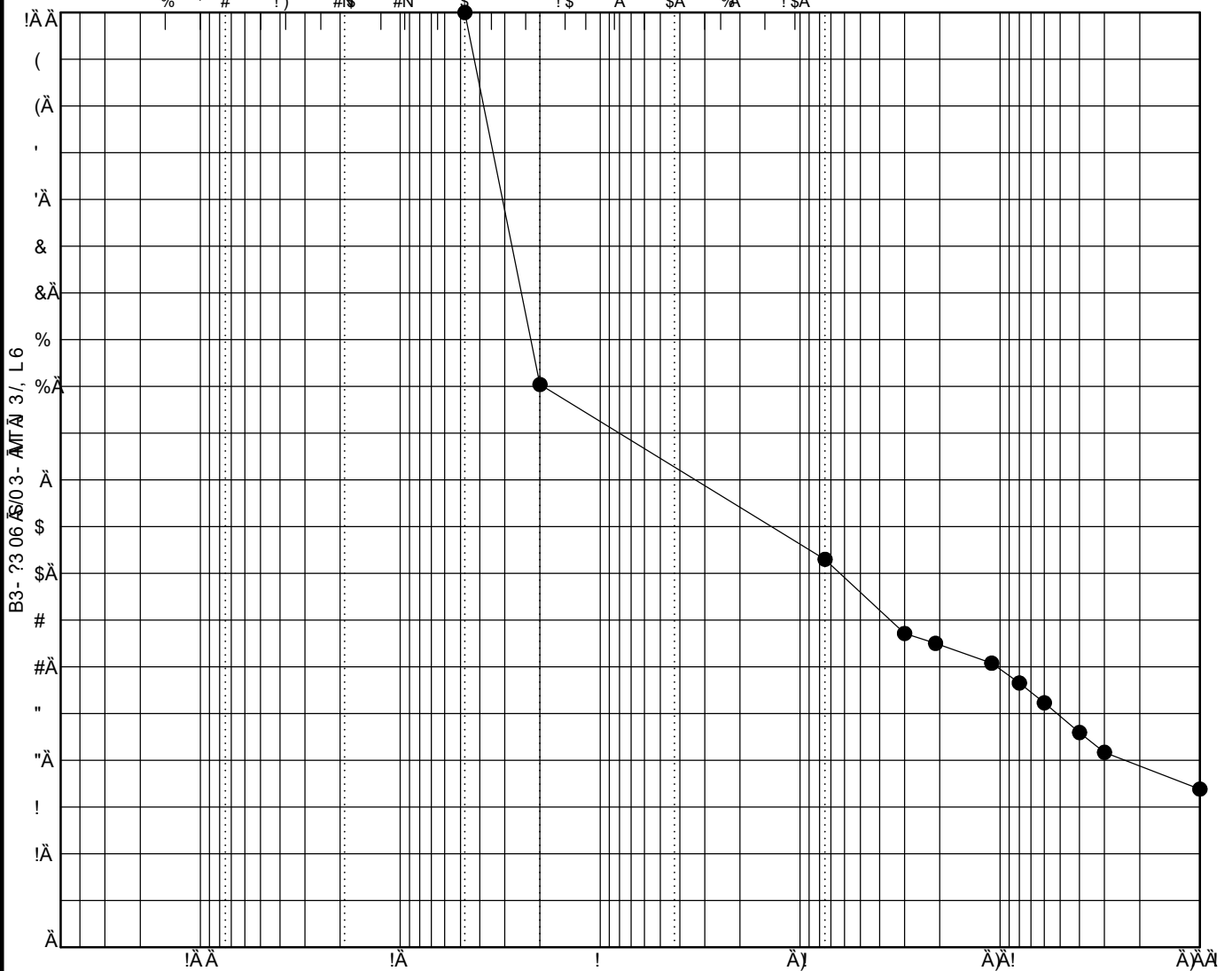
- MW-12
- MW-13
- D-2
- DW-3

Please advise if you have any questions.

SIGNED: 

 Stephen Hahn

SENT VIA: First Class Mail Overnight Service Email Other



, - . / 0 A 1 / 23 A 0 A 4 / 55 / 4 363-1

?R MV531	, - . Q35		1. OC			1/56 R - A ? 5. T
	I: @ B7	*=F7	I: @ B7	G7; =XG	*=F7	

1 H71-G7F	1 @ G H 7 A C 7 8 I D = H F					55	B5	B/	678 A 7 +9.;
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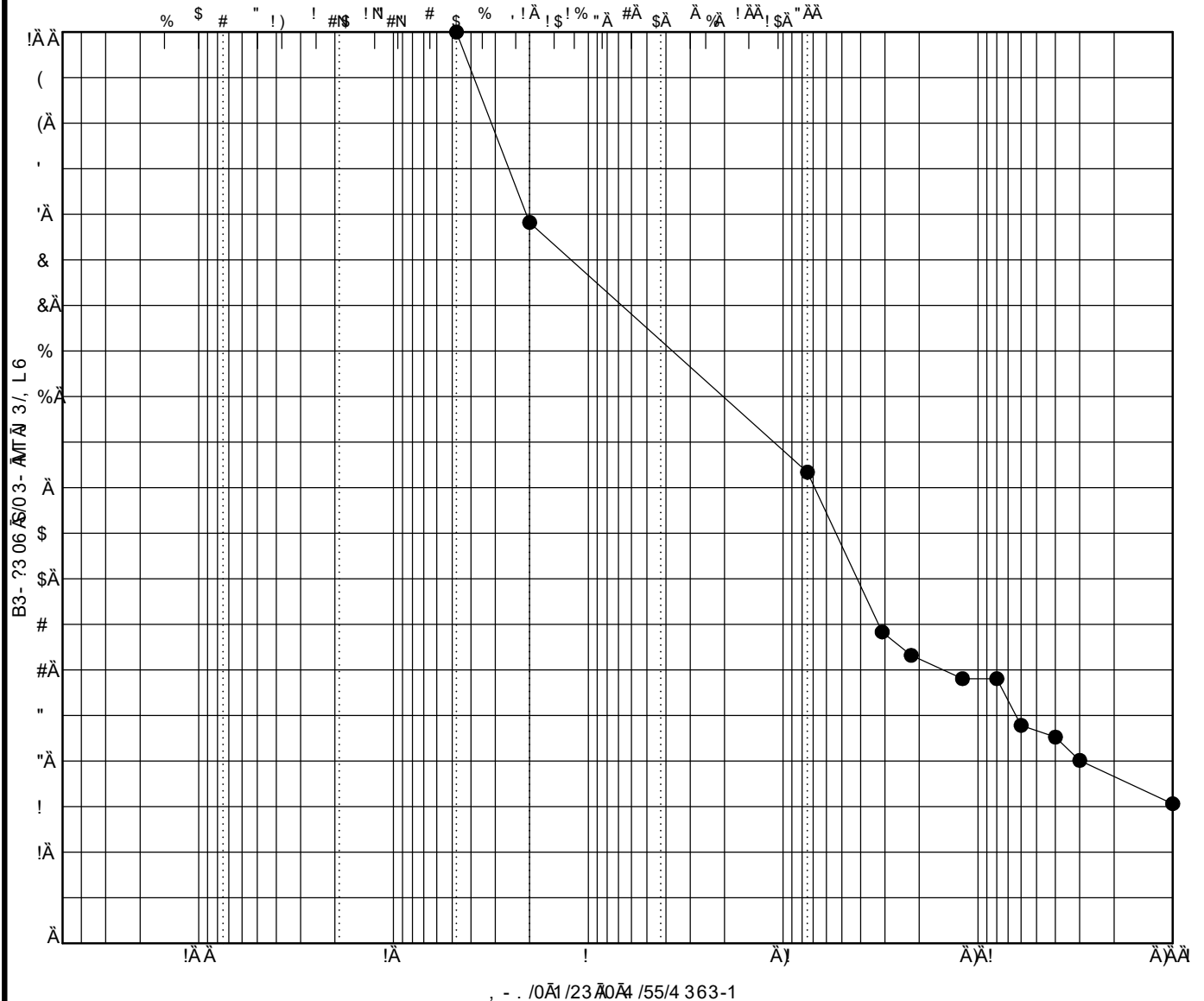


Schnabel
ENGINEERING

GRADATION CURVE

Project: . 31 5 @ 0 7 8 = F U
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Percent Finer

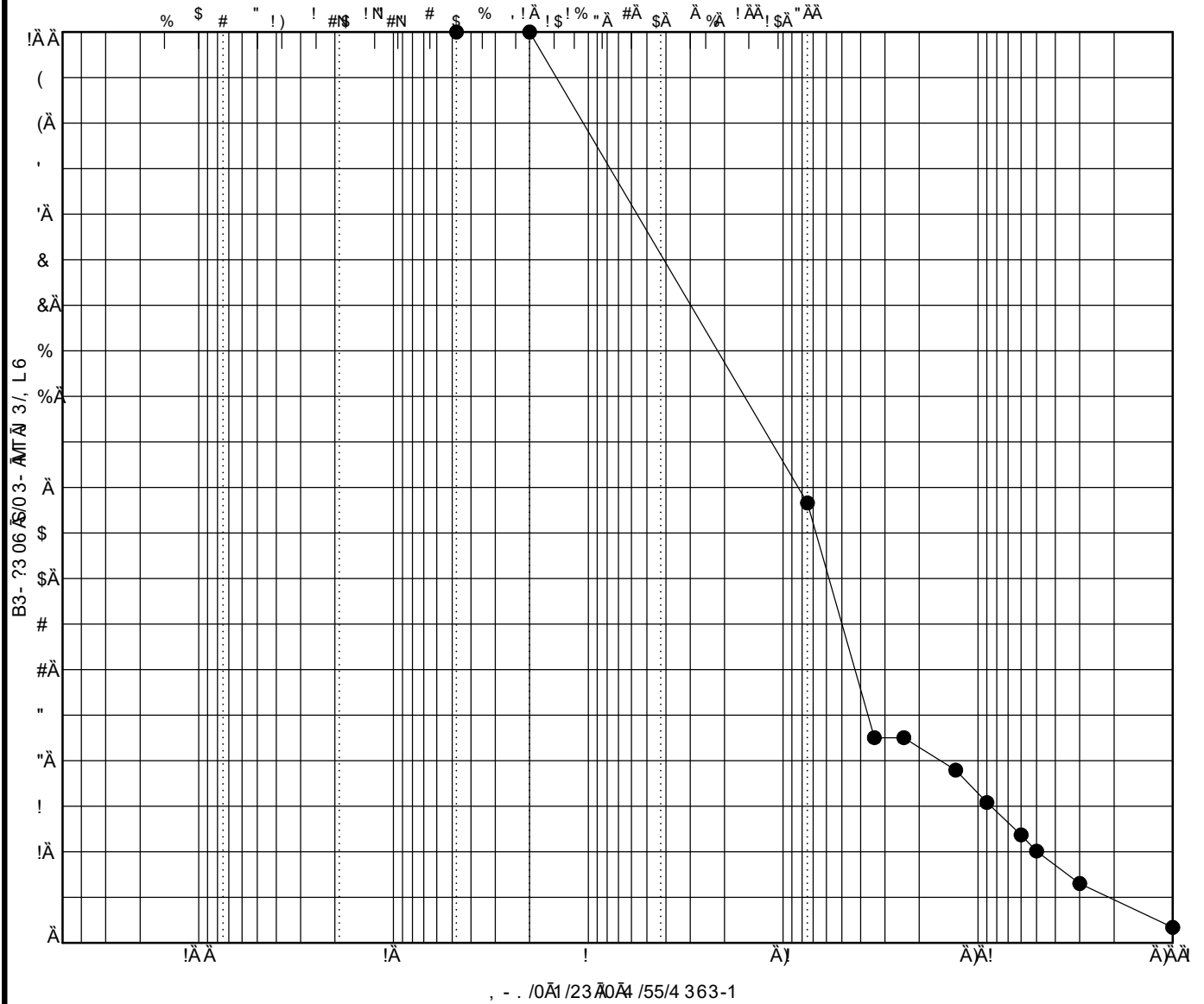
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GRADATION CURVE
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?R MV531	, - . Q35	1. 0C	1/56ÄÄ-Ä?5. T
I:@B7	*=F7	I:@B7 G7; =XG	*=F7

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CJ K#	SILTY SAND (SM), grayish brown	--	--	--	. #7DO7DU . 164ÄC\$#!
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GRADATION CURVE
 Project: . 31Ä@CÄ8=FU
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 WX=IYÄ@FÄÄÄÄ?
 Contract: "Ä?!(Ä \$)ÄÄÄ%KÄ(

1/3Q3ÄNL3 36Ä. 3.1Ä. MÄ3 16.0.) B/ÄÄ3 16.Ä3 4B 5. 63.) C6ÄN" N!

SAMPLE/COOLER RECEIPT CHECKLIST

Clear

Save as

1. Client Name: KLM Environmental, LLC

AES Work Order Number: 2109G20

2. Carrier: FedEx UPS USPS Client Courier Other _____

	Yes	No	N/A	Details	Comments
3. Shipping container/cooler received in good condition?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	damaged <input type="checkbox"/> leaking <input type="checkbox"/> other <input type="checkbox"/>	
4. Custody seals present on shipping container?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
5. Custody seals intact on shipping container?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
6. Temperature blanks present?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
7. Cooler temperature(s) within limits of 0-6°C? [See item 13 and 14 for temperature recordings.]	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Cooling initiated for recently collected samples / ice present <input type="checkbox"/>	
8. Chain of Custody (COC) present?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
9. Chain of Custody signed, dated, and timed when relinquished and received?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
10. Sampler name and/or signature on COC?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
11. Were all samples received within holding time?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
12. TAT marked on the COC?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	If no TAT indicated, proceeded with standard TAT per Terms & Conditions. <input type="checkbox"/>	

13. Cooler 1 Temperature Ambient °C Cooler 2 Temperature _____ °C Cooler 3 Temperature _____ °C Cooler 4 Temperature _____ °C

14. Cooler 5 Temperature _____ °C Cooler 6 Temperature _____ °C Cooler 7 Temperature _____ °C Cooler 8 Temperature _____ °C

15. Comments: _____

I certify that I have completed sections 1-15 (dated initials). MJ 9/15/21

	Yes	No	N/A	Details	Comments
16. Were sample containers intact upon receipt?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
17. Custody seals present on sample containers?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		
18. Custody seals intact on sample containers?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
19. Do sample container labels match the COC?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	incomplete info <input type="checkbox"/> illegible <input type="checkbox"/> no label <input type="checkbox"/> other <input type="checkbox"/>	
20. Are analyses requested indicated on the COC?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
21. Were all of the samples listed on the COC received?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	samples received but not listed on COC <input type="checkbox"/> samples listed on COC not received <input type="checkbox"/>	
22. Was the sample collection date/time noted?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
23. Did we receive sufficient sample volume for indicated analyses?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
24. Were samples received in appropriate containers?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		
25. Were VOA samples received without headspace (< 1/4" bubble)?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
26. Were trip blanks submitted?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	listed on COC <input type="checkbox"/> not listed on COC <input type="checkbox"/>	

27. Comments: _____

I certify that I have completed sections 16-27 (dated initials). MJ 9/15/21

This section only applies to samples where pH can be checked at Sample Receipt.

	Yes	No	N/A	Details	Comments
28. Have containers needing chemical preservation been checked? *	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
29. Containers meet preservation guidelines?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
30. Was pH adjusted at Sample Receipt?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		

* Note: Certain analyses require chemical preservation but must be checked in the laboratory and not upon Sample Receipt such as Coliforms, VOCs and Oil & Grease/TPH.

This also excludes metals by EPA 200.7, 200.8 and 245.1 which will be verified between 16 and 24 hours after preservation.

I certify that I have completed sections 28-30 (dated initials). MJ 9/15/21

Locked

End of Report

Re: UST# 04785 - Quick Pantry 19

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Fri 9/17/2021 9:15 AM

To: Mehta, Mihir <mehtam@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>

No problem, thanks for helping me with it.

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mehta, Mihir <mehtam@dhec.sc.gov>

Sent: Friday, September 17, 2021 9:14 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Mehta, Mihir <mehtam@dhec.sc.gov>

Subject: Re: UST# 04785 - Quick Pantry 19

Caitlin, this is perfect. Thanks a lot for drafting this in short time.

Mihir

Mihir Mehta, P.E.

Director, UST Management Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0623

Mobile: (803) 240-1998

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Sent: Friday, September 17, 2021 9:11 AM

To: Mehta, Mihir <mehtam@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: UST# 04785 - Quick Pantry 19

UST #04785 - Quick Pantry 19
Address: 1802 South Main Street, Greenwood SC 29646
County: Greenwood
Release Date: March, 3, 2021
RBCA Ranking: 1E
Responsible Party: Bahuchar Mata LLC
Consultant: KLM Environmental LLC

Since the release was declared in March KLM Environmental has been actively abating the release while also conducting site assessment. They have put down several contaminate booms along the affected creek and drainage areas on the adjacent properties to help stop the flow of free product. They have also conducted four 96-hour AFVR events to remove free product. A total of 934 gallons of free product, 726.82 gallons of product as vapor, and 12,854 gallons of contaminated ground water have been removed during the AFVR events. Along with the booms and AFVR events, the storm drains have been inspected to find any potential pathways. Currently a Tier II assessment is being conducted to determine the amount of free product present and to define the contamination plume. Field work was recently completed the week of August 30th and we are awaiting the final assessment report. KLM Environmental has informed us that this report should be in mid-October. It has been determined that the contamination has now moved off site on to numerous adjacent properties and storm drain systems. Currently further abatement actions are being developed to help remediate the migration. The program is contact with the local HUB housing, Greenwood City, and Greenwood County officials. Project manager has an active present on site and makes numerous site visits a month.

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
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Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



UST # 04785: GWS audit

Vincent, Malayika M. <vincenMM@dhec.sc.gov>

Mon 9/13/2021 9:27 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Good morning Mark,

Please find the attached audit for the GWS event conducted at UST # 04785 on 8/26/2021. The audit was **satisfactory**.

Please let me know by September 20, 2021 if you have any questions!
Malayika

Malayika Vincent

Environmental Health Manager II

Corrective Action & Quality Assurance

Underground Storage Tank Division

Bureau of Land and Waste Management

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0634

Mobile: (803) 922-6026

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)





Groundwater Sampling Audit Form
Underground Storage Tank Management Division

RESULTS:

- Satisfactory
 Issues

Date: 8/26 Project Manager: Caitlin Reilly DHEC Field Staff: Malayika Vincent
 Contractor: KLM Environmental Contractor Field Staff: Gary S
 Site Number: 04785 Site Name: Quick Pantry
 Time Arrived at Site: 1121 Time Leaving Site: 1300 Weather Conditions: sunny, not humid Temperature: 86°F

- Well allowed to equilibrate before sampling? YES NO not observed
 Water level obtained correctly? YES NO not observed
 New plastic sheeting around each well? YES NO Plexiglass
 New pair of gloves worn for each well? YES NO
 Meter calibration log(s) present? YES NO - from yesterday.

Method of Data Collection Field Data Sheets Log Book
 Method of Purging/Sample Collection Bailer Pump Other: _____
 New bailer/string or tubing for each well? YES NO
 Field parameters obtained correctly? YES NO Information recorded? YES NO
 Meter Information (include type and serial number): Honiba u-52 #W22MV13L for all
 pH/Conductance: _____ DO: _____ Turbidity: _____ Temperature: _____
 Adequate purge completed? YES NO ⊗ very slow recharge at this site.
 Purge water maintenance? YES NO not observed
 Appropriate sample handling (cooler w/ wet ice, bags, bubble wrap)? YES NO
 Decontamination of all equipment between wells? YES NO n/a not observed
 Signature: [Signature] Date: 8/26/2021

Notes: FP: MW-5, 4, 1, 2, 3, 9, 8, 7, 12, 7
RW-3, 2, 1
MW-11 purged when did not go dry.
Wells were purged 8/25/21 slow recharge so sampling 8/26/21 (today)

Re: #04785 Sampling

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Mon 8/30/2021 8:47 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Vincent, Malayika M. <vincenMM@dhec.sc.gov>

Mark,

Sounds good, thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Friday, August 27, 2021 3:47 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Vincent, Malayika M. <vincenMM@dhec.sc.gov>

Subject: #04785 Sampling

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin & Malayika,


We are going to try to finish the sampling/slug tests on the wells we do have left on Wednesday through Thursday of next week, September 1st & 2nd.

Thanks

Mark

Mark L. Keller, PG

President

 **KLM Environmental, LLC**

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

Re: Foundry Rd Pipe

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Tue 8/31/2021 10:16 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Hey Mark,

I will forward this over to Ashleigh and Mihir to see what they think. Ashleigh is out of the office this week but maybe we can schedule a call next week to discuss what the next step will be, I'm sure we will need to rope the VCC PM in as well.

This site just keeps getting better and better!

Thanks!!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

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From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Monday, August 30, 2021 11:36 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: FW: Foundry Rd Pipe

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***


Caitlin,

I got these photos from Julie Wilkie today. We asked her last week if they could investigate for us the ultimate route of the storm drain when it left the manhole we have all visited several times. They went back and took the lid off the storm drain. It does appear to go into the Foundry property and not down the side of the road as our maps show. It may be dumping into the small pond on site as her map showed. If that is occurring, we may have another area of contamination we have not addressed as that pond may be a new source area after the contaminated water is transmitted down the drain pipe and ends up in the settling pond. That pond ultimately overflows back into the drainage system and down the line to the housing authority. We have a boom installed over this pond which was installed in the beginning. While discussions are ongoing about the free product delineation approach around MW-14 on the Foundry site, this potential issue may need to be addressed. We may need to delineate in the area of this pond if we can access it. It may take a bulldozer to get there as the area is not accessible by a drill rig currently.

Sorry for complicating this site to a new level!!!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Julie Wilkie <julie.wilkie@gwdcity.com>
Sent: Monday, August 30, 2021 11:19 AM
To: Mark Lee Keller <mkeller131@comcast.net>
Subject: FW: Foundry Rd Pipe

Mark –

I asked my staff to take some photos from inside that box with the gas present. Appears only 1 line coming in (from the Smith property) and 1 going one (angled onto the Foundry site). Thought this may help you.

Any additional word on the extent of the gasoline on our site?

Julie

Julie M. Wilkie
City Manager
864.942.8410

From: Ereik Leary <erek.leary@gwdcity.com>
Sent: Monday, August 30, 2021 9:10 AM
To: Julie Wilkie <julie.wilkie@gwdcity.com>
Subject: Foundry Rd Pipe

Julie,

Picture one is taken with me standing on Foundry Rd facing the new park site. Corner of the box is where the pipe is exiting heading towards the new park property.

Picture two shows a close up of picture one.

Picture three shows the pipe coming in from across Foundry Rd.

Picture four is another angle of picture one.

Picture five is pipe coming into box from across Foundry Rd (top left opening) and leaving box heading towards new park site (bottom right opening).

Picture six is pipe coming into box from across Foundry Rd (top right opening) and leaving box heading towards new park site (bottom left opening).

Let me know if you have any questions.

From: Erek Leary <erek.leary@gwdcity.com>

Sent: Monday, August 30, 2021 8:56 AM

To: Erek Leary <erek.leary@gwdcity.com>

Subject: Pics













Sent from my iPhone

Re: UST # 04785

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Wed 8/11/2021 9:02 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Mark,

Thats awesome, keep me updated! I will be out of the office tomorrow and Friday, but I will check my email periodically. If you need anything those days please reach out to Ashleigh.

Thank you!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Wednesday, August 11, 2021 8:22 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin

We made contact with 3R of Greenville this morning. They are going to travel to the site and look at the job. They will send me a quote. They indicated they could handle the waste, jetting and camera work.

Thanks

Mark

Mark L. Keller, PG

President

KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445



mgd _____
med _____

Handwritten initials "mg" inside a circle, positioned between the two lines of text.

Phone 843-870-4255

Fax: 843-797-1893

Office 843-797-7884

On Aug 10, 2021, at 4:32 PM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Mark,

Thank you for the copy, I will look over it first thing tomorrow. I sent your email over to Ashleigh this morning, but I have yet to hear back from her, I know she has been in meetings all day, but I will let her know about the new company. Hopefully, they will be answer to our prayers! We also heard back from Mr. Prince and he said he was only available Thursday any time between 2-3:30 or Friday morning, any time between 9-10:30. Would be available during either of these times? I believe he just wants a brief update, nothing too crazy I hope!

And I'm sorry to hear about your employee. I hope it doesn't affect them too bad and it's no problem, reports can wait, you guys just stay safe!

Thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

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From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Tuesday, August 10, 2021 4:18 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,

I am sending in the hard copy of this report but wanted to send it to you directly also. It's the AFVR report for the event we did last week. We collected another 189 gallons of free product, and 207 gallons of off gas. The product had rebounded to 1.3 feet in thickness when we gauged the well before the event. Very successful event based on the numbers.

We have recovered in 4 events, 934 gallons of free product, and 726 gallons of product as vapor.

I called several places this morning to try to get quotes on the waste handling. I spoke with Safety Kleen and 3R in that area. 3R informed me that they could also do camera work and would handle the waste. They took my information and a supervisor was to call me back. That was at 9:00 this morning. I have not gotten a return call. I will try them again tomorrow while I am out in the field. Perhaps they can jet it, camera it, and handle the waste all at the same time which is what I had hoped for when we got the original quotes. I will advise you on what they can tell me.

A member of our staff tested positive for Covid today. He potentially infected other staff on Friday of last week. I am vaccinated but none of the other staff saw fit to get it. We are now severely short handed while we sort this out. I will do my best to get you anything that is pressing.

Let me know if you need anything.

Thanks!!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

Re: Joist - View Document

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Mon 8/16/2021 3:41 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Mark,

Sounds good! Just let me know when you need me to make an addendum. I'm getting with Malayika today to see if we can make it down there on the 26th, I'd like to see what they find.

Thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Monday, August 16, 2021 3:40 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: RE: Joist - View Document

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***


We will just work with what you have sent out. It will probably need an addendum anyway so just leave it like we have it for now.

Thanks!

Mark

Mark L. Keller, PG

President

KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Sent: Monday, August 16, 2021 2:21 PM

To: mkeller131@comcast.net
Subject: Re: Joist - View Document

Hey Mark,

I hope you had a good weekend! I'm just touching base about the drain exploration. Will you need me to make you up a new letter and CA or will the one we initially sent out on the 5th work? I spoke with Ashleigh a bit this morning but she wasn't sure if you would need a new one or not.

Thanks!
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Wednesday, August 11, 2021 4:43 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: Joist - View Document

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

I will be here tomorrow. I just need to know if we can use 3R for the full scope or we can not. I need to tell them so they can send their camera off for repair. It is down currently but if we are using them they will send it off for repair.

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Aug 11, 2021, at 4:28 PM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Hey Mark,

Yes, sorry I meant per hour not day! I sent your reply to Ashleigh, but she already gone for the day. Are you available tomorrow from 2 - 2:30 to speak with Mr. Prince? Ashleigh let me know you could discuss the quote before or after the phone call with Mr. Prince tomorrow.

Thanks!
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Wednesday, August 11, 2021 3:48 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: Joist - View Document

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

The quote in the notes is \$175/hour not \$175/day to clarify.

Mark E. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC, 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Aug 11, 2021, at 3:36 PM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Hey Mark,

We can approve this new quote for the new rate of \$175 per day for the CCTV cam. We can also give you line item Q1 (3700 gallons as originally requested) and the personnel mob (to have someone on site and disposal). I have attached the DHEC cost agreement check list for you to review. If this looks good to you

and the RP, we can send out a new notice to proceed letter with the updated cost agreement. Ashleigh did mention to me that we can schedule a call with the you and the RP to discuss any questions or concerns about the SUPERB funds commitment.

Thanks!
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Wednesday, August 11, 2021 11:14 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Joist - View Document

*** Caution: This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin

We have the quote back. This quote is to do all the jetting/cleaning and handle the waste. In the notes on the quote, they can also do the camera work at the same time for \$175/hr. This is the ideal situation as they can handle everything.

<https://client.joistapp.com/estimates/902f9eba82ad4100bca2a464>

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-0285
Fax: 843-797-1893
Office: 843-797-7884



**ASSESSMENT COMPONENT COST AGREEMENT
SOUTH CAROLINA**

Department of Health and Environmental Control
Underground Storage Tank Management Division
State Underground Petroleum Environmental Response Bank Account
January 1, 2020

Facility Name: Quick Pantry 19

UST Permit #: 04785

Cost Agreement #: _____

ITEM	QUANTITY	UNIT	UNIT PRICE	TOTAL
A. Plan Preparation				
1. Site-specific Work Plan		each	\$160.05	\$0.00
2. Tax Map		each	\$74.69	\$0.00
3. Tier II or Comp. Plan /QAPP Appendix B		each	\$250.00	\$0.00
B. Receptor Survey *				
		each	\$587.92	\$0.00
C. Survey (500 ft x 500 ft)				
1. Comprehensive Survey		each	\$1,109.68	\$0.00
Subsurface Geophysical Survey				
2. < 10 meters below grade		each	\$1,387.10	\$0.00
3. > 10 meters below grade		each	\$2,464.77	\$0.00
4. Geophysical UST or Drum Survey		each	\$970.97	\$0.00
D. Mob/Demob				
1. Equipment		each	\$1,088.34	\$0.00
2. Personnel	1	each	\$451.34	\$451.34
3. Adverse Terrain Vehicle		each	\$533.50	\$0.00
E.. Soil Borings (hand auger)*				
		foot	\$5.34	\$0.00
F. Soil Borings (requiring equipment, push technology, etc) or Field Screening (including water sample, soil sample, soil gas sample, etc.)*				
1. Standard		per foot	\$16.01	\$0.00
2. Fractured Rock		per foot	\$21.55	\$0.00
G. Soil Leachability Model				
		each	\$64.02	\$0.00
H. Abandonment (per foot)*				
1. 2" diameter or less		per foot	\$3.31	\$0.00
2. Greater than 2" to 6" diameter		per foot	\$4.80	\$0.00
3. Dug/Bored well (up to 6 feet diameter)		per foot	\$16.00	\$0.00
I. Well Installation (per foot)*				
1. Water Table (hand augered)		per foot	\$11.31	\$0.00
2. Water Table (drill rig) 2" Diameter		per foot	\$40.55	\$0.00
3. Telescoping		per foot	\$53.35	\$0.00
4. Rock Drilling		per foot	\$61.89	\$0.00
5. 2" Rock Coring		per foot	\$32.97	\$0.00
6. Rock Multi-sampling ports/screens		per foot	\$35.64	\$0.00
7. Recovery Well (4" diameter)		per foot	\$48.02	\$0.00
8. Pushed Pre-packed screen (1.25" dia)		per foot	\$16.01	\$0.00
9. Rotasonic (2" diameter)		per foot	\$46.95	\$0.00
10. Re-develop Existing Well		per foot	\$11.74	\$0.00

J. Groundwater Sample Collection / Gauge Depth to Water or Product *				
1. Groundwater Purge		per well	\$64.02	\$0.00
2. Air or Vapors		sample	\$12.80	\$0.00
3. Water Supply Sample or Duplicate		sample	\$23.47	\$0.00
4. Groundwater No Purge or Duplicate or Grab		sample	\$29.88	\$0.00
5. Gauge Well only		sample	\$7.47	\$0.00
6. Sample Below Product		sample	\$12.80	\$0.00
7. Passive Diffusion Bag		sample	\$27.74	\$0.00
8. Field Blank		sample	\$26.25	\$0.00
9. Groundwater (low flow purge)		sample	\$97.10	\$0.00
10. Equipment Blank		sample	\$26.25	\$0.00
K. Laboratory Analyses-Groundwater				
1. BTEXNM+Oxyg's+1,2 DCA+Eth(8260B)		per sample	\$130.17	\$0.00
2. Lead, Filtered		per sample	\$14.72	\$0.00
3. Rush EPA Method 8260B		per sample	\$163.89	\$0.00
4. Trimethal, Butyl, and Isopropyl Benzenes		per sample	\$29.88	\$0.00
5. PAH's		per sample	\$64.66	\$0.00
6. Lead		per sample	\$17.07	\$0.00
7. EDB by EPA 8011		per sample	\$48.23	\$0.00
8. EDB by EPA Method 8011 Rush		per sample	\$72.77	\$0.00
9. 8 RCRA Metals		per sample	\$67.65	\$0.00
10. TPH (9070)		per sample	\$43.75	\$0.00
11. PH		per sample	\$5.55	\$0.00
12. BOD		per sample	\$21.34	\$0.00
13. Ethanol		per sample	\$15.79	\$0.00
K. Analyses-Drinking Water				
14. BTEXNM+1,2 DCA (524.2)		per sample	\$132.36	\$0.00
15. 7-OXYGENATES & ETHANOL (8260B)		per sample	\$97.90	\$0.00
16. EDB (504.1)		per sample	\$84.83	\$0.00
17. RCRA METALS (200.8)		per sample	\$106.70	\$0.00
K. Analyses-Soil				
18. BTEX + Naphth.		per sample	\$68.29	\$0.00
19. PAH's		per sample	\$68.33	\$0.00
20. 8 RCRA Metals		per sample	\$60.18	\$0.00
21. TPH-DRO (3550C/8015C)		per sample	\$42.68	\$0.00
22. TPH- GRO (5035B/8015C)		per sample	\$38.37	\$0.00
23. Grain size/hydrometer		per sample	\$110.97	\$0.00
24. Total Organic Carbon		per sample	\$32.65	\$0.00
K. Analyses-Air				
25. BTEX + Naphthalene		per sample	\$230.47	\$0.00
K. Analyses-Free Phase Product				
26. Hydrocarbon Fuel Identification		per sample	\$380.92	\$0.00
L. Aquifer Characterization*				
1. Pumping Test		per hour	\$24.54	\$0.00
2. Slug Test		per test	\$203.80	\$0.00
3. Fractured Rock		per test	\$106.70	\$0.00

M. Free Product Recovery Rate Test*		each	\$40.55	\$0.00
N. Fate/Transport Modeling				
1. Mathematical Model		each	\$106.70	\$0.00
2. Computer Model		each	\$106.70	\$0.00
O. Risk Evaluation				
1. Tier I Risk Evaluation		each	\$320.10	\$0.00
2. Tier II Risk Evaluation		each	\$106.70	\$0.00
P. Subsequent Survey*		each	\$260.00	\$0.00
Q. Disposal (gallons or tons)*				
1. Wastewater	3700	gallon	\$0.60	\$2,220.00
2. Free Product		gallon	\$0.53	\$0.00
3. Soil Treatment/Disposal		ton	\$64.02	\$0.00
4. Drilling fluids		gallon	\$0.45	\$0.00
R. Miscellaneous (attach receipts)				
Drain exploration	8	per hour	\$175.00	\$1,400.00
		each	\$3,950.10	\$0.00
		each	\$0.00	\$0.00
T. Tier I Assessment (Use DHEC 3665 form)				
1. Southeast Region		standard	\$11,026.00	\$0.00
2. All Other Counties		standard	\$12,093.00	\$0.00
U. IGWA (Use DHEC 3666 form)				
1. Southeast Region		standard	\$3,803.00	\$0.00
2. All Other Counties		standard	\$4,123.00	\$0.00
22. Corrective Action (Use DHEC 3667 form)		PFP Bid		\$0.00
W. Aggressive Fluid & Vapor Recovery (AFVR)				
1. 8-hour Event*		per event	\$1,467.13	\$0.00
2. 24-hour Event*		per event	\$4,081.28	\$0.00
3. 48-hour Event*		per event	\$6,706.10	\$0.00
4. 96-hour Event*		per event	\$13,409.52	\$0.00
5. Off-gas Treatment 8 hour		per event	\$130.71	\$0.00
6. Off-gas Treatment 24 hour		per event	\$257.68	\$0.00
7. Off-gas Treatment 48 hour		per event	\$348.91	\$0.00
8. Off-gas Treatment 96 hour		per event	\$832.26	\$0.00
9. Off-gas Treatment 8 hour (w/chlorinated compounds)		per event	\$430.00	\$0.00
10. Off-gas Treatment 24 hour (w/chlorinated compounds)		per event	\$500.00	\$0.00
11. Off-gas Treatment 48 hour (w/chlorinated compounds)		per event	\$1,000.00	\$0.00
12. Off-gas Treatment 96 hour (w/chlorinated compounds)		per event	\$2,000.00	\$0.00
13. AFVR Effluent Disposal(w/chlorinated compounds)		gallon	\$0.50	\$0.00
14. AFVR Site Reconnaissance		each	\$216.87	\$0.00
15. Additional Hook-ups		each	\$27.48	\$0.00
16. AFVR Effluent Disposal		gallon	\$0.47	\$0.00
17. AFVR Mobilization/Demobilization		each	\$417.73	\$0.00

X. Granulated Activated Carbon (GAC) filter system installation & service:					
1. New GAC System Installation*		each	\$2,027.30		\$0.00
2. Refurbished GAC Sys. Install*		each	\$960.30		\$0.00
3. Filter replacement/removal*		each	\$373.45		\$0.00
4. GAC System removal, cleaning, & refurbishment*		each	\$293.43		\$0.00
5. GAC System housing*		each	\$266.75		\$0.00
6. In-line particulate filter		each	\$160.05		\$0.00
7. Additional piping & fittings		foot	\$1.60		\$0.00
Y. Well Repair					
1. Additional Copies of the Report Delivered		each	\$53.35		\$0.00
2. Repair 2x2 MW pad*		each	\$53.35		\$0.00
3. Repair 4x4 MW pad*		each	\$93.90		\$0.00
4. Replace well vault*		each	\$125.91		\$0.00
5. Replace well cover bolts		each	\$2.77		\$0.00
6. Replace locking well cap & lock		each	\$16.00		\$0.00
7. Replace/Repair stick-up*		each	\$142.98		\$0.00
8. Convert Flush-mount to Stick-up*		each	\$160.05		\$0.00
9. Convert Stick-up to Flush-mount*		each	\$138.71		\$0.00
10. Replace missing/illegible well ID plate		each	\$12.80		\$0.00
S. Report Prep & Project Management	12%	percent	\$4,071.34		\$488.56
TOTAL					\$4,559.90

DHEC D-4074 (1-2020) *The appropriate mobilization cost can be added to complete these tasks, as necessary

Re: UST # 04785

Thrash, Ashleigh <thrasham@dhec.sc.gov>

Thu 8/12/2021 10:21 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Hi Mark!

Caitlin said you were available to hop on a call today with Patrick Prince. He is available at 2. Below is the conference info if you don't have it handy:

call in #

1-800-753-1965

access #

8982544

If you can stay on after we finish with him to discuss the drain quote, that would be great. Thank you!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Sent: Wednesday, August 4, 2021 4:58 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: UST # 04785

Thank you Mark. I figured you had knowledge of it - I think I have seen a map with what you are referring to but I can't find it. Hopefully you will be able to find something to clear it all up. I feel like we went through all this already once but I appreciate your patience while we try to clear it up again!

No worries about the city camera - Caitlin will get the quote approved for you when she gets back.

Thanks again!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Wednesday, August 4, 2021 4:44 PM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

The city decline to use their camera because of the gasoline.

I will respond to the email Julie sent. Chris was not aware of the pipe but we all have been. I am going to look for the map we had showing a different route for the utilities than the one she presented. The pond on their site is fed from a drainage pipe somewhere on the foundry property. It then overflows out into the storm drainage when it rains. I took a video of this occurrence while storming on site. There is much confusion about this but I have seen it first hand and their understanding of the flow does not appear to be right. I will copy both of you on the email.

Thanks

Mark

Mark L. Keller, PG

President

KLM Environmental, LLC

PO Box 2704

Goose Creek, SC, 29445

Phone: 843-870-4285

Fax: 843-797-1893

Office: 843-797-7884

On Aug 4, 2021, at 1:37 PM, Thrash, Ashleigh <thrasham@dhec.sc.gov> wrote:

Sounds great! I can't find that map we had before with all of the sewers marked. Still looking. I'll go ahead and send over the maps you sent me earlier. Thanks for your help on

the call!

Ashleigh

Ashleigh Thrash, P.G.
Section Manager, Assessment & Non-Permitted Petroleum
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0607
Cell: (803) 608-1765
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Wednesday, August 4, 2021 1:35 PM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

I spoke to Chris and he will be at the storm drain at 2:00 to show the city the particulars. He is going to show her the drain line we need to get the camera in. Hopefully they can assist so we don't waste a bunch of funding with the only quotes we were able to obtain to do it. May be a silver lining in at least one of the complaints.

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Aug 4, 2021, at 10:09 AM, Thrash, Ashleigh <thrasham@dhec.sc.gov> wrote:

Thank you Mark!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Wednesday, August 4, 2021 10:02 AM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Ashley,

Attached are two maps showing the probing locations. The area we investigated is too large to stay on one map and be useful. Map #2 was specifically done on the housing authority property to ensure contaminants were not running down the drainage area, leaking into the subsurface, and affecting that property in general. Also attached is the data table from the field screening using the mobile lab. No contaminants are found on the housing authority property. Please take a look at these and let me know if you have any questions on it.

Thank you

Mark

Mark L. Keller, PG

President

KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

RE: Foundry Site Video

Mark Lee Keller <mkeller131@comcast.net>

Mon 8/16/2021 2:28 PM

To: 'Julie Wilkie' <julie.wilkie@gwdcity.com>; Gorman, Angela <gormanak@dhec.sc.gov>; 'Howard Garner' <howard.garner@fema.dhs.gov>; 'Brian Gross' <gross.brian@epa.gov>; 'Ryan Thomas' <ryan.thomas@gwdcity.com>; 'Ryan Hertzfeld, PLA' <rhertzfeld@davisfloyd.com>; 'Tara Lyle, PE' <tlyle@davisfloyd.com>; 'Steffanie Dorn' <sdorn@greenwoodsc.gov>; 'Brent Robertson, PE, LEED-AP' <broberts@davisfloyd.com>; Thrash, Ashleigh <thrasham@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Vincent, Malayika M. <vincenMM@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***


All –

The cleaning/inspection/lane closure has been tentatively scheduled for 8/26/21 which is next Thursday. This will be dependent on the weather. We can confirm the date as we get closer. Please call me or email with any questions.

Thank you

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Julie Wilkie <julie.wilkie@gwdcity.com>
Sent: Monday, August 16, 2021 1:59 PM
To: 'Gorman, Angela' <gormanak@dhec.sc.gov>; Howard Garner (howard.garner@fema.dhs.gov) <howard.garner@fema.dhs.gov>; Brian Gross (gross.brian@epa.gov) <gross.brian@epa.gov>; Ryan Thomas <ryan.thomas@gwdcity.com>; Ryan Hertzfeld, PLA <rhertzfeld@davisfloyd.com>; Tara Lyle, PE <tlyle@davisfloyd.com>; Steffanie Dorn <sdorn@greenwoodsc.gov>; Brent Robertson, PE, LEED-AP <broberts@davisfloyd.com>; 'Thrash, Ashleigh' <thrasham@dhec.sc.gov>
Cc: Mark Keller <mkeller131@comcast.net>
Subject: Foundry Site Video

All –

I spoke with Mark Keller today. He has indicated that at this time, he does not have a timeframe for scheduling the video of the line where the gasoline is present. He attempted to get scheduling done last week but schedules were not aligning. He is working on it again this week and will keep us all in the loop. Mark is cc'd on this email.

Thanks Mark!

Julie

Julie M. Wilkie

City Manager
520 Monument St. PO Box 40
Greenwood, SC 29648
o: 864.942.8410
f: 864.942.8470
m: 864.377.5286
www.cityofgreenwoodsc.com

Re: [EXTERNAL EMAIL]RE: Foundry Site Video

Mark Keller <mkeller131@comcast.net>

Tue 8/24/2021 3:16 PM

To: Julie Wilkie <julie.wilkie@gwdcity.com>

Cc: Gorman, Angela <gormanak@dhec.sc.gov>; Howard Garner <howard.garner@fema.dhs.gov>; Brian Gross <gross.brian@epa.gov>; Ryan Thomas <ryan.thomas@gwdcity.com>; Ryan Hertzfeld, PLA <rhertzfeld@davisfloyd.com>; Tara Lyle, PE <tlyle@davisfloyd.com>; Steffanie Dorn <sdorn@greenwoodsc.gov>; Brent Robertson, PE, LEED-AP <broberts@davisfloyd.com>; Thrash, Ashleigh <thrasham@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Vincent, Malayika M. <vincenMM@dhec.sc.gov>

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This work is only approved for the line dripping gasoline. We can not investigate anything outside that scope per the SCDHEC SUPERB Statute. If there are any questions on that please speak with Ms. Ashley Thrash with the UST Division.

We begin setting up the lane closure at approximately 9:00 on Thursday. Jetting will commence once we are safely set up with all equipment in the safe zone. Camera will commence once the line has been cleared. We have no idea what may be in the line or how long it will take to clear it.

Thanks

Mark

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Aug 24, 2021, at 2:53 PM, Julie Wilkie <julie.wilkie@gwdcity.com> wrote:

Mark -

Good Afternoon. Can I assume this will include both lines in question on the property?
Do you have a time for this work?

THANKS!

JULIE

Julie M. Wilkie

City Manager
864.942.8410

From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Monday, August 16, 2021 2:28 PM
To: Julie Wilkie <julie.wilkie@gwdcity.com>; 'Gorman, Angela' <gormanaki@dhec.sc.gov>; 'Howard Garner' <howard.garner@fema.dhs.gov>; 'Brian Gross' <gross.brian@epa.gov>; Ryan Thomas <ryan.thomas@gwdcity.com>; 'Ryan Hertzfeld, PLA' <rhertzfeld@davisfloyd.com>; 'Tara Lyle, PE' <tlyle@davisfloyd.com>; 'Steffanie Dorn' <sdorn@greenwoodsc.gov>; 'Brent Robertson, PE, LEED-AP' <broberts@davisfloyd.com>; 'Thrash, Ashleigh' <thrasham@dhec.sc.gov>; 'Reilly, Caitlin M.' <reillycm@dhec.sc.gov>; Malayika Vincent <vincentmm@dhec.sc.gov>
Subject: [EXTERNAL EMAIL]RE: Foundry Site Video

*******WARNING: The sender of this email is outside of our network.
Ensure you are familiar with the sender and are expecting this email,
otherwise, DO NOT REPLY and DO NOT CLICK on any LINK or ATTACHMENT and
DELETE THIS EMAIL IMMEDIATELY !!!!*******

All –

The cleaning/inspection/lane closure has been tentatively scheduled for 8/26/21 which is next Thursday. This will be dependent on the weather. We can confirm the date as we get closer. Please call me or email with any questions.

Thank you

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Julie Wilkie <julie.wilkie@gwdcity.com>
Sent: Monday, August 16, 2021 1:59 PM
To: 'Gorman, Angela' <gormanak@dhec.sc.gov>; Howard Garner (<howard.garner@fema.dhs.gov>) <howard.garner@fema.dhs.gov>; Brian Gross (<gross.brian@epa.gov>) <gross.brian@epa.gov>; Ryan Thomas <ryan.thomas@gwdcity.com>; Ryan Hertzfeld, PLA <rhertzfeld@davisfloyd.com>; Tara Lyle, PE <tlyle@davisfloyd.com>; Steffanie Dorn <sdorn@greenwoodsc.gov>; Brent Robertson, PE, LEED-AP <broberts@davisfloyd.com>; 'Thrash, Ashleigh' <thrasham@dhec.sc.gov>
Cc: Mark Keller <mkeller131@comcast.net>
Subject: Foundry Site Video

All –

I spoke with Mark Keller today. He has indicated that at this time, he does not have a timeframe for scheduling the video of the line where the gasoline is present. He attempted to get scheduling done

last week but schedules were not aligning. He is working on it again this week and will keep us all in the loop. Mark is cc'd on this email.

Thanks Mark!

Julie

Julie M. Wilkie

City Manager

520 Monument St., PO Box 40

Greenwood, SC 29648

o: 864.942.8410

f: 864.942.8470

m: 864.377.5286

www.cityofgreenwoodsc.com

Re: UST 04785 - Quick Pantry 19

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Mon 9/20/2021 10:49 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

Good morning Mark,

Here is the conference phone number and access code.

Phone number: 1-800-753-1965

Access code: 8982544

Thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Wednesday, September 15, 2021 5:59 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: RE: UST 04785 - Quick Pantry 19

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11 sounds good to me. I have it on my calendar.

Thanks!!

Mark

Mark L. Keller, PG

President

 **KLM Environmental, LLC**

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Wednesday, September 15, 2021 1:24 PM
To: mkeller131@comcast.net; Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: Re: UST 04785 - Quick Pantry 19

Hey Mark,

Want to shoot for Monday at 10 or 11?

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Wednesday, September 15, 2021 12:32 PM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: UST 04785 - Quick Pantry 19

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G said Monday anytime is ok for him. I am good anytime as well. Please let me know the time that works best for you and Caitlin and I will call him ahead of time so make sure it's good to go. Thank you both!!

Mark

Mark L Keller PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Sep 15, 2021, at 11:49 AM, Thrash, Ashleigh <thrasham@dhec.sc.gov> wrote:

Thank you Mark! I'll be out tomorrow and Friday but Caitlin will be around! Have a great weekend if I don't talk to you!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Wednesday, September 15, 2021 11:46 AM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: UST 04785 - Quick Pantry 19

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Got it. I will talk to them today. Let me talk to G and I will give you both his pms

Thanks!!!

Mark

Mark L. Keller, PG
President
MLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Sep 15, 2021, at 11:40 AM, Thrash, Ashleigh <thrasham@dhec.sc.gov> wrote:

Hey Mark, so long as the pricing is the same, we can use the same quote from that company.

We are available Monday 9-12 or 2-5. Thank you!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Wednesday, September 15, 2021 11:22 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: Re: UST 04785 - Quick Pantry 19

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

I will be available Monday. We are in the field Tuesday. Just let me know a time and I will let G know. On the second camera inspection, do I need to get quotes again or can we use the same company we used for the first work?

Thanks!

Mark

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Sep 15, 2021, at 10:49 AM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Hey Mark,

Awesome, are you available next Monday morning or Tuesday?

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Wednesday, September 15, 2021 9:56 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: RE: UST 04785 - Quick Pantry 19


*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,

He can do a conference call. This is G's number: 478-714-6918. Just let me know, he is ready.

Mark

Mark L. Keller, PG
President

 **KLM Environmental, LLC**

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Sent: Wednesday, September 15, 2021 9:32 AM

To: mkeller131@comcast.net

Subject: Re: UST 04785 - Quick Pantry 19

Good morning Mark,

I hope you had a great weekend. I had a meeting with Angela Gorman yesterday to give her a quick update about what we have found so far with the VCC site. I was wondering if you have had time to reach out to anyone about exploring the second drain exploration and trenches. We mentioned these abatement actions to Angela, and she had some questions about the timelines. They are thinking they might have to put the park plans on hold until we can get our assessment done but she needs to meet with the city and engineers to discuss their options. Ashleigh was also wondering if you've had a chance to reach out to Mr. Patel or Jitu about setting up that conference call.

Thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Thursday, September 9, 2021 1:33 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: RE: UST 04785 - Quick Pantry 19

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,


Sorry I was out drilling yesterday. Mr. Patel is still away in India I am told. Jitu tells me he is returning this month. I have spoken to him once since he left but he contacts Jitu (G he likes to be called) at the store on occasion to get updates. I am not sure when he will be here but once he is I am sure he would take a meeting. I am also sure he does not have the resources to pay for anything like that himself. I am not sure what the answer is there as I don't know any person's financial situation. I will have to leave that part of the discussion to you and Ashley since I have never dealt with that past the \$25K payment. I am sorry I can't help on that front. Once I know more about his return I will share it with you as soon as I can.

Thanks

Mark

Mark L. Keller, PG

President

 **KLM Environmental, LLC**

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Wednesday, September 8, 2021 2:13 PM
To: mkeller131@comcast.net
Subject: Re: UST 04785 - Quick Pantry 19

Hey Mark,

Mine was pretty good as well!

I spoke with Ashleigh, and we think the trenches would be a good idea to help with the abatement. Is there any way we can set up a call with you and Mr. Patel to discuss this? I'm sure this isn't going to be a cheap project so this way we can sit down and answer any questions he might have for us.

Thanks!
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Tuesday, September 7, 2021 3:04 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: RE: UST 04785 - Quick Pantry 19

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Hey Caitlin!! Mine was pretty good. I wish it was much longer. I hope yours was as well.

On QP19, we finished up the sampling last Thursday, September 2nd. I would estimate the lab will get the data back to me September 21st. I can start putting the report together at that time, which with the complexity and size of this, may take me a solid week to get it done. That is assuming you don't want further assessment of the free product extent on the foundry site at this time, or potential assessment from the pond as a secondary source. Please let me know how you would like to handle those

issues. I can certainly proceed with what I have and we can regroup and address those in a separate action, just let me know.

On the storm drain issue, I feel like the quickest way to stop the gas from continuing to flow into the creek/drain is to dig an interception trench along side it and boom that entire section. Ronney Smith did that in one section but the product continues its migration in other areas. That will work for a while but not forever. The booms will need to be changed frequently as they soak up the free product, but contaminated water will not stop migrating into the system unfortunately. That smell will continue to plague us I believe no matter what we do. But that would be my best answer for a quicker way to address the issue. I feel however, that any action like that has to be done under a bid for corrective action. I am not sure on that as I have never been involved in a site like this one, but I am sure Read has and can lay out the potential future steps.

The property owner, Ronney Smith, called me today to get an update as well. He is obviously concerned that a very large portion of his land is now very contaminated as we have such a large free product plume. He asked me what the remedy is for him and I honestly don't know the answer to that. If you guys have any similar sites to this, what did the off site owner do in response to the property being contaminated? Lawsuit? Superb Fund paying for land devaluation? Something else? Let me know if you know on that.

Thanks!!!

Mark

Mark L. Keller, PG
President



KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Tuesday, September 7, 2021 2:40 PM
To: mkeller131@comcast.net
Subject: UST 04785 - Quick Pantry 19

Hey Mark,

I hope you had a great Labor day weekend!

I wanted to ask if you have a rough estimate of when the sampling report will be ready? Since Greenwood county is vacant in our Corrective Action section, Read Minor has volunteered to be my counterpart on this one. I know it will be a few weeks out but I'm

hoping to set aside some time with him to go over everything we have found before the report is in, I don't want to overwhelm him.

I was also wondering if you have any further ideas on what we can do with the storm drains?

Thanks!
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



Re: UST # 04785

Mark Keller <mkeller131@comcast.net>

Mon 9/20/2021 5:24 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

We will start at 10:00 with the drain cleaning. Then the camera work.

Thanks!

Mark

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Sep 20, 2021, at 4:46 PM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Hey Mark,

Do you know what time they are doing the inspection? I think we're going to try and see this one!

Thanks!
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Monday, September 20, 2021 12:13 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Vincent, Malayika M. <vincenMM@dhec.sc.gov>

Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***


Caitlin & Malayika,

We have the second drain inspection work scheduled for September 30th (next week Thursday).

Thanks!!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

RE: Quick Pantry # 19

Mark Lee Keller <mkeller131@comcast.net>


Wed 9/22/2021 2:09 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

They gave me a verbal quote. 2 excavators, pickup, deliver, taxes, \$3,310.13. That is only for the excavators. That doesn't put a man in the seat, feed him, get him there, or keep him there overnight for the week. We need two operators and two helpers. There will be hand shoveling involved no doubt. We must cut this trench so it is safe should a person or animal fall into it, they must be able to get out. We also have to install the booms once the trench is completed. We will leave the soil we excavate next to the excavation.

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Wednesday, September 22, 2021 1:43 PM
To: mkeller131@comcast.net
Subject: Re: Quick Pantry # 19

Hey Mark,

Can you send me a copy of the pricing for the two excavators? I can show it to Finance and see what they think.

Thanks!
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Wednesday, September 22, 2021 12:34 PM
To: mkeller131@comcast.net <mkeller131@comcast.net>
Subject: Re: Quick Pantry # 19

Hey Mark,

Let me get with Ashleigh and our finance people to see if we can get some clarity on that.

Thanks!
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Wednesday, September 22, 2021 12:29 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Quick Pantry # 19

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,


I am trying to put this plan together for the excavation work at Quick Pantry # 19. I have pricing for two excavators. We have experience running excavators and we know what we want done. How am I supposed to use the approved costs to make this work? We don't have a line item for excavators, for

operators, hotels, fuel, helpers, nothing. I have no idea how I can make what we want done fit into the cost agreement structure. Please advise on that and I will get it done.

Thanks!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

Re: UST# 04785 - Quick Panty 19

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Thu 9/23/2021 2:47 PM

To: Mousseau, Preston A. <MoussePA@dhec.sc.gov>

Awesome, I will let him know to meet us down there in the morning.

Thanks,
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mousseau, Preston A. <MoussePA@dhec.sc.gov>

Sent: Thursday, September 23, 2021 2:45 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: UST# 04785 - Quick Panty 19

Sure. That will be fine.

Preston Mousseau

Environmental Health Manager

UST Management Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0620

Cell: (803) 608-1309

Connect: www.scdhec.gov [Facebook](#) [LinkedIn](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Sent: Thursday, September 23, 2021 2:43 PM

To: Mousseau, Preston A. <MoussePA@dhec.sc.gov>

Subject: Re: UST# 04785 - Quick Panty 19

Hey Preston,

I was talking to Read about this since it will eventually be his site, is it ok if he comes with us?

Caitlin Reilly

Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mousseau, Preston A. <MoussePA@dhec.sc.gov>
Sent: Wednesday, September 22, 2021 4:00 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: UST# 04785 - Quick Panty 19

You are welcome!

The contractor said that he will be there around 9. Unfortunately, I probably cannot leave DHEC until 8:30. I will take the car clipboard home the night before and leave straight from the parking lot. If it is okay with you, could meet me out back by the state cars?

Thanks,

Preston Mousseau
Environmental Health Manager
UST Management Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0620
Cell: (803) 608-1309
Connect: www.scdhec.gov [Facebook](#) [LinkedIn](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Wednesday, September 22, 2021 2:27 PM
To: Mousseau, Preston A. <MoussePA@dhec.sc.gov>
Subject: Re: UST# 04785 - Quick Panty 19

This is perfect, thank you!

And yes, I would love to tag along. What time are you heading out on Friday?

Caitlin Reilly
Hydrogeologist

Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mousseau, Preston A. <MoussePA@dhec.sc.gov>
Sent: Wednesday, September 22, 2021 2:18 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Re: UST# 04785 - Quick Panty 19

Hey Caitlin,

Carolyn and I went to the facility to do a suspected release investigation to see if we could find any issues with the UST system. The facility has 3 tanks. The ATG console has them listed as T-1 4K Premium, T-2 4K RUL (middle tank), and T-3 5K Plus. The plus tank is now a second RUL tank. On the parking lot concrete, T-2 is labeled 1 and T-3 is labeled 2. The T-2 was cited for not having release detection records. It appears that the contractor tested the 5K RUL (T-3) that was labeled 2 on the concrete. That tank failed. The owner pumped out T-2 (that was originally cited) but T-3 5K RUL is still being used. The operator had one RUL line (T-2) capped off under the dispensers. He mentioned that he was having some problems with low flow during dispensing.

I spoke to the contractor. They are scheduled to come on Friday to do tank tightness tests, line tightness test, and leak detector function checks on all tanks.

Also- If you would like to join, let me know.

Thanks,

Preston Mousseau
Environmental Health Manager
UST Management Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0620
Cell: (803) 608-1309
Connect: www.scdhec.gov [Facebook](#) [LinkedIn](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Wednesday, September 22, 2021 1:37 PM
To: Mousseau, Preston A. <MoussePA@dhec.sc.gov>
Subject: UST# 04785 - Quick Panty 19

Hey Preston,

I have to send Don and Henry a weekly update on this site, and I was wondering if you could write up a few sentences explaining what you and Carolyn did on Monday and what is scheduled for Friday. I can add it to my update for this week.

Thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



Re: G's Email Address

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Thu 9/23/2021 9:45 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Mark,

Thank you! I will be sending a follow up email later today to G and Mr. Patel about our conversation Monday, I just wanted to give you a heads up.

Thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Monday, September 20, 2021 5:35 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: G's Email Address

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,

Here is G's email address:

Jaitendra107@yahoo.com

Thanks!

Mark

Mark L. Keller, PG

President

 **KLM Environmental, LLC**

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

Quick Pantry 19

Mark Keller <mkeller131@comcast.net>

Tue 9/28/2021 8:45 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>

*** Caution: This is an EXTERNAL email, DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin and Ashley

There has been a new incident at Quick Pantry 19 I was alerted to about 5 minutes ago. The fuel company yesterday evening dropped the delivery in the red tagged tank. That was not discovered by the store owner until this morning when he had no gas to sell. He called the fuel company and they told him they had delivered yesterday evening. He checked his tank and it was empty. He checked the out of service tank and the fuel was present. He attempted to call the delivery company and called me as well to be advised on what to do. We called the delivery company on 3 way and left a message and I called again a few moments later to leave another message. G estimates 500 gallons has already been released. The fuel company is Tucker Oil. I am waiting to hear back to get this fuel removed ASAP as the release is ongoing at this time. I am unclear as to how the delivery occurred in the tagged tank with the lid painted black as required. This is no fault of the store owner. I wanted to update both of you immediately once I got this news. I am working the problem and will update you as soon as I have information.

Mark

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

Re: Quick Pantry 19

Thrash, Ashleigh <thrasham@dhec.sc.gov>

Tue 9/28/2021 9:37 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Thank you Mark for the updates! We have forwarded this info on to Regulatory and we will get back with you.

Ashleigh

Ashleigh Thrash, P.G.
Section Manager, Assessment & Non-Permitted Petroleum
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0607
Cell: (803) 608-1765
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

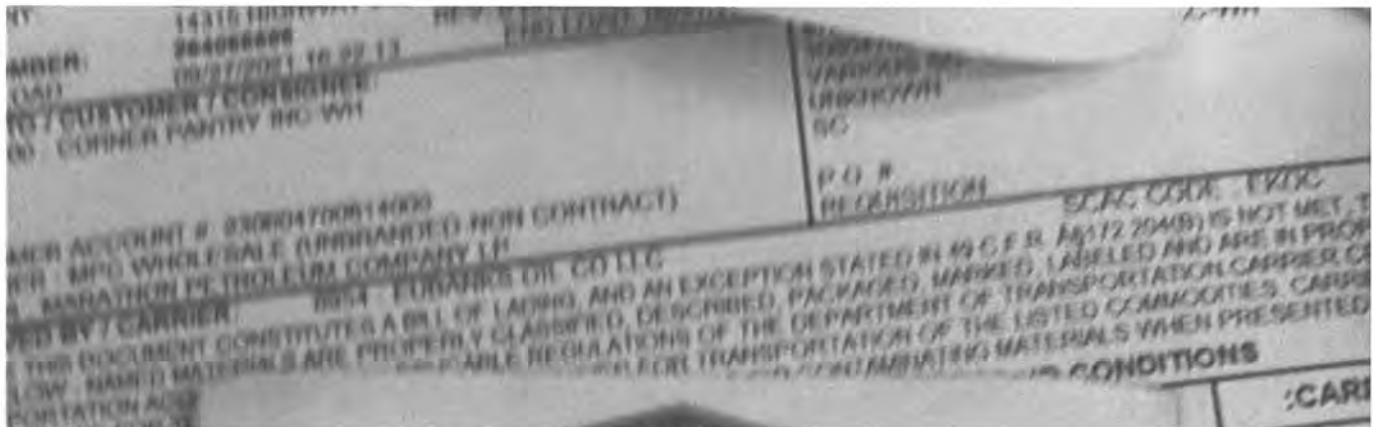
Sent: Tuesday, September 28, 2021 8:59 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: Fwd: Quick Pantry 19

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Update: the fuel company that dropped the product in the wrong tank is Eubanks Oil from Taylors, SC. I spoke with their representative, Mr. Terry Snow. He is dispatching a pump to move the product from the out-of-service tank to the proper tank. Their direct phone line is 864-439-7052. Photographs are attached for information. The store received a delivery of 3400 gallons. His probe shows 3,036 gallons in his tank currently. I am not sure how accurate that probe is since it's been out of service but there is a discrepancy there. The store did complete the tank and line tightness testing requested by Denise Place on Friday. I have not seen the results myself but was told the other tanks and lines passed. I will update you once the transfer of fuel is completed.



EUBANKS OIL

159712

1-800-42

PO BOX 870
TAYLORS, SC 29687
(864) 439-7052 • info@eubanksoil.com

Date: 2-27-21
Customer: Truck oil quick delivery
Address: 1902 Main St Greenville

PAYMENT RECEIVED		TRUCK #	DRIVER
CASH	CREDIT CARD	<u>26</u>	<u>Tracy</u>
CHECK #:	PO #:		

PRODUCT	GALLONS DELIVERED	PRICE	TOTAL AMOUNT
RT Kerosene			
#2 FUEL OIL (NON-HWY ALSO DYED)			
HWY ULSD (CLEAR)			
#10 GAS <u>87</u>	<u>3400</u>		
NON-ETHANOL GAS <u>F73</u>	<u>600</u>		
*#2 FUEL OIL IS DYED DIESEL FUEL. NONTAXABLE USE ONLY; PENALTY FOR TAXABLE USE. NOT LEGAL FOR USE IN HIGHWAY VEHICLES.		SALES TAX	
		TOTAL	

DELIVERY RECEIVED:

The undersigned agrees to pay for the goods/services listed above.

X: Deanna Johnson

TOTAL QU

GROSS NET

2,899	2,869
1,001	991
500	495
599	591
4,400	4,351
599	591

FOR DESTINATIO

S TRANSPORTA
THE REQUIREMEN

GOOD CONDITIO

INVALID FUEL LEVEL

DELIVERY NEEDED

LOW PRODUCT ALARM

DELIVERY NEEDED

INVENTORY REPORT

T 1:PREMIUM
 T 1:INVALID FUEL LEVEL
 VOL INVALID = 306 GALS
 ULLAGE = 3705 GALS
 90% ULLAGE = 3303 GALS
 TC VOLUME = 301 GALS
 HGT INVALID = 8.32 INCHES
 WATER VOL = 49 GALS
 WATER = 2.42 INCHES
 TEMP = 80.6 DEG F

T 2:REG. UNLD
 VOLUME = 3036 GALS
 ULLAGE = 975 GALS
 90% ULLAGE = 573 GALS
 TC VOLUME = 2997 GALS
 HEIGHT = 45.32 INCHES
 WATER VOL = 0 GALS
 WATER = 0.00 INCHES
 TEMP = 78.1 DEG F

T 3:PLUS
 VOLUME = 410 GALS
 ULLAGE = 4603 GALS
 90% ULLAGE = 4101 GALS
 TC VOLUME = 404 GALS
 HEIGHT = 13.08 INCHES
 WATER VOL = 0 GALS
 WATER = 0.00 INCHES
 TEMP = 79.9 DEG F



Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

Begin forwarded message

From: Mark Keller <mkeller131@comcast.net>
Date: September 28, 2021 at 8:44:53 AM EDT
To: "Caitlin M. Reilly" <reillycm@dhec.sc.gov>
Cc: Ashleigh Thrash <thrasham@dhec.sc.gov>
Subject: Quick Pantry 19

Resized_20210928_164829.jpeg

Mark Keller <mkeller131@comcast.net>

Tue 9/28/2021 5:05 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

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Caitlin and Ashley

The fuel company hired E Labs to transfer the fuel from the out of service tank to the correct tank. Upon completion just moment ago, finally, they presented this form to our client for signature. Obviously this is a contractor selection form. Most alarming to me is E Lab is a Class II contractor and as such is not authorized to handle this level of work as they do not have the proper classification. We have advised our client not to sign this form as it has nothing to do with fuel transfer, and they are not experienced nor licensed to make decisions needed for this type of project as they are not a Class I contractor. Does the SCDHEC allow sites to be assigned to Class II contractors? A Class II can not even produce a monitoring report as that must be stamped by a licensed professional. Please advise me on that as this seems highly irregular bordering on circumventing the contractor verification system.

dhec		Owner/Operator Contractor Selection Form Underground Storage Tank (UST) Management Division	
1. CONTRACTOR OF CHOICE			
As the current or former UST Owner/Operator and the designated party responsible for the confirmed release reported on the state and permit number provided.		Date: 1/7/19	Permit Number: 04785
I would like to use the contractor listed below and request that they represent me for:		<input type="checkbox"/> Directed work scope? <input checked="" type="checkbox"/> All future site rehabilitation scopes, except pay-for-performance contract solicitation.	
Name of Contractor: Environmental Laboratories Inc.			
Address: 15 Sulphur Springs Rd			
City: Greenville		State: SC	Zip: 29617
Telephone Number: (864) 379-0637		UIC Number: 420	
<small>NOTE: After September 30, 1997, rehabilitation activities must be performed by a S.C. Certified Site Rehabilitation Contractor per Section 84-5-120(A) of the SUPERS Act and Section IV(A) of the S.C. DHEC SUPERS Site Rehabilitation and Fund Access Regulation R.61-98.</small>			
2. FINANCIAL OR FAMILIAL RELATIONSHIP			
Does a financial or familial relationship, as defined below, exist between you and the contractor/person that you listed above?		<input type="radio"/> Yes <input checked="" type="radio"/> No	O/O Initial:
<small>FINANCIAL RELATIONSHIP: A connection or association through a material interest of sources of income which exceed five percent of annual gross income from a business entity.</small>			
<small>FAMILIAL RELATIONSHIP: A connection or association by family or relatives, in which a family member or relative has a material interest. Family or relatives include: father, mother, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother, half sister, mother-in-law, son-in-law, daughter-in-law, step-grandparent, step-grandchild, step-great-grandparent, step-great-grandchild or fiancée.</small>			

grandparent, grandchild, great-grandchild, etc.

3. PAYMENT

A. The first \$25,000.00 in eligible site rehabilitation costs for releases reported subsequent to July 1, 1993 will be applied against the applicable SUPERS deductible per Section 44-2-40(D) of the SUPERB Act, upon submittal of the canceled check (front and back) or a notarized statement from the contractor verifying payment.

B. For eligible costs exceeding the \$25,000.00 deductible, you can pay the contractor and, upon the submittal of the canceled check (front and back) or a notarized statement from the contractor verifying payment, be compensated from the SUPERB Account, or have payment issued directly from the SUPERS Account to the contractor. (Check one.)

For eligible costs exceeding the deductible, I request that payment be made to me after I have paid the contractor. O/O Initial: _____

- OR -

For eligible costs exceeding the deductible, I request that payment be made directly to the contractor. O/O Initial: _____

C. If the release qualifies under amnesty (reported prior to July 1, 1993) per Section 44-2-40(B) of the SUPERB Act, you can pay the contractor and be compensated from the SUPERS Account, or have payment issued directly from the SUPERB Account to the contractor. (Check one.)

For eligible costs, I request that payment be made to me after I have paid the contractor. O/O Initial: _____

- OR -

For eligible costs, I request that payment be made directly to the contractor. O/O Initial: _____

NOTE: As required by the SUPERB Act, all costs must receive prior financial approval from DHEC regardless of payment option.

4. HOST OWNER, OPERATOR OR PARTY RESPONSIBLE FOR ABOVE REFERENCED RELEASE

Signature: _____ Date Signed: 9-28-21

Printed Name: _____ Telephone Number: () _____

Affiliation (if applicable): _____ Email Address: mark.keller@klmenv.com

DHEC 3244 (10/2017) SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Mark L. Keller, PG
 President
 KLM Environmental, LLC
 PO Box 2704
 Goose Creek, SC 29445
 Phone 843-870-4285
 Fax 843-797-1893
 Office 843-797-7884

04785

Mark Keller <mkeller131@comcast.net>

Thu 9/30/2021 9:08 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

This is the tank lid label. We are ensuring the tank volume is less than 1 inch as required. This is for your records.

Thanks

Mark





Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7834

Re: UST # 04785

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Thu 8/19/2021 3:37 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Oh boy! I'll tell Malayika to get ready! Haha

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Thursday, August 19, 2021 2:10 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Awesome! Next you guys get to learn the vac truck. I'd see you there.

Mark

Mark L. Keller, PG

President

KLM Environmental, LLC

PO Box 2704

Goose Creek, SC, 29445

Phone 843-870-4285

Fax: 843-797-1693

Office: 843-797-7884

On Aug 19, 2021, at 1:39 PM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Hey Mark,

Malayika and I are both planning on being there to 26th to see the pipe inspection, see you then!

Thanks,
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Wednesday, August 18, 2021 2:22 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Vincent, Malayika M. <vincenMM@dhec.sc.gov>
Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin & Malayika,

We will begin sampling the monitoring wells at this site on Wednesday, August 25th. It will take at least 2 days due to the travel, possibly 3. We also have the pipe cleaning/inspection set to start on August 26th ending at an unknown time. Hope to you all there.

Mark

Mark L. Keller, PG
President

KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

UST # 04785

Mark Lee Keller <mkeller131@comcast.net>

Fri 8/27/2021 12:09 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,

Here is a map of what we currently have at the site after the information we gathered yesterday. As you know, one of our personnel experienced a medical issue related to the heat and we were forced to stop work on the sampling. That only gives us a partial picture here. We have not gauged wells MW-19, MW-22, MW-23, or MW-24 but you and I gauged MW-20 yesterday so I feel good that free product didn't extent to 22, 23, or 24.

So, we found out on 8.25.21 when the sampling started that the recovery rates at the site are the slowest we have ever encountered. We purged the first well and it immediately went dry with our variable speed pump set on its slowest setting. The sampling crew moved to the next well and the same occurred. After an hour wait, only 3 inches of water had even returned to the first well, which a bailer won't hold as the check ball can not seat. This is an important issue as we discussed yesterday.

When we did the initial round of probing, we installed 10 temporary wells which were allowed to sit for 24 hours, which is customary, to attempt to delineate the free product. As noted in what we submitted previously, only 4 of those wells showed product, and at minimal thickness with the exception of TW -3 at 0.78 feet in thickness. That is why we were extremely surprised when on 8.25.21, we measured free product in 16 wells across the site, with all wells on the store property containing free product with the exception of the deep monitoring well and MW-6 to the south of the store.

We noted another issue as free product was detected on the Foundry property in MW-14 at a thickness of 2.37 feet. We probed in the same location previously and no contaminants were detected. I have been looking over all the data we have generated and it seems we probed too deep in some areas based on the depths to water we are seeing now that the wells have been installed. I am not sure if we have an artesian situation, but I can state these facts. When we did the first 3 probe holes off site on the Smith property, which started the second round of probing, on 5.17/21, we installed probe points GP-36 and GP-37. We installed GP-36 to a depth of 15 feet and GP-37 to a depth of 20 feet below land surface, then pulled back to deploy the drop screen. The screening ended up being 11-14 feet bls at GP-36, and 16-20 feet bls at GP-37. We used this approach as we had no groundwater elevation data anywhere off site, and only 1 point on site. Those two points were left in hole while the decon pit was constructed and the laboratory was set up and calibrated. We returned to the holes after one hour and found both holes were dry. We then installed subsequent points immediately adjacent to these two locations to a depth of 25 feet bls which ended up with a screening interval of 21-25 feet bls. Those holes made water so it was surmised that at that particular surface elevation, probing needed to be conducted to a depth of 25 feet bls screening 21-25. This approach was used in an attempt to determine the groundwater depth at multiple surface elevations throughout the probing process. There is a 32 foot surface elevation change across the site in general but as you well know, the site is very complicated. In any event, this approach led to some points being screened below where we are seeing free product now. The contaminant plume we determined is very close to what we found in the wells, but we have the free product on the Foundry property where free product was measured at 8.01-10.38 feet bls. Probing in that area was completed to the same depth at the probing at GP-36 and GP-37 as that area of the foundry appeared to be in the same surficial elevation. We now benefit from a surveyed map of all the probe points as we ordered it once probing was completed for fear of losing the locations from overgrowth. That map is attached. It turns out those elevations were within 4 feet. We feel that

the extremely slow transmissivity we are seeing when purging is the reason we had dry probe holes despite being in the water bearing zone after well installation. We made our probe holes shallower as we moved down in elevation towards the drainage ditch/creek area as we were under the thought it was a groundwater intersect. It appears it only partially intersects the groundwater but isn't a divide as we have contaminants detected past the ditch/creek.

So, with all that technical processing put in a nut shell, we have the issue of free product on the Foundry site and it not being delineated. It is clear temporary wells do not work over a 24 hour period as evidenced above. I know we need to delineate the product as this area is also a VCC under the Brownfields section and is slated for a park by the City of Greenwood. I would like recommendations on how you would like to proceed with that. We can install more wells over there or we can try installing temporary wells but they will need to sit for a minimum of 1 week in my opinion to be remotely effective.

On to the pipe inspection. We closed the lane on Foundry Rd. and brought in the jetter, camera truck, and my vac truck to handle the waste we generated. The pipe was jetted several times using several different attachments to remove any debris and prepare the pipe for the camera. The jetter was able to advance to between 100 and 140 feet up the drain pipe each trip. We then inserted the camera. Nothing significant was noted until approximately 29 feet into the pipe. At that point, a large area of poured concrete blocked the path of the camera. It appeared that this was from construction of a box drain or manway of some kind. We walked above the drain pipe to the approximate area and did a sweep with a metal detector looking for a covered lid that we could access the drain. No hits. We then used a probe rod and found a concrete lid that most likely was the area we could see in the camera inside the pipe. The workers at the time must have poured their remaining wet concrete into the manway before sealing it up. That was the block that the camera could not get passed. However, the pipe had been going up in elevation according to the technician running the camera and should not be intersecting the water table as we had only discovered 10 minutes prior the free product in MW-14 and the groundwater elevation there. At the same time, there was no fuel dripping from the pipe yesterday. It was also noted that much of the drainage ditch/creek was dry which we have never observed it dry there. The ditch/creek did have water in it near Foundry Rd. with a very strong fuel odor.

We then took the camera to a storm drain entrance at the corner of Foundry Rd. and Main street. We noted that in that manway, a pipe could be seen trending towards the Foundry property. We inserted the camera and they began advancing it. At the time the drain was dry but it had much sediment in it. At approximately 24 feet into the pipe, the sediment became too thick thus making the pipe too small for the camera to advance.

Taking all the information together and pondering it, I am making my best guess as to what may be occurring. Regarding the fuel dripping out of the drain at the side of the hill at Foundry: Now that we know free product is present on that site, it may only intersect a small portion of the drain system when the water table is high enough to allow that to happen. That is why we didn't see a change in the rate of the dripping product during the very hard rainfall event we experienced while probe work was conducted at the site. The rate never waivered so we surmised it wasn't fully dependent on a flow from an unknown intake. Now that we were there yesterday with evidence of the area having been dry for some time due to the drainage ditch/creek being dry, and no fuel dripping from the pipe, that may support my theory on the water table intersection. The storm drains are not transmitting the fuel between the store the Smith Property or the Foundry, but they may have created a conduit for it to travel beside or below those lines as the excavation done to install them would most certainly make for an easier transmissivity than what we see naturally based on the recharge rates. What is being smelled and observed at the crossing of the ditch/creek at Foundry where we have installed multiple containment booms is now shown to be a result of the gasoline detected in the monitoring wells in that area. We do not feel the free product is making is out per se as the booms are designed to absorb any product and they are not saturated. However, they are not designed to stop dissolved phase so that continues to daylight and the odor and flow of contaminants will continue. Based on the extent of free product and the thicknesses

gauged, which I will present below, this is a long term problem that will need active correction action to attempt to get under control.

This is the gauging data we have currently, as previously stated, we do not have all wells gauged and will be returning to complete the sampling as well as gauge all wells again in order to create a proper map. We can put that on hold pending direction on the delineation of free product in the area of MW-14 on the foundry site. Please let me know on that. As a side note, we have footage remaining under the directive as we did not use nearly all that we had approved for the specific purpose of a curve ball at some point.


MW-1: 17.06-17.75
MW-2: 17.03-18.36
MW-3: 18.31-18.35
MW-4: 16.98-18.99
MW-5: 15.27-17.73
MW-7: 11.45-11.92
MW-8: 10.45-13.53
MW-9: 11.03-11.09
MW-12: 10.30-10.49
MW-13: 7.91-11.18
MW-14: 8.01-10.38
MW-17: 3.78-3.81
MW-18: 6.27-6.31
RW-1: 18.08-19.03
RW-2: 17.00-17.98
RW-3: 17.25-18.05

A video will be sent to me of all the camera work inside the drainage pipes which I will send to you for inclusion in the file. Please advise on the product delineation so we know what to do.

Thanks!!

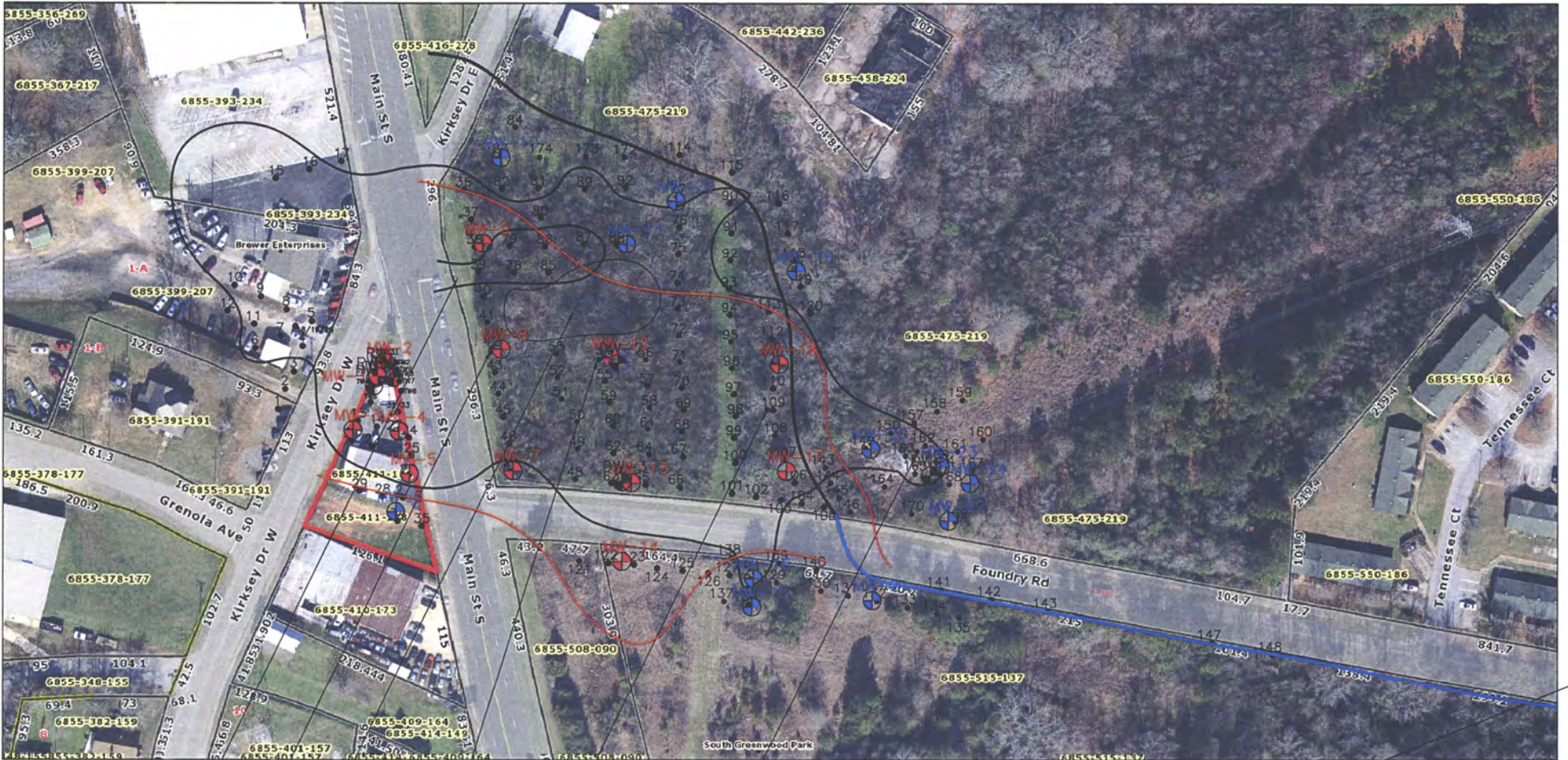
Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

Greenwood County, SC



June 11, 2021

No Contamination

181D/182D/183D
184D/185D/SB-2

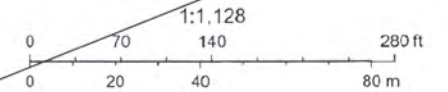
Debris Field

178D/179D
/180D/SB-3

181D/182D/183D
184D/185D/SB-2

171D

See Map 2 for More Locations



Map Layers, Greenwood County

Disclaimer: Map and parcel data are believed to be accurate, but accuracy is not guaranteed. This is not a legal document and should not be substituted for a title search, appraisal, survey, or for zoning verification.







Fwd: QP 19 Table

Mark Keller <mkeller131@comcast.net>

Thu 9/30/2021 5:19 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

Begin forwarded message:

From: Graham Robinson <grobinson2019@comcast.net>
Date: September 30, 2021 at 12:11:43 PM EDT
To: mkeller131@comcast.net
Subject: QP 19 Table

Graham Robinson
KLM Environmental LLC
grobinson2019@comcast.net
985-789-3065

TABLE 2
Historical Groundwater Data (feet)
Quick Pantry # 19
Greenwood, SC

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	GW Elevation
MW-1	8/25/21	623.56	X-28.5	17.06	17.75	FP
	9/1/21			17.35	18.02	FP
MW-2	8/25/21	623.38	10-20	17.03	18.36	FP
	9/1/21			17.32	18.51	FP
MW-3	8/25/21	625.10	10-20	18.31	18.35	FP
	9/1/21			18.51	18.56	FP
MW-4	8/25/21	623.30	10-20	16.98	18.98	FP
	9/1/21			17.18	19.19	FP
MW-5	8/25/21	622.12	10-20	15.27	17.73	FP
	9/1/21			15.38	17.92	FP
MW-6	8/25/21	622.84	10-20	--	14.35	608.49
	9/1/21			--	14.49	608.35
MW-7	8/25/21	614.92	8-18	11.45	11.92	FP
	9/1/21			11.59	11.87	FP
MW-8	8/25/21	615.10	5-15	10.45	13.53	FP
	9/1/21			10.63	13.89	FP
MW-9	8/25/21	615.58	7.5-17.5	11.03	11.09	FP
	9/1/21			11.32	11.36	FP
MW-10	8/25/21	608.68	2-12	--	3.62	605.06
	9/1/21			--	4.08	604.60
MW-11	8/25/21	606.78	4-14	--	6.76	600.02
	9/1/21			--	7.06	599.72
MW-12	8/25/21	611.62	7-17	10.30	10.49	FP
	9/1/21			10.39	10.95	FP
MW-13	8/25/21	610.45	5-15	7.91	11.18	FP
	9/1/21			8.08	11.22	FP
MW-14	8/25/21	608.36	5-15	8.01	10.38	FP
	9/1/21			8.07	10.32	FP
MW-15	9/1/21	610.20	5-15	--	7.89	602.31
MW-16	9/1/21	605.95	5-15	--	7.78	598.17
MW-17	8/25/21	601.53	3-13	3.78	3.81	FP
	9/1/21			3.94	3.99	FP
MW-18	8/25/21	604.03	4-14	6.27	6.31	FP
	9/1/21			6.37	6.42	FP
MW-19	9/1/21	605.81	5-15	--	9.07	596.74
MW-20	9/1/21	601.51	3-13	--	5.41	596.10

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	GW Elevation
MW-21	9/1/21	604.50	5-15	--	8.91	595.59
MW-22	9/1/21	600.57	5-15	--	8.81	591.76
MW-23	9/1/21	602.51	5-15	--	10.71	591.80
MW-24	9/1/21	602.73	5-15	--	11.05	591.68
MW-25	8/25/21	606.98	6-16	--	8.23	598.75
	9/1/21			--	8.31	598.67
RW-1	9/1/21	624.54	10-20	18.35	19.22	FP
RW-2	9/1/21	623.44	10-20	17.27	18.12	FP
RW-3	9/1/21	623.34	10-20	17.48	18.25	FP
DW-1	9/1/21	624.84	40-45	--	18.87	605.97
DW-2	9/1/21	611.79	35-40	--	9.46	602.33
DW-3	9/1/21	610.33	35-40	--	8.69	601.64
DW-4	9/1/21	602.27	20-25	--	10.47	591.80

Re: QP 19 Maps

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Thu 9/30/2021 6:01 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Awesome, thank you!!

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Thursday, September 30, 2021 5:18 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Fwd: QP 19 Maps

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Data is included on the map. The final report will be submitted next week.

Thanks!!

Mark

Mark L Keller, PG

President

KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

Phone 843-870-4285

Fax 843-797-1893

Office 843-797-7884

Begin forwarded message:

From: Graham Robinson <grobinson2019@comcast.net>

Date: September 30, 2021 at 11:53:06 AM EDT

To: mkeller131@comcast.net

Subject: QP 19 Maps

Graham Robinson
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 985-789-3065

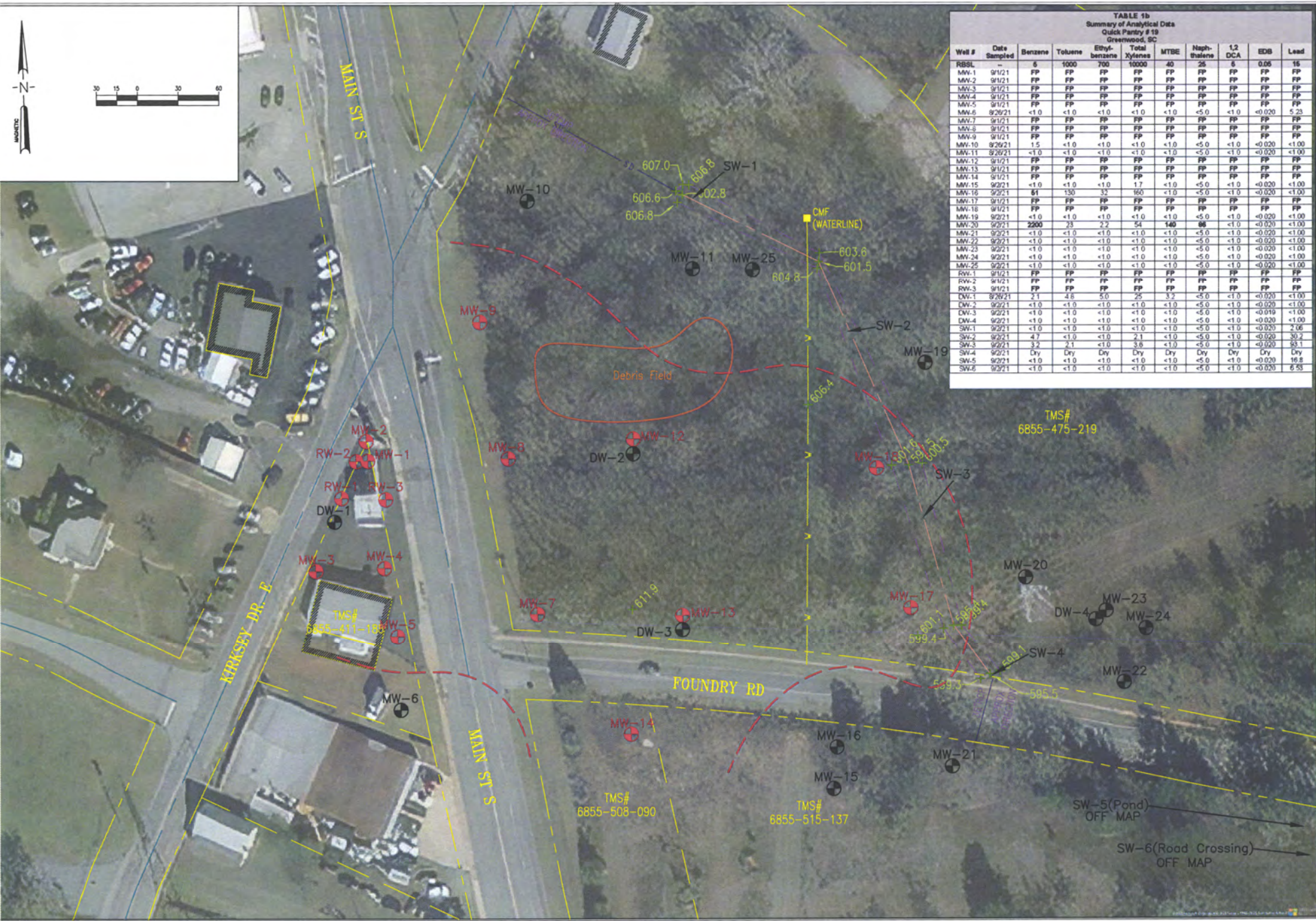
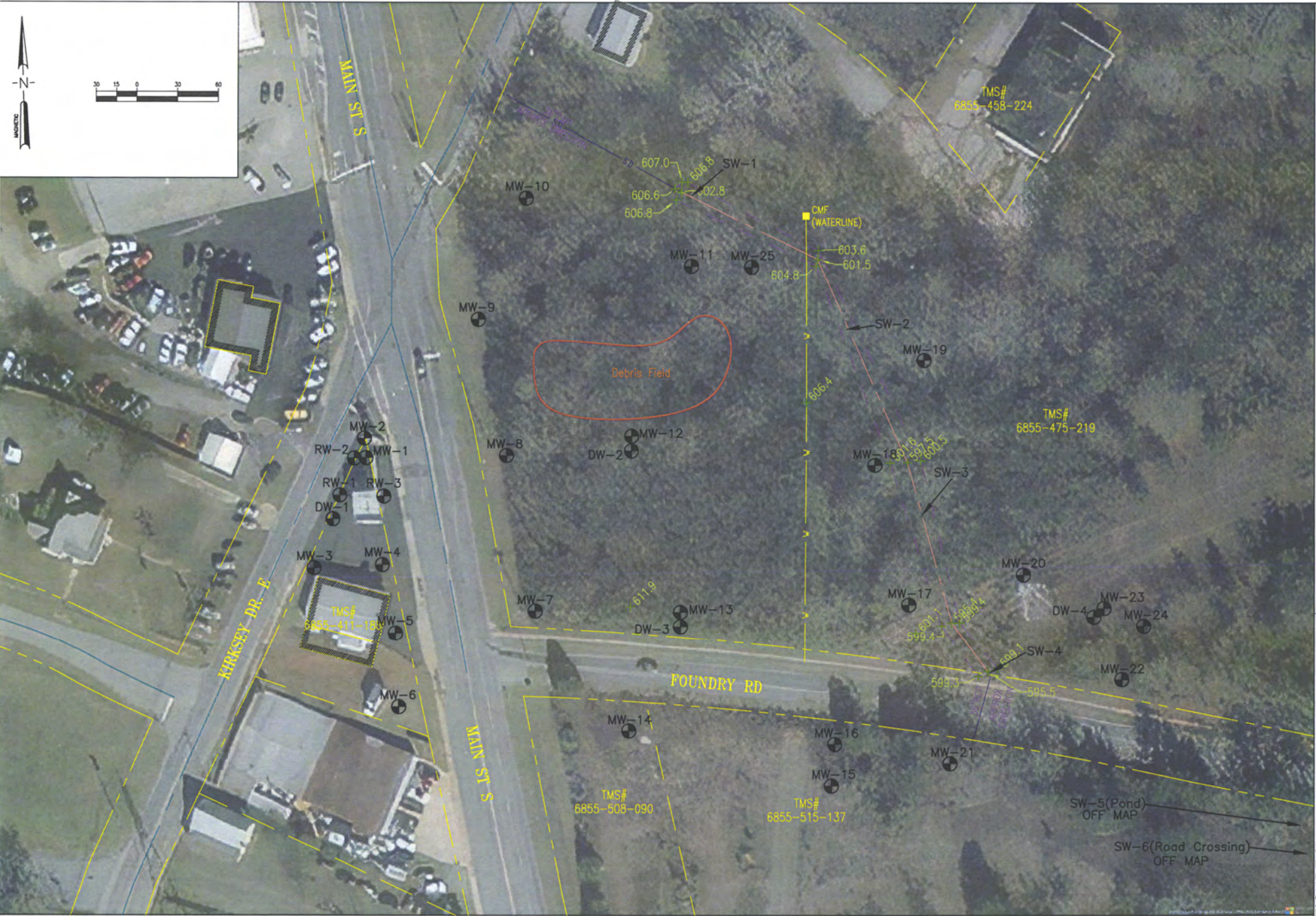


TABLE 1b
Summary of Analytical Data
Quick Pantry # 19
Greewood, SC

Well #	Date Sampled	Benzene	Toluene	Ethylbenzene	Total Xylenes	MTBE	Naphthalene	L2 DCA	EDB	Lead
RBSL		6	1000	700	10000	40	26	6	0.06	16
MW-1	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-2	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-3	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-4	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-5	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-6	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	5.23
MW-7	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-8	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-9	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-10	9/29/21	1.5	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-11	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-12	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-13	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-14	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-15	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-16	9/29/21	61	130	32	160	<1.0	<5.0	<1.0	<0.020	<1.00
MW-17	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-18	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
MW-19	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-20	9/29/21	2200	23	2.2	54	140	86	<1.0	<0.020	<1.00
MW-21	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-22	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-23	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-24	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
MW-25	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
RW-1	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
RW-2	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
RW-3	9/1/21	FP	FP	FP	FP	FP	FP	FP	FP	FP
DW-1	8/29/21	2.1	4.6	5.0	25	3.2	<5.0	<1.0	<0.020	<1.00
DW-2	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
DW-3	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
DW-4	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	<1.00
SW-1	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	2.06
SW-2	9/29/21	4.7	2.1	<1.0	3.8	<1.0	<5.0	<1.0	<0.020	30.2
SW-3	9/29/21	3.2	2.1	<1.0	3.8	<1.0	<5.0	<1.0	<0.020	89.1
SW-4	9/29/21	Dry	Dry	Dry	Dry	Dry	Dry	Dry	Dry	Dry
SW-5	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	16.8
SW-6	9/29/21	<1.0	<1.0	<1.0	<1.0	<1.0	<5.0	<1.0	<0.020	6.55

FIGURE 3c
FREE PRODUCT DELINEATION MAP
QUICK PANTRY # 19



Re: UST# 04785 - Quick Pantry 19

Mehta, Mihir <mehtam@dhec.sc.gov>

Fri 10/1/2021 12:02 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>

No worries at all, I was able to draft couple of statements and we are good for this week.

Thanks.

Mihir

Sent from my iPhone

On Oct 1, 2021, at 8:46 AM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Sorry I was out on site for the drain inspection so I didn't get a chance to see this, do you still need me to send something?

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mehta, Mihir <mehtam@dhec.sc.gov>

Sent: Thursday, September 30, 2021 8:38 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: Re: UST# 04785 - Quick Pantry 19

Yes - that would be good. About the incident and our presence.

Thanks

Mihir Mehta, P.E.

Director, UST Management Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0623

Mobile: (803) 240-1998

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Thursday, September 30, 2021 8:22 AM
To: Mehta, Mihir <mehtam@dhec.sc.gov>
Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: UST# 04785 - Quick Pantry 19

UST #04785 - Quick Pantry 19
Address: 1802 South Main Street, Greenwood SC 29646
County: Greenwood
Release Date: March, 3, 2021
RBCA Ranking: 1E
Responsible Party: Bahuchar Mata LLC
Consultant: KLM Environmental LLC

Today there will be an off-site storm drain cleaning/investigation on the adjacent VCC property to see if they have been impacted. No other work has been performed this week; we are still awaiting the Tier II assessment report due mid-October.

I wasn't sure if I needed to add a sentence or two about incident that happened Tuesday and possibility of a new release declared.

Thanks,
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



Re: UST #04785 Work Plan

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Mon 10/4/2021 3:35 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Hey Mark,

I talked this over with Read and Ashleigh and we can approve the gauging for now, actually the sooner we can get that done the better! We're all going to sit down and look over some of the Tier II and discuss the AFVR idea later this week and I'll get back to you about that. I'll get the notice to proceed letter made up tomorrow and sent out asap.

Thank you!

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Monday, October 4, 2021 12:51 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: UST #04785 Work Plan

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,

While we are working on what to do with the interception trench plan, I wanted to get this plan over to you for abatement AFVR events on the recovery wells we installed. I have also included gauging all of the wells to see if we have any effects from the reported new release that occurred. You had asked me about if we were going back so I thought it would be good to add this to the proposed work. Please let me know if you need anything!!!

Thanks

Mark

Mark L. Keller, PG

President

 KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell



Site-Specific Work Plan for Approved ACQAP Underground Storage Tank Management Division

To: Caitlin Reilly (SCDHEC Project Manager)
 From: Mark L. Keller, PG (Contractor Project Manager)
 Contractor: KLM Environmental, LLC UST Contractor Certification Number: 345

Facility Name: Quick Pantry # 19 UST Permit #: 04785
 Facility Address: 1802 S. Main Street, Greenwood, SC
 Responsible Party: Bahuchar Mata, LLC Phone: 864-378-6993
 RP Address: 311 Oakmonte Circle, Greenwood, SC 29649
 Property Owner (if different): SMVS Real Estate
 Property Owner Address: 1802 S. Main Street, Greenwood, SC 29646
 Current Use of Property: Convenience Store and Gasoline Station

Scope of Work (Please check all that apply)

- IGWA Tier II Groundwater Sampling GAC
 Tier I Monitoring Well Installation Other AFVR events and Well Gauging

Analyses (Please check all that apply)

Groundwater/Surface Water:

- BTEXNMDCA (8260D) Lead BOD Methane
 Oxygenates (8260D) 8 RCRA Metals Nitrate Ethanol
 EDB (8011) TPH Sulfate Dissolved Iron
 PAH (8270E) pH Other _____

Drinking Water Supply Wells:

- BTEXNMDCA (524.2) Mercury (200.8 245.1 or 245.2) EDB (504.1)
 Oxygenates & Ethanol (8260D) RCRA Metals (200.8)

Soil:

- BTEXNM Lead RCRA Metals TPH-DRO (3550B/8015B) Grain Size
 PAH Oil & Grease (9071) TPH-GRO (5030B/8015B) TOC

Air:

- BTEXN

Sample Collection (Estimate the number of samples of each matrix that are expected to be collected.)

_____ Soil _____ Water Supply Wells _____ Air _____ Field Blank
32 _____ Monitoring Wells _____ Surface Water _____ Duplicate _____ Trip Blank

Field Screening Methodology

Estimate number and total completed depth for each point, and include their proposed locations on the attached map.

of shallow points proposed: _____ Estimated Footage: _____ feet per point
 # of deep points proposed: _____ Estimated Footage: _____ feet per point

Field Screening Methodology: _____

Permanent Monitoring Wells

Estimate number and total completed depth for each well, and include their proposed locations on the attached map.

of shallow wells: _____ Estimated Footage: _____ feet per point
 # of deep wells: _____ Estimated Footage: _____ feet per point
 # of recovery wells: _____ Estimated Footage: _____ feet per point

Comments, if warranted:

UST Permit #: 04785 Facility Name: Quick Pantry # 19

Implementation Schedule (Number of calendar days from approval)

Field Work Start-Up: 45 days Field Work Completion: 90

Report Submittal: 90 # of Copies Provided to Property Owners: _____

Aquifer Characterization

Pump Test: Slug Test: (Check one and provide explanation below for choice)

Investigation Derived Waste Disposal

Soil: _____ Tons Purge Water: _____ Gallons

Drilling Fluids: _____ Gallons Free-Phase Product: _____ Gallons

Additional Details For This Scope of Work

For example, list wells to be sampled, wells to be abandoned/repared, well pads/bolts/caps to replace, details of AFVR event, etc.

Perform two 96 hour AFVR events at the site on the recovery wells located around the tank basin.

Gauge all wells at the site to determine if any impact has occurred from a purported new release recently reported at the site.

Compliance With Annual Contractor Quality Assurance Plan (ACQAP)

N/A Laboratory as indicated in ACQAP? (Yes/No) If no, indicate laboratory information below.

Name of Laboratory: _____

SCDHEC Certification Number: _____

Name of Laboratory Director: _____

N/A Well Driller as indicated in ACQAP? (Yes/No) If no, indicate driller information below.

Name of Well Driller: _____

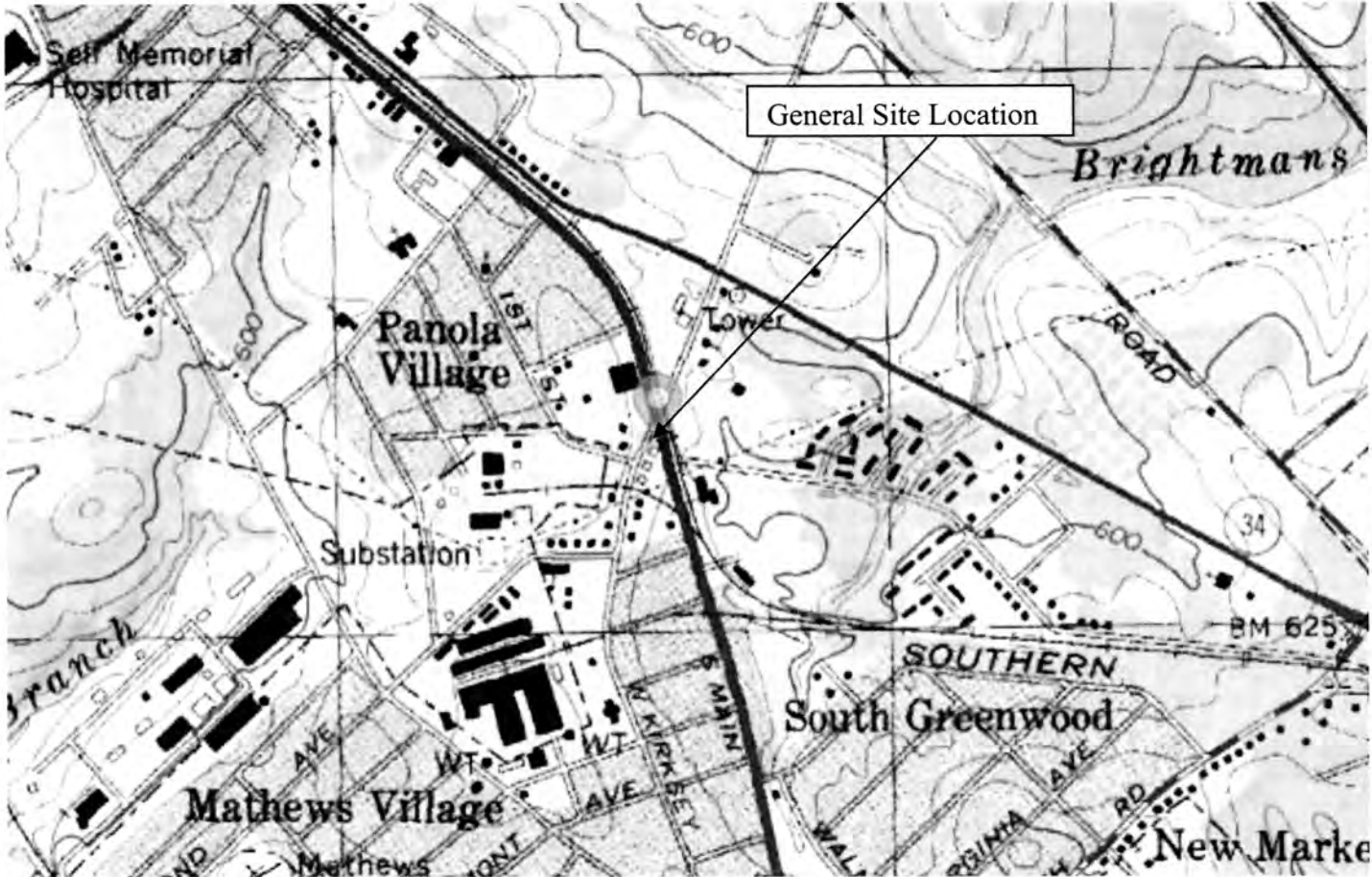
SCLLR Certification Number: _____

____ Other variations from ACQAP. Please describe below.

Attachments

1. Attach a copy of the relevant portion of the USGS topographic map showing the site location.
2. Prepare a site base map. This map must be accurately scaled, but does not need to be surveyed. The map must include the following:

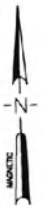
North Arrow	Proposed monitoring well locations
Location of property lines	Legend with facility name and address, UST permit number, and bar scale
Location of buildings	Streets or highways (indicate names and numbers)
Previous soil sampling locations	Location of all present and former ASTs and USTs
Previous monitoring well locations	Location of all potential receptors
Proposed soil boring locations	
3. Assessment Component Cost Agreement, SCDHEC Form D-3664



KLM Environmental, LLC

Phase I Phase II Underground Storage Tanks Soil & Water Sampling Well Installation

Figure 1
 USGS Map
 Quick Pantry # 19
 Greenwood, SC
 UST # 04785





**ASSESSMENT COMPONENT COST AGREEMENT
SOUTH CAROLINA**

Department of Health and Environmental Control
Underground Storage Tank Management Division
State Underground Petroleum Environmental Response Bank Account
January 1, 2020

Facility Name: Quick Pantry ! 19

UST Permit #: 04785

Cost Agreement #: _____

ITEM	QUANTITY	UNIT	UNIT PRICE	TOTAL
A. Plan Preparation				
1. Site-specific Work Plan	1	each	\$160.05	\$160.05
2. Tax Map		each	\$74.69	\$0.00
3. Tier II or Comp. Plan /QAPP Appendix B		each	\$250.00	\$0.00
B. Receptor Survey *				
		each	\$587.92	\$0.00
C. Survey (500 ft x 500 ft)				
1. Comprehensive Survey		each	\$1,109.68	\$0.00
Subsurface Geophysical Survey				
2. < 10 meters below grade		each	\$1,387.10	\$0.00
3. > 10 meters below grade		each	\$2,464.77	\$0.00
4. Geophysical UST or Drum Survey		each	\$970.97	\$0.00
D. Mob/Demob				
1. Equipment		each	\$1,088.34	\$0.00
2. Personnel	1	each	\$451.34	\$451.34
3. Adverse Terrain Vehicle		each	\$533.50	\$0.00
E.. Soil Borings (hand auger)*				
		foot	\$5.34	\$0.00
F. Soil Borings (requiring equipment, push technology, etc) or Field Screening (including water ssample, soil sample, soil gas sample, etc.)*				
1. Standard		per foot	\$16.01	\$0.00
2. Fractured Rock		per foot	\$21.55	\$0.00
G. Soil Leachability Model				
		each	\$64.02	\$0.00
H. Abandonment (per foot)*				
1. 2" diameter or less		per foot	\$3.31	\$0.00
2. Greater than 2" to 6" diameter		per foot	\$4.80	\$0.00
3. Dug/Bored well (up to 6 feet diameter)		per foot	\$16.00	\$0.00
I. Well Installation (per foot)*				
1. Water Table (hand augered)		per foot	\$11.31	\$0.00
2. Water Table (drill rig) 2" Diameter		per foot	\$40.55	\$0.00
3. Telescoping		per foot	\$53.35	\$0.00
4. Rock Drilling		per foot	\$61.89	\$0.00
5. 2" Rock Coring		per foot	\$32.97	\$0.00
6. Rock Multi-sampling ports/screens		per foot	\$35.64	\$0.00
7. Recovery Well (4" diameter)		per foot	\$48.02	\$0.00
8. Pushed Pre-packed screen (1.25" dia)		per foot	\$16.01	\$0.00
9. Rotasonic (2" diameter)		per foot	\$46.95	\$0.00
10. Re-develop Existing Well		per foot	\$11.74	\$0.00

J. Groundwater Sample Collection / Gauge Depth to Water or Product *				
1. Groundwater Purge		per well	\$64.02	\$0.00
2. Air or Vapors		sample	\$12.80	\$0.00
3. Water Supply Sample or Duplicate		sample	\$23.47	\$0.00
4. Groundwater No Purge or Duplicate or Grab		sample	\$29.88	\$0.00
5. Gauge Well only	32	sample	\$7.47	\$239.04
6. Sample Below Product		sample	\$12.80	\$0.00
7. Passive Diffusion Bag		sample	\$27.74	\$0.00
8. Field Blank		sample	\$26.25	\$0.00
9. Groundwater (low flow purge)		sample	\$97.10	\$0.00
10. Equipment Blank		sample	\$26.25	\$0.00
K. Laboratory Analyses-Groundwater				
1. BTEXNM+Oxyg's+1,2 DCA+Eth(8260B)		per sample	\$130.17	\$0.00
2. Lead, Filtered		per sample	\$14.72	\$0.00
3. Rush EPA Method 8260B		per sample	\$163.89	\$0.00
4. Trimethal, Butyl, and Isopropyl Benzenes		per sample	\$29.88	\$0.00
5. PAH's		per sample	\$64.66	\$0.00
6. Lead		per sample	\$17.07	\$0.00
7. EDB by EPA 8011		per sample	\$48.23	\$0.00
8. EDB by EPA Method 8011 Rush		per sample	\$72.77	\$0.00
9. 8 RCRA Metals		per sample	\$67.65	\$0.00
10. TPH (9070)		per sample	\$43.75	\$0.00
11. PH		per sample	\$5.55	\$0.00
12. BOD		per sample	\$21.34	\$0.00
13. Ethanol		per sample	\$15.79	\$0.00
K. Analyses-Drinking Water				
14. BTEXNM+1,2 DCA (524.2)		per sample	\$132.36	\$0.00
15. 7-OXYGENATES & ETHANOL (8260B)		per sample	\$97.90	\$0.00
16. EDB (504.1)		per sample	\$84.83	\$0.00
17. RCRA METALS (200.8)		per sample	\$106.70	\$0.00
K. Analyses-Soil				
18. BTEX + Naphth.		per sample	\$68.29	\$0.00
19. PAH's		per sample	\$68.33	\$0.00
20. 8 RCRA Metals		per sample	\$60.18	\$0.00
21. TPH-DRO (3550C/8015C)		per sample	\$42.68	\$0.00
22. TPH- GRO (5035B/8015C)		per sample	\$38.37	\$0.00
23. Grain size/hydrometer		per sample	\$110.97	\$0.00
24. Total Organic Carbon		per sample	\$32.65	\$0.00
K. Analyses-Air				
25. BTEX + Naphthalene		per sample	\$230.47	\$0.00
K. Analyses-Free Phase Product				
26. Hydrocarbon Fuel Identification		per sample	\$380.92	\$0.00
L. Aquifer Characterization*				
1. Pumping Test		per hour	\$24.54	\$0.00
2. Slug Test		per test	\$203.80	\$0.00
3. Fractured Rock		per test	\$106.70	\$0.00

M. Free Product Recovery Rate Test*		each	\$40.55	\$0.00
N. Fate/Transport Modeling				
1. Mathematical Model		each	\$106.70	\$0.00
2. Computer Model		each	\$106.70	\$0.00
O. Risk Evaluation				
1. Tier I Risk Evaluation		each	\$320.10	\$0.00
2. Tier II Risk Evaluation		each	\$106.70	\$0.00
P. Subsequent Survey*		each	\$260.00	\$0.00
Q. Disposal (gallons or tons)*				
1. Wastewater		gallon	\$0.60	\$0.00
2. Free Product		gallon	\$0.53	\$0.00
3. Soil Treatment/Disposal		ton	\$64.02	\$0.00
4. Drilling fluids		gallon	\$0.45	\$0.00
R. Miscellaneous (attach receipts)				
		each	\$0.00	\$0.00
		each	\$0.00	\$0.00
		each	\$0.00	\$0.00
T. Tier I Assessment (Use DHEC 3665 form)				
1. Southeast Region		standard	\$11,026.00	\$0.00
2. All Other Counties		standard	\$12,093.00	\$0.00
U. IGWA (Use DHEC 3666 form)				
1. Southeast Region		standard	\$3,803.00	\$0.00
2. All Other Counties		standard	\$4,123.00	\$0.00
22. Corrective Action (Use DHEC 3667 form)		PFP Bid		\$0.00
W. Aggressive Fluid & Vapor Recovery (AFVR)				
1. 8-hour Event*		per event	\$1,467.13	\$0.00
2. 24-hour Event*		per event	\$4,081.28	\$0.00
3. 48-hour Event*		per event	\$6,706.10	\$0.00
4. 96-hour Event*	2	per event	\$13,409.52	\$26,819.04
5. Off-gas Treatment 8 hour		per event	\$130.71	\$0.00
6. Off-gas Treatment 24 hour		per event	\$257.68	\$0.00
7. Off-gas Treatment 48 hour		per event	\$348.91	\$0.00
8. Off-gas Treatment 96 hour	2	per event	\$832.26	\$1,664.52
9. Off-gas Treatment 8 hour (w/chlorinated compounds)		per event	\$430.00	\$0.00
10. Off-gas Treatment 24 hour (w/chlorinated compounds)		per event	\$500.00	\$0.00
11. Off-gas Treatment 48 hour (w/chlorinated compounds)		per event	\$1,000.00	\$0.00
12. Off-gas Treatment 96 hour (w/chlorinated compounds)		per event	\$2,000.00	\$0.00
13. AFVR Effluent Disposal(w/chlorinated compounds)		gallon	\$0.50	\$0.00
14. AFVR Site Reconnaissance		each	\$216.87	\$0.00
15. Additional Hook-ups		each	\$27.48	\$0.00
16. AFVR Effluent Disposal	20000	gallon	\$0.47	\$9,400.00
17. AFVR Mobilization/Demobilization	2	each	\$417.73	\$835.46
X. Granulated Activated Carbon (GAC) filter system installation & service:				
1. New GAC System Installation*		each	\$2,027.30	\$0.00
2. Refurbished GAC Sys. Install*		each	\$960.30	\$0.00
3. Filter replacement/removal*		each	\$373.45	\$0.00
4. GAC System removal, cleaning, & refurbishment*		each	\$293.43	\$0.00
5. GAC System housing*		each	\$266.75	\$0.00

6. In-line particulate filter		each	\$160.05	\$0.00
7. Additional piping & fittings		foot	\$1.60	\$0.00
Y. Well Repair				
1. Additional Copies of the Report Delivered		each	\$53.35	\$0.00
2. Repair 2x2 MW pad*		each	\$53.35	\$0.00
3. Repair 4x4 MW pad*		each	\$93.90	\$0.00
4. Replace well vault*		each	\$125.91	\$0.00
5. Replace well cover bolts		each	\$2.77	\$0.00
6. Replace locking well cap & lock		each	\$16.00	\$0.00
7. Replace/Repair stick-up*		each	\$142.98	\$0.00
8. Convert Flush-mount to Stick-up*		each	\$160.05	\$0.00
9. Convert Stick-up to Flush-mount*		each	\$138.71	\$0.00
10. Replace missing/illegible well ID plate		each	\$12.80	\$0.00
S. Report Prep & Project Management	12%	percent	\$39,569.45	\$4,748.33
TOTAL				\$44,317.78

DHEC D-4074 (1-2020) *The appropriate mobilization cost can be added to complete these tasks, as necessary

Re: #04785

Thrash, Ashleigh <thrasham@dhec.sc.gov>

Mon 10/4/2021 10:42 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: jaitendra107@yahoo.com <jaitendra107@yahoo.com>

Thanks Mark!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>

Sent: Monday, October 4, 2021 10:38 AM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Cc: jaitendra107@yahoo.com <jaitendra107@yahoo.com>

Subject: #04785

*** Caution: This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Ashley and Caitlin,

I also wanted to forward this from our project file. This was taken of the tagged out tank the day we painted the lid black for the owner on 4/12/21. It shows the tank was tagged out. Please pass this along to regulatory if they need it.

Thanks

Mark

10:07 AT&T

4G LTE 90%

< **Mark Keller**
+18438704285



Monday, April 12, 2021



It has this
on it. Do you
still want me
to get a lock

7:34 PM



No lock.





Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

Re: UST # 04785

Thrash, Ashleigh <thrasham@dhec.sc.gov>

Mon 10/4/2021 9:50 AM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Mark, I was able to download the file. Thank you so much for all your help!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Monday, October 4, 2021 9:48 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Ashley and Caitlin,

Below is a link to download a copy of the Tier II Report for the Quick Pantry # 19 site. Please hold down the "control" key on your keyboard and click the link. This will allow a download. You can share the link as needed. The report went out in the mail on Saturday morning.

<https://spaces.hightail.com/receive/GgI4ehHwV0>

Please let me know if this is not successful and I will send copies of the figures by email. I also spoke with Eubank Oil on Friday. Mr. Snow told me he will not pay a dime toward the release. He said he had been contacted by SCDHEC on Friday before I called. I spoke with him at approximately 5:45 pm. I tried to explain the issue and the process but he was too angry to listen. I left it with him that we were at his service should he need it. I am sure that will be a very slow process to bring to bear.

Thanks!

Mark

Mark L. Keller, PG
President

KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

Fw: Greenwood

Thrash, Ashleigh <thrasham@dhec.sc.gov>

Thu 10/7/2021 11:10 AM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Julie Wilkie <julie.wilkie@gwdcity.com>

Sent: Thursday, October 7, 2021 8:41 AM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: Greenwood

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Ashleigh –

I wanted to follow up on the prelim findings on the City's park site (and surrounding sites) and what this may mean for our development timeline.

I know in previous conversations you mentioned a date of 9/21 to line up a call. So, it seemed like a good time to follow up.

Mark Keller was on site 9/30 and flushed and videoed the line we have been discussing. He sent me the video and I plan to review it this week. I do not know his assessment of what he found, as I was unable to be on site while the work was being performed.

We have monthly meetings on the Foundry site to give all partners progress updates. After our last call (9/13) Angela Gorman mentioned that she would like an on site visit after our call. In the addition, the following items were discussed and need some clarification:

1. Are there existing absorbent booms located on our site? If so, where? There seemed to be some thought that there may be some located where the pipe discharges onto our site.
2. Has any of the free product been removed from the ground?
3. Are there any concerns about the wetlands that are downstream from the City's site? (See attached)

Please let me know if you have any questions.

THANKS!

Julie

Julie M. Wilkie

City Manager

520 Monument St., PO Box 40

Greenwood, SC 29648

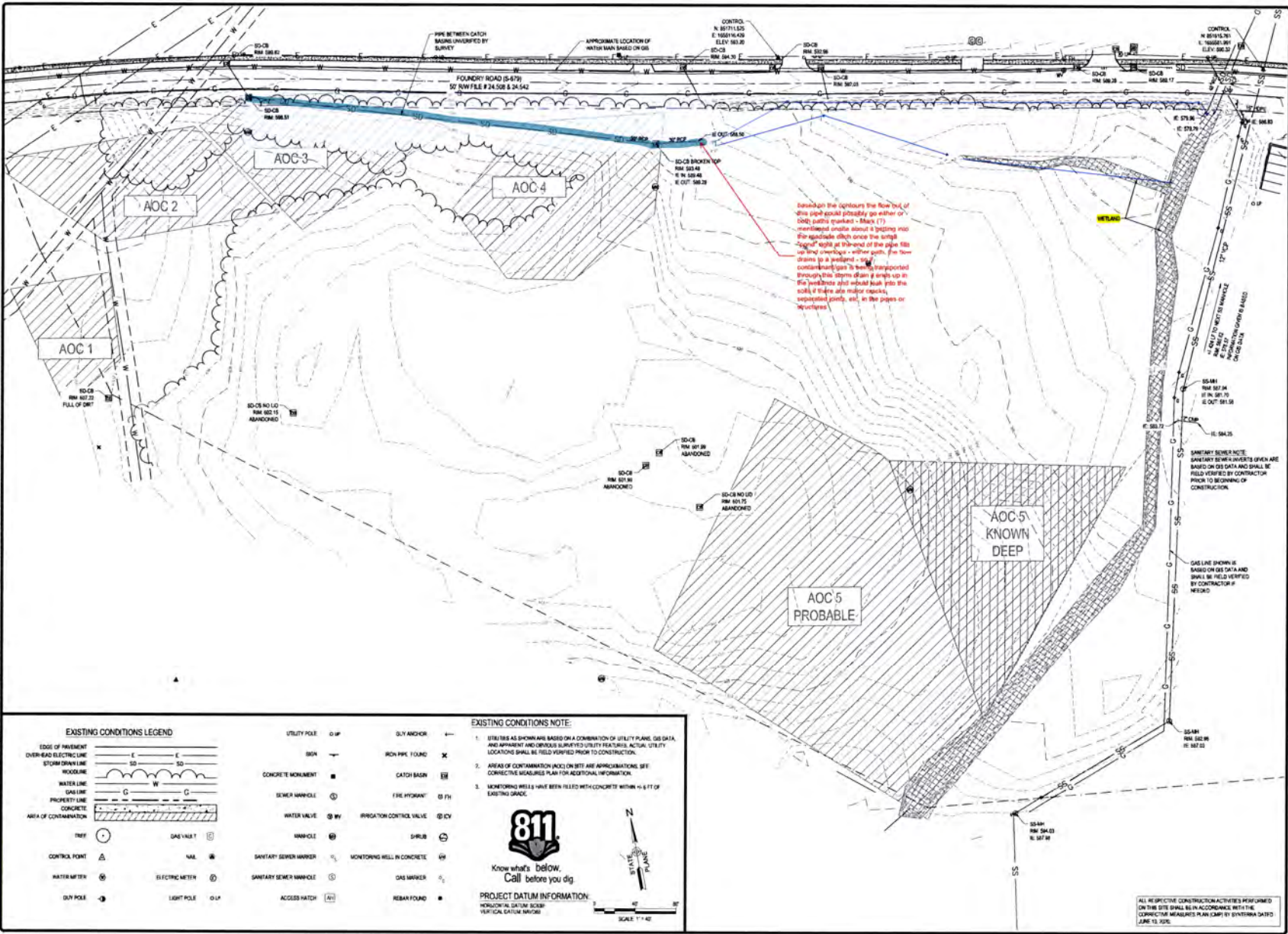
o: 864.942.8410

f: 864.942.8470

m: 864.377.5286

www.cityofgreenwoodsc.com

THIS DRAWING IS THE PROPERTY OF DAVIS & FLOYD, INC. AND SHALL NOT BE USED IN WHOLE OR IN PART WITHOUT THE WRITTEN CONSENT OF THE ENGINEER. CONTRACT AND ANY AMENDMENTS HERETO SHALL BE SUBJECT TO LOCAL CUSTOM.



Investigate the contours the flow of this pipe could possibly go either of (2) directions either once the catch basin is installed. Signal light at the end of the pipe 100' up the overpass - either path. The flow drains to a wetland area. Contaminants to be transported through this storm drain if caught up in the wetland area could leak into the soil if there are major cracks, separated joints, etc. in the pipes or structures.



DAVIS & FLOYD
 ENGINEERS
 1111 14th Street, Suite 100
 Greenwood, Colorado 80646

CITY OF GREENWOOD & GREENWOOD COUNTY
 GREENWOOD PARKS - PHASE ONE

FOUNDRY PARK
 EXISTING CONDITIONS

NO.	DATE	DESCRIPTION
1	10/15/2018	ISSUED FOR BIDDING
2	10/15/2018	ISSUED FOR BIDDING
3	10/15/2018	ISSUED FOR BIDDING
4	10/15/2018	ISSUED FOR BIDDING
5	10/15/2018	ISSUED FOR BIDDING
6	10/15/2018	ISSUED FOR BIDDING
7	10/15/2018	ISSUED FOR BIDDING
8	10/15/2018	ISSUED FOR BIDDING
9	10/15/2018	ISSUED FOR BIDDING
10	10/15/2018	ISSUED FOR BIDDING

C400
 23

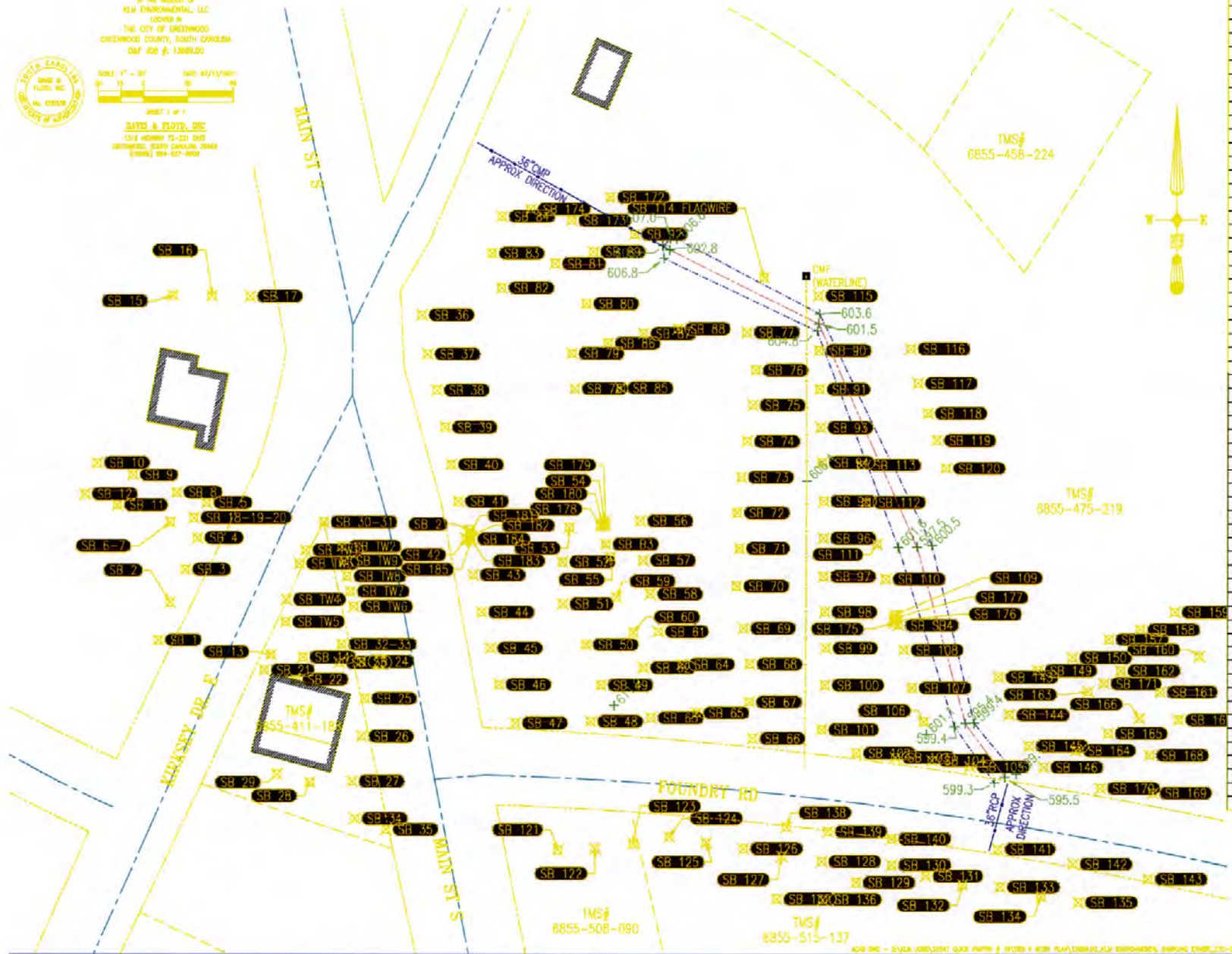
ALL RELEVANT CONSTRUCTION ACTIVITIES PERFORMED ON THIS SITE SHALL BE IN ACCORDANCE WITH THE CONNECTIVE MEASURES PLAN (CMP) BY DETERMINA DATED JUNE 13, 2018.

ENVIRONMENTAL SAMPLING EXHIBIT

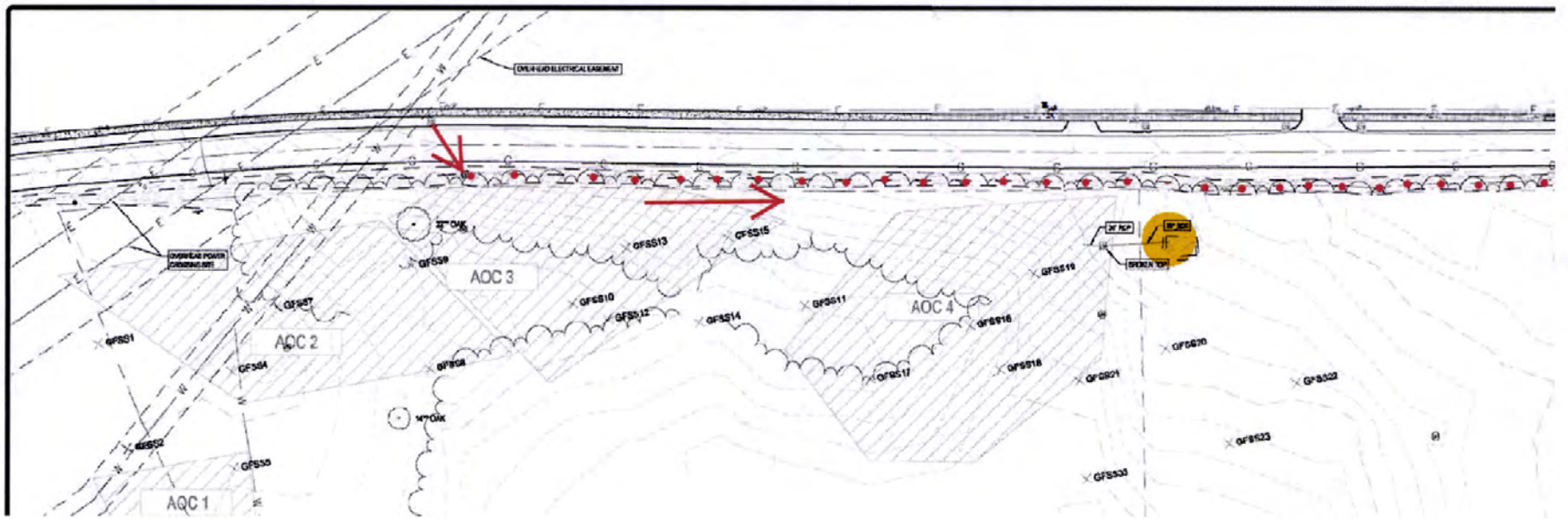
ISSUING
SOIL SERVICES
ACROSS MULTIPLE PROPERTIES
AT THE REQUEST OF
KEM ENVIRONMENTAL, LLC
LOCATED IN
THE CITY OF GREENWOOD
GREENWOOD COUNTY, SOUTH CAROLINA
DMF JOB #: 13089.00



DAVE & FLOYD, INC.
1318 HIGHWAY 72-221 EAST
GREENWOOD, SOUTH CAROLINA 29646
(803) 884-527-9929



Point Table			Point Table			Point Table		
Point #	Elevation	Description	Point #	Elevation	Description	Point #	Elevation	Description
1000	825.71	SB 1	1004	826.76	SB 146	1158	808.33	SB 84
1001	830.88	SB 2	1005	802.85	SB 194	1160	808.33	SB 83
1002	828.85	SB 3	1006	814.30	SB 121	1161	805.80	SB 91
1003	826.50	SB 4	1007	811.72	SB 122	1162	805.52	SB 90
1004	825.29	SB 5	1008	810.82	SB 123	1166	804.10	SB 115
1005	825.81	SB 18-19-20	1009	810.30	SB 124	1171	806.82	SB 88
1006	826.84	SB 6-7	1010	806.34	SB 125	1172	806.85	SB 87
1007	825.34	SB 8	1011	808.85	SB 126	1173	810.88	SB 86
1008	825.45	SB 9	1012	808.80	SB 127	1174	808.73	SB 85
1009	827.24	SB 11	1013	808.81	SB 127	1175	810.08	SB 79
1010	827.58	SB 12	1014	815.09	SB 128	1176	808.39	SB 71
1011	826.42	SB 18	1015	809.29	SB 128	1177	808.36	SB 72
1012	821.04	SB 15	1016	802.88	SB 138	1178	807.37	SB 73
1013	821.32	SB 16	1017	808.89	SB 129	1179	806.82	SB 74
1014	821.02	SB 17	1018	806.23	SB 130	1180	806.84	SB 75
1019	823.85	SB 30-31	1019	800.70	SB 140	1181	806.56	SB 76
1020	825.58	SB 13	1100	801.44	SB 138	1182	808.83	SB 77
1021	826.40	SB 21	1101	808.85	SB 141	1183	812.36	SB 48
1022	824.82	SB 22	1102	807.82	SB 142	1184	812.49	SB 49
1023	824.76	SB 14	1103	807.25	SB 143	1185	813.13	SB 50
1024	823.82	SB 23	1104	814.90	SB 47	1186	813.26	SB 51
1025	823.88	SB 22-23	1105	814.71	SB 46	1187	812.84	SB 52
1026	822.10	SB 24	1106	815.28	SB 45	1188	811.78	SB 53
1027	822.30	SB 25	1107	815.34	SB 44	1189	811.80	SB 54
1028	822.40	SB 26	1108	815.79	SB 43	1190	811.83	SB 178
1029	823.27	SB 27	1109	813.38	SB 42	1191	811.06	SB 180
1030	824.87	SB 29	1110	815.30	SB 182	1192	811.85	SB 179
1031	825.30	SB 29	1111	815.36	SB 184	1193	812.37	SB 83
1032	823.35	SB 34	1112	815.39	SB 183	1194	812.71	SB 85
1033	821.17	SB 35	1113	815.57	SB 182	1195	813.34	SB 58
1034	822.85	SB 78	1114	815.56	SB 181	1196	813.47	SB 80
1035	823.21	SB 78	1115	815.76	SB 2	1197	812.74	SB 82
1036	822.82	SB 78	1116	815.88	SB 41	1198	811.14	SB 83
1037	822.87	SB 78	1117	816.09	SB 40	1199	809.80	SB 86
1038	823.01	SB 78	1118	816.04	SB 39	1200	812.91	SB 84
1039	824.02	SB 78	1119	815.76	SB 38	1201	813.47	SB 81
1040	824.35	SB 78	1120	815.52	SB 37	1202	813.21	SB 88
1041	825.33	SB 78	1121	815.76	SB 36	1203	812.06	SB 87
1042	825.38	SB 78	1124	801.42	SB 106	1204	811.26	SB 88
1043	809.46	SB 104	1125	802.34	SB 107	1208	804.48	SB 120
1044	800.75	SB 104	1126	802.80	SB 108	1209	805.30	SB 119
1045	821.13	SB 103	1127	803.51	SB 98	1210	804.38	SB 118
1046	823.03	SB 102	1128	803.58	SB 125	1211	805.01	SB 117
1047	801.00	SB 170	1129	803.51	SB 126	1212	806.04	SB 116
1048	801.23	SB 188	1140	803.80	SB 177	1214	805.30	SB 114 FLAG
1049	802.17	SB 168	1141	803.80	SB 169	1215	807.38	SB 88
1050	803.38	SB 166	1142	804.54	SB 110	1216	808.04	SB 87
1051	804.32	SB 162	1143	804.85	SB 111	1217	808.82	SB 86
1052	805.17	SB 157	1144	803.88	SB 112	1218	809.00	SB 79
1053	804.87	SB 167	1147	806.30	SB 121	1220	806.73	SB 85
1054	807.85	SB 160	1148	804.87	SB 122	1221	808.91	SB 80
1055	807.05	SB 158	1149	803.85	SB 133	1223	807.61	SB 92
1056	801.83	SB 165	1150	802.70	SB 134	1230	806.46	SB 172
1057	803.82	SB 163	1151	802.50	SB 135	1231	808.85	SB 173
1058	803.83	SB 171	1152	804.84	SB 101	1232	808.77	SB 89
1059	803.83	SB 170	1153	806.28	SB 100	1233	808.84	SB 81
1060	801.85	SB 149	1154	808.10	SB 99	1234	808.87	SB 83
1061	801.85	SB 148	1155	808.07	SB 98	1235	808.82	SB 82
1062	803.82	SB 144	1156	808.17	SB 97	1236	808.84	SB 174
1063	800.29	SB 145	1157	807.42	SB 96	1237	809.00	SB 84



Re: UST# 04785 - Quick Pantry 19

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Fri 10/8/2021 3:08 PM

To: Mousseau, Preston A. <MoussePA@dhec.sc.gov>; KEISLER, Carolyn <keislecl@dhec.sc.gov>; Evans, Courtney H. <evansch@dhec.sc.gov>

Preston,

Thank you for the update!

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mousseau, Preston A. <MoussePA@dhec.sc.gov>

Sent: Friday, October 8, 2021 2:38 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; KEISLER, Carolyn <keislecl@dhec.sc.gov>; Evans, Courtney H. <evansch@dhec.sc.gov>

Subject: Re: UST# 04785 - Quick Pantry 19

Hey Caitlin,

I performed a full compliance inspection on 10/1/21. Another issue found at this inspection was that the impressed current system (protecting the tanks from corrosion) appeared to be broken (not reading on the rectifier box).

Thanks,

Preston Mousseau

Environmental Health Manager

UST Management Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0620

Cell: (803) 608-1309

Connect: www.scdhec.gov [Facebook](#) [LinkedIn](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Sent: Thursday, October 7, 2021 8:55 AM

To: KEISLER, Carolyn <keislecl@dhec.sc.gov>; Mousseau, Preston A. <MoussePA@dhec.sc.gov>; Evans, Courtney H. <evansch@dhec.sc.gov>

Subject: UST# 04785 - Quick Pantry 19

Good morning,

Can you give me a brief synopsis of what regulatory events went on last week/this week for this site? Mihir needs a weekly update to send to Henry this morning and I forgot to come see one of you yesterday afternoon.

Thanks,

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



Re: UST# 04785 - Quick Pantry 19

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Thu 10/7/2021 12:08 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>

Cc: Miner, Read <minerrs@dhec.sc.gov>

Mark,

Thank you! I'm sure someone here has a copy of the original, but I haven't been able to figure out who. Also, I got the copy of the Tier II yesterday afternoon. Read and I are going to sit down sometime this week or early next week to review it. Once we look over that and get the new gauging data, I will get with you about the AFVRs and the additional assessment that's going to be needed.

Thanks again!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Wednesday, October 6, 2021 5:57 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: RE: UST# 04785 - Quick Pantry 19

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,


I don't have a copy of the OO sheet. I probably sent the original in by mistake on this one. I will get Jitu to sign one.

Thanks

Mark

Mark L. Keller, PG

President

 KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445
843-870-4285 Cell

From: Reilly, Caitlin M. <creillycm@dhec.sc.gov>
Sent: Wednesday, October 6, 2021 4:50 PM
To: mkeller131@comcast.net
Cc: Miner, Read <miners@dhec.sc.gov>
Subject: UST# 04735 - Quick Pantry 19

Hey Mark,

I just dropped the notice to proceed letter off with our financial department. They are going to make up the cost agreement and get that mailed out first thing in the morning so you should have that by Monday at the latest. I was also wondering if you have a copy of the O/O selection form? I'm doing a file review and I can't seem to find it. I'm sure its somewhere in our email chains but I haven't found it so far.

Thanks!
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)





OCT 08 2021

MR PATEL
311 OAKMONTE CIRCLE
GREENWOOD SC 29649

Re: **Site Specific Work Plan Approval and Groundwater Sampling Notice to Proceed**
Quick Pantry 19, 1802 South Main Street, Greenwood, SC
UST Permit #04785; CA #64523
Release #2 reported March 9, 2021
Site Specific Work Plan received October 4, 2021
Greenwood County

Dear Mr. Patel:

The Underground Storage Tank Management Division (UST Division) of the South Carolina Department of Health and Environmental Control (DHEC) has reviewed and approved the referenced Site Specific Work Plan (SSWP) submitted by your contractor. All work should be conducted in compliance with the most recent revision of the UST QAPP, your contractor's Annual Contractor Quality Assurance Plan, and all applicable regulations. A copy of the current revision of the UST QAPP is available at scdhec.gov/environment/land-waste/underground-storage-tanks/release-assessment-clean/quality-assurance.

The monitoring well gauging event should begin immediately upon receipt of this letter. The Cost Agreement number shown above has been approved for the amount shown on the enclosed cost agreement form.

Please note the following changes to the cost agreement and SSWP:

- The AFVRs are on hold until updated well gauging data has been obtained.

The contractor must provide notification to the UST Project Manager via email 4 days prior to initiation of any site rehabilitation activities. If there are any changes to the schedule, the UST Project Manager must be contacted within 24 hours of those changes.

Your contractor can submit an invoice for direct payment from the State Underground Petroleum Environmental Response Bank (SUPERB) Account for pre-approved costs. **The Gauging Report, contractor checklist (QAPP Appendix K), and invoice should be submitted to the UST Division within sixty (60) days of the date of this correspondence.** If the invoice is not submitted within 120 days from the date of this letter, monies allocated to pay this invoice will be uncommitted. This means that the invoice will not be processed for payment until all other committed funds are paid or monies become available.



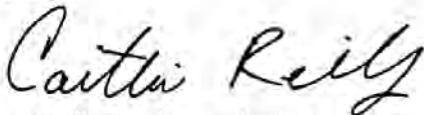
Please note that sections 44-2-110(4) and 44-2-130 of the SUPERB Statute state that the SUPERB Account cannot compensate any costs that are not pre-approved. If for any reason additional tasks will be completed, these additional tasks, and the associated cost, must be pre-approved by the UST Division for the cost to be paid. The UST Division reserves the authority to pay only for work properly performed and/or technically justified and will only pay rates in accordance with established criteria. Further, the UST Division reserves the right to question and/or reject costs if deemed unreasonable and the right to audit project records at any time during the project or after completion of work.

Please note that applicable South Carolina certification requirements regarding laboratory services, well installation, and report preparation must be satisfied. Any site rehabilitation activity associated with the UST release must be performed by a DHEC-certified site rehabilitation contractor as required by the SUPERB Site Rehabilitation and Fund Access Regulation, R.61-98.

The UST Division grants pre-approval for transportation of virgin petroleum impacted soil and groundwater from the referenced site to a permitted treatment facility. There can be no spillage or leakage in transport. All investigation-derived waste (IDW) must be properly contained and labeled prior to disposal. IDW should not be stored on-site longer than ninety (90) days. A copy of the disposal manifest and/or acceptance letter from the receiving facility that clearly designates the quantity received must be included as an appendix to the report. If the Chemical of Concern (CoC) concentrations based on laboratory analysis is below Risk-Based Screening Levels (RBSLs), please contact the project manager for approval to dispose of soil and/or groundwater on-site. The SUPERB Account will not reimburse for transportation or treatment of soil and/or groundwater with concentrations below RBSLs.

On all correspondence regarding this site, please reference the UST Permit number above. Should you have any questions regarding this correspondence, please feel free to contact me by phone at (803) 898-3807, by fax at (803) 898-0673, or by e-mail at reillycm@dhec.sc.gov.

Sincerely,



Caitlin Reilly, Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Management Division
Bureau of Land and Waste Management

enc: Approved Cost Agreement

cc: KLM Environmental LLC, PO Box 2704, Goose Creek, SC 29649 (w/ enc)
Mr. Shah Aziz, 311 Oakmonte Circle, Greenwood, SC 29445 (w/enc)
Technical file (w/ enc)

Approved Cost Agreement**64523**

Facility: 04785 QUICK PANTRY 19

RELLYCM

PO Number:

<u>Task / Description</u>	<u>Categories</u>	<u>Item Description</u>	<u>Qty / Pct</u>	<u>Unit Price</u>	<u>Amount</u>
A PLAN PREPARATION		1 SITE SPECIFIC WORK PLAN	1.0000	\$160.050	160.05
D MOB/DEMOB		2 PERSONNEL	1.0000	\$451.340	451.34
J SAMPLE COLLECTION		5 GAUGE WELL ONLY	32.0000	\$7.470	239.04
S REPORT PROJECT MANAGEMENT		S REPORT PREP & PROJ. MANAGEMENT	0.1200	\$850.430	102.05
Total Amount					952.48

Re: UST# 04785

Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Fri 10/8/2021 3:07 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Miner, Read <minerrs@dhec.sc.gov>

📎 1 attachments (777 KB)

Pages from 2021 05 20_13744 00_Greenwood Parks-Phase One - (FB set.pdf)

Oops, I forgot to add the attachment.... here you go!

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Sent: Friday, October 8, 2021 3:07 PM

To: mkeller131@comcast.net <mkeller131@comcast.net>; Miner, Read <minerrs@dhec.sc.gov>

Subject: Re: UST# 04785

Mark,

Thank you for the updates! Here is a copy of the map Julie Wilkie sent us earlier. It shows the wetlands mentioned and has some notes from the city on it regarding their concerns about the contamination flow. Let me know if you anything else from me or if I can be of any help with the abatement/additional assessment planning.

I hope you have a great weekend, thanks!

Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Friday, October 8, 2021 2:39 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: RE: UST# 04785


*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin,

Yes I am back in the office now, albeit wearing my gasoline perfume today from a tank cleaning! Call whenever you are ready.

Mark

Mark L. Keller, PG
President

 **KLM Environmental, LLC**

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Friday, October 8, 2021 1:55 PM
To: mkeller131@comcast.net
Subject: UST# 04785

Hey Mark,

Are you available later this afternoon for a quick call? I spoke with Ashleigh about our phone call this morning and she has some additional information to pass on.

Thanks!
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



FW: Greenwood Foundry Road site

Mark Lee Keller <mkeller131@comcast.net>

Fri 10/8/2021 3:42 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***


Caitlin and Ashley,

Please see below the email I sent to Ms. Wilkie. I am hopeful she can help us with the idea of a closed storm drain system in that area. That would really be the best scenario as we can stop the outflow of contaminants in that area and make sure what we do have isn't accessible to the public or the wildlife. I put the interception trench idea out there too as a fall back but I think the closed storm drain would be the way to go if we can get them to help us. Let me know your thoughts on that. I will update you both when I hear back.

Thanks!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Friday, October 8, 2021 3:39 PM

To: 'Julia Wilkie@gwacity.com' <julia.wilkie@gwacity.com>

Subject: Greenwood Foundry Road site

Julie,

I am sure you have heard the results of our drain inspection in Greenwood. I am still waiting on my copy of the video which I will send to you for your records. It was unbelievable that we caught a date on the inside of the pipe putting the construction to 1954. It appeared someone was tasked with crawling through that drain pipe and putting mortar in the joints by hand from the inside. It has held up remarkably well for being nearly 70 and handling millions of gallons I am sure.

So what we know is the petroleum is entering the drainage canal which runs from well up on main street, as far as I cared to walk tracing it, across the smith property, which is the only section that is not encased in RCP pipe, then crossed the road and flows into the pond on the Foundry property through more RCP pipe. Our dilemma is how to stop this from entering the open section of drainage. We have two scenarios and we wanted to see if we could enlist some help if possible. These are designed to keep the petroleum off of your property in that area so the effects won't be felt in the new park development which would not be good for anyone involved.

Eliminating the problem entirely will take many years to accomplish, this we know from past experiences and the SCDHEC UST Division can confirm that. What we would like to do is isolate your property from

the constant feed on contaminants as a first step. We still have to address the free product up near main street but that will be a separate effort. We would propose a storm drain be installed from approximately ½ way up the creek to connect with the storm drain where it crosses the road. The drain would need to be sealed. Installing this will still allow drainage flow to continue uninterrupted from main street to its final destination, and would eliminate the seeping of petroleum into the storm drain system. It doesn't appear much of a project for a water authority since its open in this area and its not a great distance to install. It would be quite an undertaking for the inexperienced like we are for sure. Please let me know what you think of that approach and if the city would be willing to assist with this.


The only other approach we have been able to surmise is digging an interception trench next to the drainage creek and attempting to intercept the petroleum before it gets into the drainage system. At issue there is, if we are digging a trench anyway, why not just install the drain system? Second, an interception trench will need absorbent socks installed to attempt to catch any petroleum. Those become saturated and will have to be changed out frequently. They may still allow petroleum to enter the system unfortunately. Third, there is an inherent danger with digging a big trench to attempt to accomplish this for fear of children or wildlife falling in the trench or being exposed to the contaminants its designed to capture and hold, in open air. Its certainly an option, but probably not the best one.

Please review these and let me know if you think you would be able to assist on this maddening project.

Thanks!!!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

Re: UST # 04785

Mark Keller <mkeller131@comcast.net>

Mon 10/11/2021 12:02 PM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Cc: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

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No problem!! Mike Patel has returned and I spoke with him this morning. He is aware he f this new release and has the paperwork send by regulatory. He will be signing the OO sheet and sending it back to me.

Thanks!

Mark

Mark L. Keller, P.G.
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC. 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Oct 11, 2021, at 9:56 AM, Thrash, Ashleigh <thrasham@dhec.sc.gov> wrote:

Caitlin, see below from Mark.

Can you please send him the release memo? Thank you!

Sorry for the delay Mark, I left early on Friday. Hope you had a great weekend!

Ashleigh

Ashleigh Thrash, P.G.
Section Manager, Assessment & Non-Permitted Petroleum
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0607
Cell: (803) 608-1765
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Friday, October 8, 2021 3:19 PM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Ms. Thrash,

Would it be possible to request a copy of the Release Determination Memo for the Quick Pantry # 19 site (UST # 04785) for the most recent release at the site involving the filling of the Out-of-Service UST at the site? We would like to review this with our client to better explain the situation. Please let me know if that is ok.

Thank you,

Mark L. Keller, PG
President

<image001.png>

KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell



MEMORANDUM

To: Ashleigh Thrash, Section Manager
Assessment Section
UST Management Division, BLWM

From: Denise M. Place *DMP*
Regulatory Compliance Section
UST Management Division, BLWM

Through: Eric Cathcart, Section Manager *ec*
Regulatory Compliance Section
UST Management Division, BLWM

Date: October 1, 2021

Re: UST Permit – 04785
Quick Pantry 19, 1802 S. Main St., Greenwood, SC
Report received – September 28, 2021

The South Carolina Department of Health and Environmental Control (DHEC) was notified on September 28, 2021, that Eubanks Oil Co., LLC delivered 3,400 gallons of gasoline into a 4,000-gallon UST labeled T-2. At the time of delivery, this UST was under delivery prohibition. DHEC staff affixed a red "do not fill/delivery prohibition" tag to the fill cap on December 18, 2020 and the DHEC website contained the delivery prohibition information.

DHEC has information that, until at least September 25, 2021, the red delivery prohibition tag was still affixed to the 4,000-gallon UST (T-2). Prior to beginning tightness testing on September 24, 2021, the 4,000-gallon UST (T-2) was confirmed to be empty of product. The red delivery prohibition tag was confirmed as present on the fill cap on the same day by DHEC staff. Test results were received on the same day by DHEC and the operator, confirming that the 4,000-gallon UST (T-2) had failed testing and was not competent to store fuel. According to a Tucker Oil Company representative, a delivery truck was on site on September 25, 2021. The representative stated the delivery driver "saw the tank was tagged and did not deliver fuel to the UST." Tucker Oil Company has submitted a photograph taken on that date that shows the red delivery prohibition tag was attached to the fill cap. Following delivery of the fuel at 5:00 a.m. on September 27, 2021, the remaining product was not transferred from the 4,000-gallon UST (T-2) to another UST until 6:00 p.m. on September 28, 2021. The delivery and delay in product removal resulted in the release of a measurable amount of fuel into the soil and groundwater. Therefore, the UST owner of record, Bahuchar Mata, LLC, and the transporter, Eubanks Oil Co., LLC, have both been designated responsible parties for the release confirmed by DHEC on September 29, 2021.

At this time, SUPERB eligibility for Bahuchar Mata, LLC has not been determined.



Re: [EXTERNAL EMAIL]Greenwood Foundry Road site

Gorman, Angela <gormanak@dhec.sc.gov>

Tue 10/12/2021 1:44 PM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

It would be great to have a short call at 3:00 to discuss. I will send a Teams invitation

Angela Gorman

Hydrogeologist

Brownfields Program

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0929

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Sent: Tuesday, October 12, 2021 12:43 PM

To: Gorman, Angela <gormanak@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: [EXTERNAL EMAIL]Greenwood Foundry Road site

Hey Angela,

We are aware of this email. We are available to chat if you would like. I'm available til 1:30 or after about 2:30 or 3:00 - just let me know. Thanks!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Gorman, Angela <gormanak@dhec.sc.gov>

Sent: Tuesday, October 12, 2021 12:07 PM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Fw: [EXTERNAL EMAIL]Greenwood Foundry Road site

Ashleigh and Caitlin,

Please see below e-mail that Mark Keller sent to Julie Wilkie with City of Greenwood. I think he is just trying to be helpful, but wanted to let you know since it sounds like he is asking the City's cooperation on some things. It seems it would be most helpful for Mark Keller to include DHEC on communication to the City regarding this UST release.

Could we please set up a time to talk or meet to discuss? I want to get clear in my mind who is supposed to do what regarding preventing further migration onto the Foundry property and repair of storm drain system.

Angela Gorman
Hydrogeologist
Brownfields Program
S.C. Dept. of Health & Environmental Control
Office: (803) 898-0929
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Julie Wilkie <julie.wilkie@gwdcity.com>
Sent: Tuesday, October 12, 2021 11:18 AM
To: Gorman, Angela <gormanak@dhec.sc.gov>
Subject: FW: [EXTERNAL EMAIL]Greenwood Foundry Road site

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Julie M. Wilkie
City Manager
864.942.8410

From: Mark Lee Keller <mkeller131@comcast.net>
Sent: Friday, October 8, 2021 3:39 PM
To: Julie Wilkie <julie.wilkie@gwdcity.com>
Subject: [EXTERNAL EMAIL]Greenwood Foundry Road site

*******WARNING: The sender of this email is outside of our network. Ensure you are familiar with the sender and are expecting this email, otherwise, DO NOT REPLY and DO NOT CLICK on any LINK or ATTACHMENT and DELETE THIS EMAIL IMMEDIATELY**

!!!!*****

Julie,

I am sure you have heard the results of our drain inspection in Greenwood. I am still waiting on my copy of the video which I will send to you for your records. It was unbelievable that we caught a date on the inside of the pipe putting the construction to 1954. It appeared someone was tasked with crawling through that drain pipe and putting mortar in the joints by hand from the inside. It has held up remarkably well for being nearly 70 and handling millions of gallons I am sure.

So what we know is the petroleum is entering the drainage canal which runs from well up on main street, as far as I cared to walk tracing it, across the smith property, which is the only section that is not encased in RCP pipe, then crossed the road and flows into the pond on the Foundry property through more RCP pipe. Our dilemma is how to stop this from entering the open section of drainage. We have two scenarios and we wanted to see if we could enlist some help if possible. These are designed to keep the petroleum off of your property in that area so the effects won't be felt in the new park development which would not be good for anyone involved.

Eliminating the problem entirely will take many years to accomplish, this we know from past experiences and the SCDHEC UST Division can confirm that. What we would like to do is isolate your property from the constant feed on contaminants as a first step. We still have to address the free product up near main street but that will be a separate effort. We would propose a storm drain be installed from approximately ½ way up the creek to connect with the storm drain where it crosses the road. The drain would need to be sealed. Installing this will still allow drainage flow to continue uninterrupted from main street to its final destination, and would eliminate the seeping of petroleum into the storm drain system. It doesn't appear much of a project for a water authority since its open in this area and its not a great distance to install. It would be quite an undertaking for the inexperienced like we are for sure. Please let me know what you think of that approach and if the city would be willing to assist with this.

The only other approach we have been able to surmise is digging an interception trench next to the drainage creek and attempting to intercept the petroleum before it gets into the drainage system. At issue there is, if we are digging a trench anyway, why not just install the drain system? Second, an interception trench will need absorbent socks installed to attempt to catch any petroleum. Those become saturated and will have to be changed out frequently. They may still allow petroleum to enter the system unfortunately. Third, there is an inherent danger with digging a big trench to attempt to accomplish this for fear of children or wildlife falling in the trench or being exposed to the contaminants its designed to capture and hold, in open air. Its certainly an option, but probably not the best one.

Please review these and let me know if you think you would be able to assist on this maddening project.

Thanks!!!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

04785

Mark Keller <mkeller131@comcast.net>

Tue 10/12/2021 1:01 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>

*** Caution: This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

I got this message from our field crew gauging the wells today at Quick Pantry 19.

"The FP levels near the store have gone down a bit, MW-18 (adjacent to creek) has 9.5 feet of free product. The entire column in the well is product"

Just wanted to update as soon as I had information. Will get it formalized this week and submitted.

Mark

Mark L Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC, 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

Re: Groundwater Data 10-12-21.pdf

Mark Keller <mkeller131@comcast.net>

Wed 10/13/2021 12:21 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

No, we only learned of his return on Monday. We sent the form but all state and federal offices were closed Monday. The sheet went out Tuesday which is only yesterday. It would not have gotten to him for signature yet. Since he is back he will need to sign now as he is over G in the hierarchy.

Mark

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

On Oct 13, 2021, at 10:50 AM, Reilly, Caitlin M. <reillycm@dhec.sc.gov> wrote:

Mark,

Thank you for the table and updated data. I will get with Read and look it over and start getting the abatement letter ready. But I had a question, did Mr. Patel send you a copy of the new O/O sheets for both releases before mailing them to us? I was told that Regulatory needs a copy of the O/O sheet for the new release before we send out the abatement letters or I have to leave you guys off the letter as the contractor for that work until we get it in. Which isn't a big deal, but it will save us some time/emails.

Thanks!
Caitlin

Caitlin Reilly
Hydrogeologist
Assessment & Non-Permitted Petroleum Section
Underground Storage Tank Division
S.C. Dept. of Health & Environmental Control
Office: (803) 898-3807
Fax: (803) 898-0673
Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



From: Mark Keller <mkeller131@comcast.net>
Sent: Tuesday, October 12, 2021 9:31 PM
To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Subject: Groundwater Data 10-12-21.pdf

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Caitlin

Here are the gauging results. No product in MW 17 this time where it was there the last gauging for the Tier II.

Mark

Mark L. Keller, PG
President
KLM Environmental, LLC
PO Box 2704
Goose Creek, SC, 29445
Phone: 843-870-4285
Fax: 843-797-1893
Office: 843-797-7884

Groundwater Data (feet)
Quick Pantry # 19
Greenwood, SC

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	FP Thickness
MW-1	10/12/21	623.56	X-28.5	18.10	19.29	1.19
MW-2	10/12/21	623.38	10-20	18.03	19.32	1.29
MW-3	10/12/21	625.10	10-20	19.42	19.47	0.05
MW-4	10/12/21	623.30	10-20	18.16	19.49	1.33
MW-5	10/12/21	622.12	10-20	16.48	18.27	1.79
MW-6	10/12/21	622.84	10-20	--	14.83	--
MW-7	10/12/21	614.92	8-18	12.23	12.25	0.02
MW-8	10/12/21	615.10	5-15	11.70	13.36	1.66
MW-9	10/12/21	615.58	7.5-17.5	11.71	11.82	0.11
MW-10	10/12/21	608.68	2-12	--	4.52	--
MW-11	10/12/21	606.78	4-14	--	7.34	--
MW-12	10/12/21	611.62	7-17	10.31	13.45	3.14
MW-13	10/12/21	610.45	5-15	9.06	10.99	1.93
MW-14	10/12/21	608.36	5-15	9.12	9.93	0.81
MW-15	10/12/21	610.20	5-15	--	8.09	--
MW-16	10/12/21	605.95	5-15	--	8.23	--
MW-17	10/12/21	601.53	3-13	--	4.47	--
MW-18	10/12/21	604.03	4-14	4.14	13.63	9.49
MW-19	10/12/21	605.81	5-15	--	9.46	--
MW-20	10/12/21	601.51	3-13	--	6.08	--
MW-21	10/12/21	604.50	5-15	--	8.68	--
MW-22	10/12/21	600.57	5-15	--	9.38	--
MW-23	10/12/21	602.51	5-15	--	11.26	--
MW-24	10/12/21	602.73	5-15	--	11.60	--
MW-25	10/12/21	606.98	6-16	--	8.72	--
RW-1	10/12/21	624.54	10-20	19.20	19.66	0.46
RW-2	10/12/21	623.44	10-20	18.11	19.15	1.04
RW-3	10/12/21	623.34	10-20	18.26	19.16	0.90
DW-1	10/12/21	624.84	40-45	--	19.73	--
DW-2	10/12/21	611.79	35-40	--	10.11	--
DW-3	10/12/21	610.33	35-40	--	9.29	--
DW-4	10/12/21	602.27	20-25	--	10.97	--

RE: Foundry Rd. Greenwood County

Patrick Prince <pprince@gwdscha.com>

Thu 10/14/2021 10:25 AM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Thanks. Same to you.

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Sent: Thursday, October 14, 2021 10:20 AM

To: Patrick Prince <pprince@gwdscha.com>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>; Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: Re: Foundry Rd. Greenwood County

It was great to talk to you today Mr. Prince! Please let us know if you have any additional questions or concerns. I have attached Ryan to this email so you have his contact information also.

Have a great rest of your week and weekend!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

From: Patrick Prince <pprince@gwdscha.com>

Sent: Wednesday, October 13, 2021 3:46 PM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: RE: Foundry Rd. Greenwood County

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Great Thanks

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Sent: Wednesday, October 13, 2021 3:35 PM
To: Patrick Prince <pprince@gwdscha.com>
Subject: Re: Foundry Rd. Greenwood County

Actually, we will use our conference line if you don't mind because I'm going to have our Customer Service Liaison, Ryan Ariail, call in as well. The conference line details are below.

Talk to you tomorrow at 10!

Access Phone Number 1-800-753-1965

7-Digit Access Code 8982544

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Sent: Wednesday, October 13, 2021 3:20 PM

To: Patrick Prince <pprince@gwdscha.com>

Subject: Re: Foundry Rd. Greenwood County

Sure! you can call my cell which is below. Looking forward to speaking to you then!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

[]

From: Patrick Prince <p prince@gwdscha.com>

Sent: Wednesday, October 13, 2021 3:19 PM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: RE: Foundry Rd. Greenwood County

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

That will work. Shall I call you?

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Sent: Wednesday, October 13, 2021 3:18 PM

To: Patrick Prince <p prince@gwdscha.com>

Subject: Re: Foundry Rd. Greenwood County

Hi Mr. Prince!

No problem at all. Does around 10 am work for you?

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

[]

From: Patrick Prince <p prince@gwdscha.com>
Sent: Wednesday, October 13, 2021 3:15 PM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: RE: Foundry Rd. Greenwood County

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Hey Ashleigh,

Sorry for my slow response, I am available anytime tomorrow except between 1-2, just let me know what works for you

Thank you,
Patrick

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Sent: Monday, October 11, 2021 9:46 AM
To: Patrick Prince <p prince@gwdscha.com>
Subject: Re: Foundry Rd. Greenwood County

Good Morning Mr. Prince!

Hope you have been doing well! Would you have some time this week for a quick call so that we can give you an update on the status of this site? We have received the Tier II report and while it is still in review, we thought it would be a good time to update you on the path forward for the project.

Let me know some days/times that work for you. I will be out of the office Friday, but any other day should work.

Thank you!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

From: Patrick Prince <p prince@gwdscha.com>
Sent: Thursday, August 12, 2021 10:23 AM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: RE: Foundry Rd. Greenwood County

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No problem. I should be able to make the call. Thanks

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Sent: Thursday, August 12, 2021 10:19 AM
To: Patrick Prince <pprince@gwdscha.com>
Subject: Re: Foundry Rd. Greenwood County

Hi Patrick! Sorry for the delay getting back to you on this! Hopefully you are still available today. Below is the info for our conference line. We can get on the call at 2 Pm.

Call In #
1-800-753-1965
access code: 8982544

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

From: Patrick Prince <pprince@gwdscha.com>
Sent: Monday, August 9, 2021 4:50 PM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: RE: Foundry Rd. Greenwood County

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Hey Ashleigh,

I could do Thursday any time between 2-3:30 or Friday morning, any time between 9-10:30. Let me know if any of these will work.

Thanks,

Patrick

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Sent: Monday, August 9, 2021 3:55 PM
To: Patrick Prince <pprince@gwdscha.com>
Subject: Re: Foundry Rd. Greenwood County

Hi Patrick!

Hope you had a great weekend. I'm looking into setting up the conference call with the consultant this week. Do you have some days/times that work best for you?

Thanks!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

From: Patrick Prince <pprince@gwdscha.com>
Sent: Wednesday, August 4, 2021 10:16 AM
To: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Subject: RE: Foundry Rd. Greenwood County

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Hey Ashleigh,

Thank you for getting back to me and I would like to discuss this briefly when you have some time. I have several residents that have been asking. Let me know how your schedule looks or give me a call at 864-227-3670 ext. 30
Patrick

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>
Sent: Wednesday, August 4, 2021 10:12 AM
To: Patrick Prince <pprince@gwdscha.com>
Subject: Re: Foundry Rd. Greenwood County

Hi Patrick,

Attached are some figures and data tables the contractor just sent over to me. Please let me know if you would like to discuss.

Thank you!

Ashleigh

Ashleigh Thrash, P.G.

Section Manager, Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-0607

Cell: (803) 608-1765

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From: Patrick Prince <pprince@gwdscha.com>

Sent: Tuesday, August 3, 2021 7:46 AM

To: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Subject: RE: Foundry Rd. Greenwood County

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Thank you. I look forward to hearing from you.

From: Thrash, Ashleigh <thrasham@dhec.sc.gov>

Sent: Monday, August 2, 2021 3:04 PM

To: Patrick Prince <pprince@gwdscha.com>

Subject: Re: Foundry Rd. Greenwood County

Good Afternoon Mr. Prince,

I just wanted to let you know we have received your email. I also wanted to let you know the assessment is still underway. We do not have a final report yet, but should be able to compile some preliminary data.

I will get back to you tomorrow with a more comprehensive response.

Thank you!

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From: Patrick Prince <pprince@gwdscha.com>

Sent: Friday, July 30, 2021 12:06:59 PM

To: Toth, Delaney C. <tothdc@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>

Subject: RE: Foundry Rd. Greenwood County

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I just wanted to follow up on this leak. I know that they have been conducting ground water tests. Have those results been returned? Is my property affected? Also, is there any possible timeline for how much longer we have to breath this stuff?

Thank you.

Patrick

From: Toth, Delaney C. <tothdc@dhec.sc.gov>

Sent: Friday, March 26, 2021 12:10 PM

To: Patrick Prince <p prince@gwdscha.com>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>

Subject: Re: Foundry Rd. Greenwood County

Mr. Prince,

We are investigating the situation. I will keep you updated as we know more.

Thanks,

Delaney

Delaney Toth, Hydrogeologist

Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-2818

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[]

From: Patrick Prince <p prince@gwdscha.com>

Sent: Friday, March 26, 2021 11:56 AM

To: Toth, Delaney C. <tothdc@dhec.sc.gov>

Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>

Subject: Re: Foundry Rd. Greenwood County

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Delaney,

Just to let you know, the fumes along Foundry Road are overwhelming during this rain. Someone is going to get sick.

Patrick

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From: Toth, Delaney C. <tothdc@dhec.sc.gov>
Sent: Tuesday, February 2, 2021 9:15:56 AM
To: Patrick Prince <p prince@gwdscha.com>
Cc: Thrash, Ashleigh <thrasham@dhec.sc.gov>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>
Subject: Re: Foundry Rd. Greenwood County

Patrick,

The clean-up is currently in progress. It will continue until the contamination is at or below our risk-based screening levels or until it reaches site-specific target levels to ensure the health and safety of humans and the environment.

Delaney Toth, Hydrogeologist

Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-2818

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[Redacted]

From: Patrick Prince <p prince@gwdscha.com>
Sent: Tuesday, February 2, 2021 7:34 AM
To: Toth, Delaney C. <tothdc@dhec.sc.gov>
Subject: RE: Foundry Rd. Greenwood County

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

Thank you for your response Delaney. Has DHEC set any timeline for the clean-up process or could this be an ongoing issue indefinitely?

Patrick

From: Toth, Delaney C. <tothdc@dhec.sc.gov>
Sent: Monday, February 1, 2021 11:05 AM
To: Patrick Prince <p prince@gwdscha.com>
Cc: Long, Keisha <longkd@dhec.sc.gov>; Thrash, Ashleigh <thrasham@dhec.sc.gov>; Ariail, Ryan D. <AriailRD@dhec.sc.gov>
Subject: Foundry Rd. Greenwood County

Good Morning Mr. Prince,

Thank you for reaching out to Ms. Long about your concern relating to the creek near the Greenwood Housing Authority. I am the project manager for Non-Permitted Petroleum in Greenwood County.

DHEC has been investigating the source of the odor and the sheen found on the creek along Foundry Road. The property owner of 104 E. Kirksey Dr. (formerly operated as Petroleum Products) has hired an environmental consultant to abate and assess the concerns in the creek. Abatement has been ongoing and absorbent booms have been installed along the creek. The creek has also been rerouted. An assessment by his consultant is currently on-going to determine the extent and source of the contamination.

If you have any further questions, please feel free to reach out to me.

Best,
Delaney

Delaney Toth, Hydrogeologist

Assessment & Non-Permitted Petroleum

S.C. Dept. of Health & Environmental Control

Office: (803) 898-2818

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)



RE: UST # 04785

Mark Lee Keller <mkeller131@comcast.net>

Thu 10/14/2021 1:26 PM


To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***

I also wanted to let you know we didn't use near the footage approved for the Tier II so we have plenty left for the additional assessment. For probing, we were approved for 6300 feet, but I used 4395, so almost 2000 feet (approx. \$40K) if footage remaining under budget just for the probing. The next phase shouldn't be anywhere near using that up so the budget shouldn't be affected. I am sure that will make Ashley happy. I am finalizing the assessment plan today for the pond area and the "wetlands" area. We will need to clear again so that will be included.

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704
Goose Creek, SC 29445
843-870-4285 Cell

From: Reilly, Caitlin M. <reillycm@dhec.sc.gov>
Sent: Thursday, October 14, 2021 1:04 PM
To: mkeller131@comcast.net; Miner, Read <minerr@dhec.sc.gov>
Subject: Re: UST # 04785

Mark,

Thank you so much! I'm in the process of printing the tables and maps so I can do some "coloring" this afternoon, this will make it so much easier.

Have a great weekend!
Caitlin

Caitlin Reilly

Hydrogeologist

Assessment & Non-Permitted Petroleum Section

Underground Storage Tank Division

S.C. Dept. of Health & Environmental Control

Office: (803) 898-3807

Fax: (803) 898-0673

Connect: www.scdhec.gov [Facebook](#) [Twitter](#)

[]

From: Mark Lee Keller <mkeller131@comcast.net>

Sent: Thursday, October 14, 2021 12:57 PM

To: Reilly, Caitlin M. <reillycm@dhec.sc.gov>

Subject: UST # 04785

*** Caution. This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. ***


Caitlin,

I am back in the office today and wanted to send you the gauging data from Tuesday in a table with all the previous gauging data I had from the Tier II, with product thicknesses, to make that data easier to decipher. Please see that attached. I will send a hard copy in the mail but wanted to get this to you in its final format.

Thanks!

Mark

Mark L. Keller, PG
President

 KLM Environmental, LLC

PO Box 2704

Goose Creek, SC 29445

843-870-4285 Cell

**Appendix F
Historical Ground Water Levels
Quick Pantry # 19
Greenwood, SC**

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	Free Product Thickness	GW Elevation
MW-1	8/25/21	623.56	X-28.5	17.06	17.75	0.69	FP
	9/1/21			17.35	18.02	0.67	FP
	10/12/21			18.10	19.29	1.19	FP
MW-2	8/25/21	623.38	10-20	17.03	18.36	1.33	FP
	9/1/21			17.32	18.51	1.19	FP
	10/12/21			18.03	19.32	1.29	FP
MW-3	8/25/21	625.10	10-20	18.31	18.35	0.04	FP
	9/1/21			18.51	18.56	0.05	FP
	10/12/21			19.42	19.47	0.05	FP
MW-4	8/25/21	623.30	10-20	16.98	18.98	2.0	FP
	9/1/21			17.18	19.19	2.01	FP
	10/12/21			18.16	19.49	1.33	FP
MW-5	8/25/21	622.12	10-20	15.27	17.73	2.46	FP
	9/1/21			15.38	17.92	2.54	FP
	10/12/21			16.48	18.27	1.79	FP
MW-6	8/25/21	622.84	10-20	--	14.35	--	608.49
	9/1/21			--	14.49	--	608.35
	10/12/21			--	14.83	--	608.01
MW-7	8/25/21	614.92	8-18	11.45	11.92	0.47	FP
	9/1/21			11.59	11.87	0.28	FP
	10/12/21			12.23	12.25	0.02	FP
MW-8	8/25/21	615.10	5-15	10.45	13.53	3.08	FP
	9/1/21			10.63	13.89	3.26	FP
	10/12/21			11.70	13.36	1.66	FP
MW-9	8/25/21	615.58	7.5-17.5	11.03	11.09	0.06	FP
	9/1/21			11.32	11.36	0.04	FP
	10/12/21			11.71	11.82	0.11	FP
MW-10	8/25/21	608.68	2-12	--	3.62	--	605.06
	9/1/21			--	4.08	--	604.60
	10/12/21			--	4.52	--	604.16
MW-11	8/25/21	606.78	4-14	--	6.76	--	600.02
	9/1/21			--	7.06	--	599.72
	10/12/21			--	7.34	--	599.44
MW-12	8/25/21	611.62	7-17	10.30	10.49	0.19	FP
	9/1/21			10.39	10.95	0.56	FP
	10/12/21			10.31	13.45	3.14	FP
MW-13	8/25/21	610.45	5-15	7.91	11.18	3.21	FP
	9/1/21			8.08	11.22	3.14	FP
	10/12/21			9.06	10.99	1.93	FP
MW-14	8/25/21	608.36	5-15	8.01	10.38	2.37	FP
	9/1/21			8.07	10.32	2.25	FP
	10/12/21			9.12	9.93	0.81	FP
MW-15	9/1/21	610.20	5-15	--	7.89	--	602.31
	10/12/21			--	8.09	--	602.11
MW-16	9/1/21	605.95	5-15	--	7.78	--	598.17
	10/12/21			--	8.23	--	597.72

Monitoring Well	Date	TOC Elevation	Screened Interval	TOC to FP	TOC to GW	Free Product Thickness	GW Elevation
MW-17	8/25/21	601.53	3-13	3.78	3.81	0.03	FP
	9/1/21			3.94	3.99	0.05	FP
	10/12/21			--	4.47	--	597.06
MW-18	8/25/21	604.03	4-14	6.27	6.31	0.04	FP
	9/1/21			6.37	6.42	0.05	FP
	10/12/21			4.14	13.63	9.49	FP
MW-19	9/1/21	605.81	5-15	--	9.07	--	596.74
	10/12/21			--	9.46	--	596.35
MW-20	9/1/21	601.51	3-13	--	5.41	--	596.10
	10/12/21			--	6.08	--	595.43
MW-21	9/1/21	604.50	5-15	--	8.91	--	595.59
	10/12/21			--	8.68	--	595.82
MW-22	9/1/21	600.57	5-15	--	8.81	--	591.76
	10/12/21			--	9.38	--	591.19
MW-23	9/1/21	602.51	5-15	--	10.71	--	591.80
	10/12/21			--	11.26	--	591.25
MW-24	9/1/21	602.73	5-15	--	11.60	--	591.13
	10/12/21			--	11.60	--	591.13
MW-25	8/25/21	606.98	6-16	--	8.23	--	598.75
	9/1/21			--	8.31	--	598.67
	10/12/21			--	8.72	--	598.26
RW-1	9/1/21	624.54	10-20	18.35	19.22	0.87	FP
	10/12/21			19.20	19.66	0.46	FP
RW-2	9/1/21	623.44	10-20	17.27	18.12	0.85	FP
	10/12/21			18.11	19.15	1.04	FP
RW-3	9/1/21	623.34	10-20	17.48	18.25	0.77	FP
	10/12/21			18.26	19.16	0.90	FP
DW-1	9/1/21	624.84	40-45	--	18.87	--	605.97
	10/12/21			--	19.73	--	605.11
DW-2	9/1/21	611.79	35-40	--	9.46	--	602.33
	10/12/21			--	10.11	--	601.69
DW-3	9/1/21	610.33	35-40	--	8.69	--	601.64
	10/12/21			--	9.29	--	601.04
DW-4	9/1/21	602.27	20-25	--	10.47	--	591.80
	10/12/21			--	10.97	--	591.30