



JENNIFER M. GRANHOLM  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
LANSING

REC'D APR 02 2009



STEVEN E. CHESTER  
DIRECTOR

March 27, 2009

Mr. Gregory H. Fox  
Natural Resources Manager  
Nestle Waters North America, Inc.  
19275 Eight Mile Road  
Stanwood, Michigan 49346

Dear Mr. Fox:

SUBJECT: Source Approval White Pine Spring, PW 101 and Pipeline, WSSN 20166-67

The Michigan Department of Environmental Quality (MDEQ), Water Bureau (WB), in conjunction with the Central Michigan District Health Department, has inspected the well White Pine Spring, PW 101 (formerly known as White Cedar) and related pipeline. Well PW 101 and related pipeline is constructed in accordance with construction permit number 6708002 issued August 28, 2008 and is approved for use. The permitted capacity of well PW 101 is 150 gpm. This well is classified as a nontransient noncommunity water system (Type IIa) under the Michigan Safe Drinking Water Act, 1976 PA 399, as amended (SDWA).

Source PW 101 is located in section 20 of Osceola Township, Osceola County. This is a new source with well PW 101 construction completed on May, 3, 2001. Formal source approval for bottling water from PW 101 is hereby issued. By copy of this letter, the DEQ is notifying the MDA of this approval.

Should you require further information, please contact Mr. Kevin Holdwick, Noncommunity Drinking Water Unit, Drinking Water and Environmental Health Section, WB, at 517-241-1395, or you may contact me.

Sincerely,

Richard L. Overmyer, R.S., Chief  
Noncommunity Drinking Water Unit  
Drinking Water and  
Environmental Health Section  
Water Bureau  
517-241-1368/overmyerr@michigan.gov

rlo:sw

cc: Mr. Roger Elkins, Manager, City of Evart  
Mr. John Mill, Nestle Waters North America, Inc.  
Mr. Joe Geelhoed, Dan Vos Construction Company  
Mr. Doug Fitzgerald, Central Michigan District Health Department  
Mr. Bob Shryock, Central Michigan District Health Department  
Ms. Katherine Fedder, MDA  
Mr. Robert McCann, DEQ  
Mr. Wm. Elgar Brown, DEQ  
Mr. Kevin Holdwick, DEQ  
Mr. John Chickering, DEQ  
Mr. Brad Slater, DEQ

# Registration Receipt

Registration ID: 3908-20154-32

Date: 4/16/2015



## IMPORTANT - PLEASE READ

This registration is only valid for the withdrawal characteristics listed below. Any changes MUST be authorized by modifying the registration before making the withdrawal. To modify this registration, rerun the Water Withdrawal Assessment Tool with the new characteristics and proceed as directed. Registration expires after 18 months if the withdrawal is not constructed. Please contact the DEQ with any questions. Please print this page using the print button in the upper right hand corner of the page, and save with your records as a copy of your receipt.

## Contact Information

Owner/Representative: Owner

MDA Receiving Agency: No

### Property Owner Contact Information

Name: Arlene Anderson-Vincent  
 Facility Name: Nestle Waters North America  
 Address: 19275 8 Mile Road  
 City: Mecosta  
 State: MI  
 Zip Code: 49346  
 Phone: 231-823-8451  
 e-mail: arlene.anderson-vincent@waters.nestle.com

## Summary

Home Watershed:	11222
Debited Watersheds (gpm):	11222 (60.3)
Zone:	A
Pumping Capacity (gpm):	100
Well Casing Depth(ft):	94
Withdrawal Source:	Groundwater
Aquifer Type:	Glacial
Pumping Frequency:	Continuous
Pumping Months:	1,2,3,4,5,6,7,8,9,10,11,12
Pumping Days:	7
Pumping Hrs:	24
Latitude:	43.939610
Longitude:	-85.291941
County:	Osceola
Town Range Section:	18N08W20
Location of Discharge:	Ice Mountain Bottling Facility Stanwood Michigan
Comments:	This is an increase capacity from the currently permitted withdrawal rate of 150GPM to a total of 250GPM. For WSSN, 2016667
<b>Total Annual Withdrawal (gallons):</b>	<b>52,560,000</b>

DISCLAIMER: The Water Withdrawal Assessment Tool is designed to estimate the likely impact of a proposed water withdrawal on nearby streams. It is not an indication of how much groundwater may be available for your use. The quantity and quality of groundwater varies greatly with depth and location. You

should consult with a water resources professional or a local well driller about groundwater availability at your location.



# Central Michigan District Health Department

*Promoting Healthy Families, Healthy Communities*



Robert W. Graham, D.O., MPH  
Medical Director

Steve Hall, RS, MS  
Health Officer

June 29, 2015

Nestle Waters North America  
ATTN: Arlene Anderson-Vincent  
19275 8 Mile Rd.  
Stanwood, MI 49346

WSSN: 20166-67  
Source: 001

RE: Permit **Approval** to Alter a Public Well **Nestle Waters North America** 9 Mile Rd. Evart, MI

Dear Ms. Vincent:

Enclosed is the approved well permit application to alter the public water supply well for Nestle Waters North America. Please note the conditions of this permit are as follows:

## **MODIFICATION:**

Replacing the existing 20-hp submersible pump with a 50-hp submersible pump to accommodate an increase in instantaneous pumping capacity from 150 gpm to 250 gpm.

## **LOCATION**

The existing well met all minimum isolations to all potential sources of contamination when approved on November 17, 2000 and there are no new potential sources of contamination within the minimum isolation distance.

## **REGISTRATION:**

The proposed 100 gpm increased withdrawal was registered on-line with MDEQ on April 16, 2015. The increased withdrawal was designated as a Zone A withdrawal by the on-line assessment tool.

## **WELL RECORD**

The well drilling contractor is to complete the well record (pump log section) upon completion and submit a copy directly to, Central Michigan District Health Department, Osceola branch office, for use at the final inspection.

## **DISINFECTION AND SAMPLING**

After disinfection and pumping to waste, the Health Department must be contacted for final inspection. The health department, the owner, or his authorized representative may collect the water samples. **One of the required coliform samples is to be collected at the time of the final inspection.** A MINIMUM OF 2 CONSECUTIVE ACCEPTABLE BACTERIOLOGICAL SAMPLES (collected at least 24 hours apart, with no chlorine residual) and one acceptable nitrate/nitrite sample MUST BE OBTAINED PRIOR TO USE OF THE WELL BY THE PUBLIC.



If you have not chosen the well contractor yet, please make sure that you provide him with a copy of the permit, and this letter so that he is aware of the permit requirements.

If there are any questions regarding what is required, or if changes to the permit or procedures are proposed please contact this office at 231-832-5532 ext. 8522 for prior approval.

Sincerely,

A handwritten signature in cursive script that reads "Robert Shryock".

Robert Shryock, Sanitarian,  
Central Michigan District Health Department  
Osceola Branch Office  
4329 220th Ave  
Reed City, MI 49677

00/00



Department of Environmental Quality  
Office of Drinking Water and Municipal Assistance  
**Application and Permit to Install Water Supply System**  
Completion is required under the authority of Part 13, 1976 PA 399

RECEIVED  
RECEIVED JUN 25 2015

Shaded areas for Local Health Department or DEQ use only.

Permit to: ☐ Construct a Public Well Under 1976 PA 399 ☒ Alter a Public Well Under 1976 PA 399  
Well Permit Number W15-67-01 WSSN 20166-67 Source ID 001

Establishment Name	<u>Nestle Waters North America</u>	Address	<u>9 Mile Road</u>
City	<u>Evart</u>	State	<u>MICHIGAN</u> Zip <u>49631</u>
County	<u>Osceola</u>	Township	<u>Osceola</u> Section <u>20</u>
Owner/Manager Name	<u>Arlene Anderson-Vincent</u>		
Address	<u>19275 8 Mile Road, Stanwood, MI 49346</u>	Contact Phone	<u>231-823-8451</u>
Average No. of Persons Served Per Day	<u>Greater than 25</u>	No. of Service Connections	<u>N/A</u>
Premise Type	<u>Bottled Water Source</u> (Restaurant, Campground, School, etc.)	License Type	<u>Food</u> Food, Campground, DHS, etc.)
Seasonal Operation	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	From	To
Applicant Name	<u>Arlene Anderson-Vincent</u>	Address	<u>19275 8 Mile Road, Stanwood, MI 49346</u>
City	<u>Stanwood</u>	State	<u>Michigan</u> Zip <u>49346</u>
<i>I hereby apply for this permit and have authorization to do so. I understand this is a construction permit only and that the well is not to be put into service until approval has been granted. I further state the information given is accurate and complete.</i>			
Applicant's Signature		Date	Phone ( ) -

Provide scale drawing where indicated.  
**DO NOT PROCEED WITH CONSTRUCTION WITHOUT PERMIT APPROVAL FROM THE LOCAL HEALTH DEPARTMENT**  
PERMIT IS VALID FOR 2 YEARS FROM THE DATE OF ISSUANCE

Well Site Evaluation By	<u>Robert Shryock, R.S.</u>	Date	<u>6/29/2015</u>
Classification	Type IIA <input checked="" type="checkbox"/> Type IIB <input type="checkbox"/> <u>Proposed</u>	Required Minimum Pump Capacity	<u>250</u> GPM
Standard Isolation Area	<u>200</u> Ft.	Major Isolation Area	<u>2,000</u> Ft.
Permit Conditions/Deviations	<u>No deviations were issued for this well, The well is approved for an increase 20-hp pump to a 50-hp pump (150 gpm to 250 gpm). Well currently meets all minimum isolations and increased withdrawal registered with MDEQ. 2-coliform bacteria 24 hrs apart required - see attached Permit Letter.</u>		
Permit Approval/Denial	By <u>Robert Shryock</u>	Date	<u>6/29/2015</u>
<i>Not valid unless signed by local health department</i>			

Final Inspection By		Date	
Casing Termination Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>	Storage Tank Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>
Well Location Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>	Sample Tap Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>
Well Construction Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>	Pressure Relief Valve	Yes <input type="checkbox"/> No <input type="checkbox"/>
Well Record Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>	Pump Capacity Adequate	Yes <input type="checkbox"/> No <input type="checkbox"/>
1 <sup>ST</sup> Coliform Bacteria Test	Result _____ Date _____	Nitrate Test	Result _____ Date _____
2 <sup>ND</sup> Coliform Bacteria Test	Result _____ Date _____	Other	Result _____ Date _____
Water Supply Approved By		Date	
Comments			



Osceola County - CMDHD  
4329 220th Ave  
Reed City, MI 49677  
Phone: (231) 832-5532  
Fax: (231) 832-1020

**Receipt**  
JBES-9XXKRU

Payment ID <b>JBES-9XXKRH</b>	Check # / Detail <b>217506 Mika Meyers Beckett</b>	Payment Date <b>29-Jun-2015</b>
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**Establishment**  
Nestle Waters North America  
19275 8 Mile Rd  
Ewart MI 49631

**Legal Business**  
Nestle Waters North America  
19275 8 Mile Rd  
Stanwood MI 49346

<b>Payment Date</b> 29-Jun-2015	<b>Payment Type</b> Check	<b>Payment ID</b> JBES-9XXKRH	<b>Payment Details</b> Office: Osceola, 217506 Mika Meyers Beckett	<b>Payment Amount</b> \$362.00
<b>Fee Date</b> 26-Jun-2015	<b>Fee Type</b> Well Replacement-243-400-008	<b>Fee ID</b> JBES-9XUJ5H	<b>Fee Amount</b> \$362.00	<b>Amount Paid</b> \$362.00
				<b>Balance</b> \$0.00

Mika Meyers Beckett & Jones INC  
Grand Rapids, Michigan 49503

**VENDOR NO.**  
CMD001

**VENDOR NAME**  
CMDHD

TRANSACTION DATE	REFERENCE	GROSS AMOUNT	DEDUCTION	NET AMOUNT
6/25/2015	BJB 29659-35456	\$362.00	\$0.00	\$362.00

CHECK DATE	CHECK NO.	TOTAL GROSS	TOTAL DEDUCTION	CHECK AMOUNT
6/25/2015	217506	\$362.00	\$0.00	\$362.00

Mika Meyers Beckett & Jones INC  
Grand Rapids, Michigan 49503

6/25/2015	217506	CMD001	CMDHD
6/25/2015	BJB 29659-35456	\$362.00	\$0.00
			\$362.00

6/25/2015	217506	\$362.00	\$0.00	\$362.00
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RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
LANSING



KEITH CREAGH  
DIRECTOR

January 5, 2016

Ms. Arlene Anderson-Vincent  
Nestle Waters North America  
19275 8-Mile Road  
Stanwood, Michigan 49346

Dear Ms. Anderson-Vincent:

SUBJECT: Michigan Department of Environmental Quality (DEQ)  
Site-Specific Review (SSR) 4125-201512-31

This letter is in response to your request for an SSR of a proposed large quantity withdrawal associated with a 150 gallon per minute (gpm) increase/new capacity for well 67000003754. Previous registration 3908-20154-32 registered a 100 gpm increase above the original 150 gpm pump capacity of well 67000003754 that was installed May 3, 2001. The additional 150 gpm capacity requested under SSR 4125-201512 will bring the total pumping capacity for the subject well to 400gpm. Under Part 327, Great Lakes Preservation, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, all new large quantity withdrawals are prohibited from causing an adverse resource impact (ARI) to the surface waters of the state.

The DEQ examined all reasonably available information and the additional aquifer testing and groundwater model related data submitted in support of this request and determined that the withdrawal is **not likely** to cause an **ARI**. As a result of the SSR, the withdrawal was changed from a Zone D to a Zone A withdrawal from the Chippewa Creek watershed (ID 11222), which is classified as a cold stream. Therefore, you are hereby authorized to proceed with making the increased withdrawal. Please be advised that this determination is a presumption contingent upon the withdrawal conditions specified below and may be rebutted by a preponderance of evidence that the withdrawal has caused or is causing an ARI.

Based on information provided through the Water Withdrawal Assessment Tool and supplemental aquifer testing and groundwater model related data, the proposed withdrawal from well 67000003754 is registered with the following parameters:

Source:	Groundwater
Location	
Latitude:	43.939622°
Longitude:	-85.291933°
Capacity:	400 gpm
Pumping Frequency:	Continuous
Months:	January through December
Days per Week:	7
Hours per Day:	24
Casing Depth:	94 feet



Ms. Arlene Anderson-Vincent

Page 2

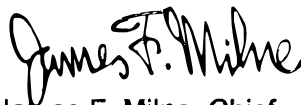
January 5, 2016

The registration number is Reg. 4125-201512-31; a copy of the registration receipt is enclosed. If the actual construction or operation characteristics for this withdrawal vary from what is registered, please contact Ms. Jill Van Dyke, Great lakes Shorelands Unit, Surface Water Assessment Section, Water Resources Division (WRD), at 517-241-1873; or vandykej1@michigan.gov, to obtain approval to proceed pursuant to Subsection 32706b(5) of Part 327.

The proposed increased withdrawal capacity authorized under this registration must be made operational by installing the pump in the well within 18 months of the date on the registration receipt. In addition, an updated pump record for well 67000003754 must be submitted to the local health department and DEQ.

If you have any questions or comments, please contact me. If you need to contact Ms. Van Dyke or me by mail, we can be reached at DEQ, WRD, P.O. Box 30458, Lansing, Michigan, 48909-7958.

Sincerely,



James F. Milne, Chief  
Great Lakes Shorelands Unit  
Surface Water Assessment Section  
Water Resources Division

Enclosure

cc: Central Michigan District Health Department, Osceola County  
Osceola County Drain Commissioner  
Osceola County Clerk  
Osceola Township Clerk, Osceola County  
Ms. Abigail Eaton, Michigan Department of Agriculture and Rural Development  
Ms. Tammy Newcomb, Michigan Department of Natural Resources  
Mr. Brian Jankowski, DEQ  
Ms. Jill Van Dyke, DEQ

Date: 1/5/2016\*

Expires: 7/5/2017

**Contact Information**

**Name:** Arlene Anderson-Vincent  
**Address:** 19275 8 Mile Road  
**City:** Stanwood  
**Zip:** 49346  
**Phone:** 231-823-8451  
**Contact** Arlene.anderson-vincent@waters.nestle.com

A rectangular stamp with a thick green border and a slight drop shadow. Inside, the words "Registration" and "Passed" are stacked vertically in a bold, black, sans-serif font.**Withdrawal Information**

**Home Watershed ID:** 11222  
**Source:** Groundwater  
**Lat/Long:** 43.939622°, -85.291933°  
**Capacity:** 400 gpm total (250gpm new/increased capacity)  
**ARI Zone:** A  
**Aquifer:** Glacial  
**Frequency:** Continuous  
**Months:** January through December  
**Days/Week:** 7  
**Hours/Day:** 24  
**Casing Depth:** 94 feet

**Water Use Information**

**Agricultural Use:** No  
**Facility Name:** Nestle Waters North America  
**County:** Osceola  
**Town/Range/Section** T18N/R8W/S20 Osceola Township  
**Authorized Withdrawal** 211,147,776 gallons per year at 400gpm capacity  
**Purpose:** Bottled Water  
**Discharge:** Ice Mountain Facility Stanwood Michigan

\* This withdrawal authorization is associated with an increased pumping capacity request for well 67000003754 resulting in a total withdrawal capacity of 400gpm. This authorization expires if the increased capacity is not made operational by 6/18/2017.



# Water Well And Pump Record

Completion is required under authority of Part 127 Act 368 PA 1978.



Import ID:

Failure to comply is a misdemeanor.

<b>Tax No:</b>	<b>Permit No:</b> W-00-6702	<b>County:</b> Osceola	<b>Township:</b> Osceola
<b>Well ID: 67000003754</b>  <b>Elevation:</b> 1145 ft.  <b>Latitude:</b> 43.939622  <b>Longitude:</b> -85.291933  <b>Method of Collection:</b> GPS Std Positioning Svc SA Off		<b>Town/Range:</b> 18N 08W	<b>Section:</b> 20
		<b>Well Status:</b> Active	<b>WSSN:</b> 2016667
		<b>Source ID/Well No:</b> 001	
		<b>Distance and Direction from Road Intersection:</b> 1/4 mile West of 100th and 1/4 mile South of 9 Mile	
		<b>Well Owner:</b> Nestle Waters North America	
<b>Well Address:</b> 10255 9 Mile Ewart, MI 49631		<b>Owner Address:</b> 19275 8 Mile Stanwood, MI 49346	

<b>Drilling Method:</b> Cable Tool <b>Well Depth:</b> 181.00 ft. <b>Well Type:</b> New <b>Casing Type:</b> Other <b>Casing Joint:</b> Welded <b>Casing Fitting:</b> None  <b>Diameter:</b> 10.00 in. to 94.00 ft. depth  <b>Borehole:</b> 16.00 in. to 195.00 ft. depth	<b>Well Use:</b> Type II public <b>Date Completed:</b> 5/3/2001 <b>Height:</b> 1.60 ft. above grade	<b>Pump Installed:</b> Yes <b>Pump Installation Date:</b> 7/9/2015 <b>Manufacturer:</b> Grundfos <b>Model Number:</b> 300S500-13 <b>Drop Pipe Length:</b> 67.00 ft. <b>Drop Pipe Diameter:</b> 4.00 in. <b>Draw Down Seal Used:</b> No	<b>Pump Installation Only:</b> No <b>HP:</b> 50.00 <b>Pump Type:</b> Submersible <b>Pump Capacity:</b> 250 GPM <b>Pump Voltage:</b> 460 <b>Drilling Record ID:</b>																																							
<b>Static Water Level:</b> 37.27 ft. Below Grade <b>Well Yield Test:</b> Pumping level 49.90 ft. after 192.00 hrs. at 400 GPM <b>Yield Test Method:</b> Test pump		<table border="1"> <thead> <tr> <th>Formation Description</th> <th>Thickness</th> <th>Depth to Bottom</th> </tr> </thead> <tbody> <tr><td>Brown Sand Fine</td><td>16.00</td><td>16.00</td></tr> <tr><td>Brown Sand Fine To Coarse</td><td>53.00</td><td>69.00</td></tr> <tr><td>Brown Sand &amp; Gravel Medium To Coarse</td><td>4.00</td><td>73.00</td></tr> <tr><td>Brown Sand Fine To Coarse</td><td>45.00</td><td>118.00</td></tr> <tr><td>Brown Sand Fine To Medium</td><td>2.00</td><td>120.00</td></tr> <tr><td>Brown Sand Fine</td><td>15.00</td><td>135.00</td></tr> <tr><td>Brown Sand Fine</td><td>11.00</td><td>146.00</td></tr> <tr><td>Brown Sand Fine</td><td>8.00</td><td>154.00</td></tr> <tr><td>Brown Sand Fine</td><td>11.00</td><td>165.00</td></tr> <tr><td>Brown Sand &amp; Gravel Medium</td><td>11.00</td><td>176.00</td></tr> <tr><td>Brown Sand Fine To Coarse</td><td>16.00</td><td>192.00</td></tr> <tr><td>Gray Clay Gravel Sand</td><td>3.00</td><td>195.00</td></tr> </tbody> </table>		Formation Description	Thickness	Depth to Bottom	Brown Sand Fine	16.00	16.00	Brown Sand Fine To Coarse	53.00	69.00	Brown Sand & Gravel Medium To Coarse	4.00	73.00	Brown Sand Fine To Coarse	45.00	118.00	Brown Sand Fine To Medium	2.00	120.00	Brown Sand Fine	15.00	135.00	Brown Sand Fine	11.00	146.00	Brown Sand Fine	8.00	154.00	Brown Sand Fine	11.00	165.00	Brown Sand & Gravel Medium	11.00	176.00	Brown Sand Fine To Coarse	16.00	192.00	Gray Clay Gravel Sand	3.00	195.00
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<b>Screen Installed:</b> Yes <b>Screen Diameter:</b> 10.00 in. <b>Screen Material Type:</b> Stainless steel-wire wrapped <b>Slot Length Set Between:</b> 0.02 75.00 ft. 94.00 ft. and 181.00 ft.  <b>Fittings:</b> None		<b>Filter Packed:</b> Yes <b>Blank:</b> <b>Well Grouted:</b> Yes <b>Grouting Method:</b> Grout pipe inside casing <table border="1"> <thead> <tr> <th>Grouting Material</th> <th>Bags</th> <th>Additives</th> <th>Depth</th> </tr> </thead> <tbody> <tr> <td>Neat cement</td> <td>26.00</td> <td>None</td> <td>0.00 ft. to 42.00 ft.</td> </tr> <tr> <td>Bentonite slurry</td> <td>0.00</td> <td>None</td> <td>42.00 ft. to 84.00 ft.</td> </tr> </tbody> </table>		Grouting Material	Bags	Additives	Depth	Neat cement	26.00	None	0.00 ft. to 42.00 ft.	Bentonite slurry	0.00	None	42.00 ft. to 84.00 ft.																											
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<b>Wellhead Completion:</b> Well house		<b>Geology Remarks:</b> Occasional clay lenses from 0 to 69 feet, from 120 to 135, from 146 to 154 and from 165 to 176 feet.																																								
<b>Nearest Source of Possible Contamination:</b> <table border="1"> <thead> <tr> <th>Type</th> <th>Distance</th> <th>Direction</th> </tr> </thead> <tbody> <tr> <td>None</td> <td></td> <td></td> </tr> </tbody> </table>		Type	Distance	Direction	None			<b>Drilling Machine Operator Name:</b> Mr. Richard Herron <b>Employment:</b> Employee  <b>Contractor Type:</b> Water Well Drilling Contractor <b>Business Name:</b> Stearns Drilling Company <b>Business Address:</b> 6974 Hammond SE, Dutton, MI, 49316 <b>Reg No:</b> 41-1095																																		
Type	Distance	Direction																																								
None																																										
		<b>Water Well Contractor's Certification</b> This well was drilled under my supervision and this report is true to the best of my knowledge and belief.  <b>Signature of Registered Contractor</b> _____ <b>Date</b> _____																																								
<b>General Remarks:</b> 16in casing driven to 195ft. 10in well constructed in 16in casing. Grout 0-42ft 100 bags neat cement (5/7/03). 16in casing removed. Screen blanks from app 173ft-179ft & 110ft-114ft. Well in wellhouse with stainless steel discharge flange.																																										
<b>Other Remarks:</b> Casing Type: Schedule 40 stainless steel																																										



# Central Michigan District Health Department

*People Caring For People*

Robert W. Graham, D.O., MPH  
Medical Director

Mary L. Kushlon, MSA  
Health Officer

in Office  
12 E. Preston Ave.  
Pleasant, MI 48668  
Administration 517-773-4921

November 17, 2000

**Branch Offices:**

Benec County  
27 Deep River Rd.  
Bendish, MI 48858  
7-866-6541  
AX 517-866-0431

Malcolm Pirnie Engineers  
1500 Abbott Road  
East Lansing, MI 48823

Benne County  
15 W. Main  
O. Box 237  
Bendish, MI 48858  
17-539-6131  
AX 517-539-4439

Attn: Shane McDonald  
Re: Permit to Install Water Supply Facilities **Wssn: 20166-67**

Benne County  
23 N. Bowers  
Bendish, MI 48858  
17-426-9431  
AX 517-426-6852

Dear Mr. McDonald:

Benne County  
012 E. Preston  
Bendish, MI 48858  
17-773-3921  
AX 517-773-4319

Enclosed is the approved well permit application for construction of a new Type II-A well for Great Spring Waters of America located at 100th Avenue, Osceola MI. Please note the conditions of this permit are as follows:

Benne County  
15 N. Bowers  
Bendish, MI 48858  
17-426-9431  
AX 517-426-6852

**-ISOLATION**

**Standard -**

The well is to be located a minimum of 200' feet from all potential sources of contamination such as: septic fields, septic tanks, dry wells, buried sewer lines, surface water (lakes, streams, etc.), storm sewer lines, catch basins or animal pastures.

Benne County  
102 E. Main Street  
Bendish, MI 48858  
17-773-3921  
AX 517-773-4319

**Major -**

The well is to be located a minimum of 2000' from all major source of contamination. Such sources include, but are not limited to chemical storage, fuel storage tanks, brine or injection wells, contamination plumes and land application of sewage or sewage lagoons.

Benne County  
1015 Shatt Drive  
P.O. Box 739  
Bendish, MI 48858  
517-386-0186  
FAX 517-386-8921

**-DEVIATIONS**

None

**-GROUTING**

The well must be grouted using neat cement and methods approved by the department. The grouting addendum enclosed with the permit addresses proper grouting requirements. The health department will need to be notified **24 hours BEFORE grouting takes place.**



**-CAPACITY**

The well must have a minimum capacity of approximately 20,000 gallons a day.

**-PLASTIC PIPE USE**

If plastic pipe is used between the well and the pressure tank or buildings, it must be National Sanitation Foundation approved for potable water (NSF-pw) and must have a minimum 160 psi rating or approved by American Waterworks Association.

**-WELL ABANDONMENT**

None

**-WELL RECORD**

The well drilling contractor is to submit a copy of the well record (well log) upon completion of the well. The copy should be sent directly to Central Michigan District Health Department, Isabella County Branch Office, for use at the final inspection.

**-DISINFECTION AND SAMPLING**

We have found that the most effective way to initially disinfect new wells is to use the displacement method. Place heavily chlorinated water into the well to displace at least two times the casing volume; pump into the distribution system; allow 24 hours contact time; and then pump to waste.

A useable sample tap must be located near the pressure tank or as close to the well as possible. The sample tap should have a 1/4 inch, downward turned, unthreaded outlet and be operated by a ball valve or a good quality gate valve.

After disinfection and pumping to waste, the health department must be contacted for final inspection. The collection of the first bacteriologic sample must be conducted by the health department. A MINIMUM OF **TWO CONSECUTIVE ACCEPTABLE BACTERIOLOGICAL SAMPLES** (collected at least 8 hours apart, with no chlorine residual) and **one** acceptable **Nitrate/Nitrite** sample **MUST BE OBTAINED PRIOR TO USE OF THE WELL BY THE PUBLIC.** If coliform bacteria are detected, repeat disinfection and sampling are required. Phase II-V samples are also required before finalizing the well and are listed below:

Analyte	Unit Number	Test Code
	(if using State lab)	(if using State lab)
General Metals	36ME	CMET2
Cyanide	36CN	CCN
VOC (volatile organic compounds)	36VO	CXVO
SOC (synthetic organic chem)	36NV	CXPT
SOC (synthetic organic chem)	36NV	CXHB
SOC (synthetic organic chem)	36LP	CXLP

Additional stipulations may be required by Rich Overmyer R.S., from the Department of Environmental Quality.

Also enclosed, you will find the Nontransient Noncommunity Water Supply Capacity Development Application. The application will need to be filled out and mailed back to our Mt. Pleasant office before the well can be finalized.

If there are any questions regarding what is required, or if changes to the permit or procedures are proposed please contact Mike Kowaleski at the Isabella County Branch Office at 517-773-5921 ext. 158.

Sincerely,



Mike Kowaleski, R.S.  
Environmental Health Division  
Type II Program Coordinator

MK/sw  
enc.

cc: Rodney Allen, Natural Resource Mgr Midwest  
Perrier Group of America, 1119 S. Third St., St. Charles, IL. 60174  
Rich Overmyer, RS, Chief Noncommunity Unit, DEQ  
Cynthia Weaver, DEQ, DWRPD



T-858 P-05/11 F-574

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
DRINKING WATER AND RADIOLOGICAL PROTECTION DIVISION

For DEQ/Health Department Use

## APPLICATION AND PERMIT TO INSTALL WATER SUPPLY FACILITIES

Authority: 1976 PA 399

alt To:

Collection of Public Well Under  
1999 or Sanitary Code

Alter a Public Water Supply Under  
1976 PA 399 or Sanitary Code

10-00-6702  
 Well Permit Number  
 Corresponding Sewage Permit No.  
 2016-6702  
 WSSN

ABSTRACT NAME Great Spring Waters of America ADDRESS 1119 South 3rd St CITY San Charles ZIP 60174  
 JNTY Osceola TOWNSHIP Osceola TOWN 18 NB RANGE 8 E/W SECTION 20 FRACTION NE 1/4 SW 1/4 NE 1/4  
 NER/MANAGER Great Spring Waters of America ADDRESS 1119 South 3rd St CITY San Charles ZIP 60174  
 SINISS TELEPHONE 630/443-3489 OWNERSHIP: GOVERNMENT ☐ PRIVATE ☒ AVERAGE NO. OF PERSONS SERVED PER DAY 25  
 OF SERVICE CONNECTIONS 1 PREMISE TYPE water bottle LICENSE TYPE MMA License  
 (noted: New for Campground, School, Airport, etc.) (Campground, Food, DSS, Migrant Labor, etc.)

SEASONAL: FROM \_\_\_\_\_ TO \_\_\_\_\_ WELL CONTRACTOR Searns TELEPHONE 446 6987770 PUMP INSTALLER unknown of this firm

PPLICANT'S NAME Shaye McDonald ADDRESS 1500 Abbott Rd CITY East Lansing ZIP 48823

I, James M. Smith, hereby apply for this permit and have authorization to do so. I understand this is a construction permit only, and that the well is not to be put into service until final approval has been granted. I further state the information given is accurate and complete.

Applicant's Signature [Signature] Date 11/6/2000 Phone: 512-332-0111  
(FOR DEO/HEALTH DEPARTMENT USE ONLY - DO NOT WRITE IN SHADED AREAS)

WELL CONSTRUCTION PERMIT (APPROVAL/DENIAL)  
DO NOT PROCEED WITH CONSTRUCTION WITHOUT SIGNATURE  
FROM DEPARTMENT OF HEALTH RESIDENTIAL  
PERMITS

RECEIVED MINIMUM QUALITY CONTROL

Per Instructions by DEQ

SCALE DRAWING: Make a SCALE DRAWING, including dimensions, in the space provided (11' x 17'). Show well location in respect to all possible sources of contamination, including adjacent properties, sewer lines, septic systems, and major sources of contamination. This drawing must be approved by the DEQ/health department. Indicate North.

WELL LOCATION APPROVED YES ☒ NO ☐  
WELL CONSTRUCTION SATISFACTORY YES ☒ NO ☐  
VENTED YES ☒ NO ☐  
BURIED SUCTION LINE PIPED YES ☒ NO ☐  
PUMP SHALLOW WELL JET ☐ DEEP WELL JET ☒ SUBMERSIBLE ☐  
HAND PUMP ☐ TURBINE ☐ OTHER ☐  
1650 FT

1. SHIPPING MATERIALS: MATERIAL

STORAGE TYPE	LOCATION

LOCATION:  1400 ft

101

FUTURE ACTION GROUPING BY OWNER: ☒ LHO ☐ OTHER ☐ UNK

see attached map

FREQUENCY: QUARTERLY ☒ ANNUALLY ☒ OTHER ☐

RECORD DATE RECEIVED: 10/1/83

APPROVED: YES ☒ NO ☐ BY: [Signature]

After well construction is completed, a water well record must be submitted, and the DEQ/health department notified for final inspection and sampling of the well.

**SCALE DRAWING:** Make a **SCALE DRAWING**, including dimensions, in the space provided below. Show well location in respect to all possible sources of contamination, including adjacent properties, sewer lines, septic systems, and major sources of contamination. This drawing must be approved by the DEQ/health department. Indicate North.

1650 ft

↓

see attached map

After well construction is completed, a water well record must be submitted, and the DEQ/health department notified for final inspection and sampling of the well.

**DISTRIBUTION:** White: Local Health Department      Canary: Well Contractor      Pink: Owner

EQP 2024 (10/97)

止 190591





MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
WATER BUREAU

**PERMIT FOR WATER SYSTEM CONSTRUCTION**

THIS PERMIT IS ISSUED UNDER PROVISIONS OF SEC. 4 OF ACT 399, P.A. 1976, AS AMENDED, FOR CONSTRUCTION, OR ALTERATION, OF A WATERWORKS SYSTEM OR PORTIONS THEREOF DESCRIBED HEREON. IT DOES NOT OBVIATE THE NEED TO SATISFY VARIOUS REQUIREMENTS OF OTHER AGENCIES.

Nestle Waters North America, Inc.  
19275 8 Mile Road  
Stanwood, Michigan 49346

DRINKING WATER AND ENVIRONMENTAL HEALTH SECTION  
525 W. Allegan, P.O. Box 30273  
LANSING MI 48909-7773

PERMIT NUMBER <b>6708002</b>	DATE ISSUED <b>August 28, 2008</b>	ISSUED TO <b>Nestle Waters North America, Inc.</b>	WSSN NO. <b>20166-67</b>
SUBJECT: <b>Nestle Waters North America Well House at Well PW-101 and Watermain To Connect to City of Evart Watermain</b>		ISSUED BY <b>Kevin Holdwick, P. E.</b> <b>Environmental Engineer</b>	
		MICH. DEPT. OF ENVIRONMENTAL QUALITY WATER BUREAU DWEHS	
		<b>EXAMINED AND APPROVED</b>	
		By: <i>K Holdwick</i>	
		Date: <b>8/28/08</b>	

This permit is for construction of the following located in Osceola County, Michigan, in accordance with plans and an application prepared and submitted to the Department of Environmental Quality (DEQ) by Dan Vos Construction Company and stamped received April 10, 2008.

A well house building, 10'-8" x 14'-8", with related piping, valves and controls over existing well (PW-101) 195' deep with a 10" dia. stainless steel casing and screen. The well will be equipped with a 20 HP submersible pump and motor with variable speed drive rated at 150 gpm @ 260' of TDH, set at 70' below land surface.

3,800 ft. of 5" water pipeline from borehole building (PW-101) at 1,500 ft. west of 100<sup>th</sup> Avenue and 2,150 ft. south of 9 Mile Road, southeasterly in private easement to 100<sup>th</sup> Avenue, 500 ft. north of 8 Mile Road.

3,430 ft. of 5" water pipeline along the east side of 100<sup>th</sup> Avenue, in private easement, from 500 ft. north of 8 Mile Road to 2,930 ft. south of 8 Mile Road.

4,400 ft. of 5" water pipeline from 100<sup>th</sup> Avenue, 2,930 ft. south of 8 Mile Road, southeasterly in private easement to the east side of 95<sup>th</sup> Avenue, 1,320 ft. North of 7 Mile Road, then south along 95<sup>th</sup> Avenue to 7 Mile Road.

3,800 ft. of 5" water pipeline from 95<sup>th</sup> Avenue and 7 Mile Road in private easement, 400 ft. east along 7 Mile Road, then southerly 3,000 ft. to the west city limits of Evart (connects to watermain proposed in the City of Evart).

This permit consists of 1 of 2 page(s).

This permit is valid for 2 years from date of issuance. If construction is not commenced within 2 years, a permit extension may be applied for in writing by identifying the project and the number on the permit for which the extension is requested.

It is a condition of this permit that the permittee give notice to public utilities pursuant to Act No. 53 of the Public Acts of 1974, as amended (CLA 460.701 et seq.), and comply with the requirements of that Act.

Issuance of this permit is in compliance with the provisions of Executive Order 1974-4 and issued pursuant thereto.



Drawings included with this application:

1. Cover Sheet, Drawing Index, Project Overview, Notes, Details and Site Plans for the White-Cedar-Osceola PW-1010 site and the connection to Borehole Building #7 (Sheets GR-00 through C-04).
2. Spring Water Supply Pipeline Plan and Profiles (Sheets 1 of 16 through 16 of 16).
3. Architectural, Structural and Mechanical Drawings (Sheets A-01 through A-04)
4. Process Systems Drawings (Sheets PP-01 through PP-05).
5. Electrical, Controls and Instrumentation Drawings (Sheets 3059-00 through 3059-E04).
6. PLC Wiring Drawings (Sheets 3059-I-01 through 3059-I-05).

Final source approval for potable use is subject to sampling demonstrating compliance with drinking water standards for total coliform and final inspection.

cc: Mr. Gregory H. Fox, Nestle Waters North America, Inc.  
Mr. Roger Elkins, Manager, City of Evart  
Mr. Joseph Geelhoed, Dan Vos Construction Company  
Ms. Michelle Patton, Central Michigan District Health Department  
Mr. Mr. Elgar Brown, DEQ  
Mr. Richard Overmyer, DEQ  
Mr. John Chickering, DEQ

This permit consists of 2 of 2 page(s)

This permit is valid for 2 years from date of issuance. If construction is not commenced within 2 yrs., a permit extension may be applied for in writing by identifying the project and the number on the permit for which the extension is requested.

It is a condition of this permit that the permittee give notice to public utilities pursuant to Act No. 53 of the Public Acts of 1974, as amended (MCLA 460.701 et seq.), and comply with the requirements of that Act.

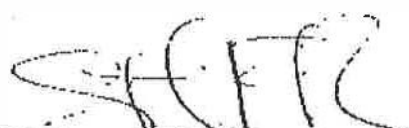
Issuance of this permit is in compliance with the provisions of Executive Order 1974-4 and issued pursuant thereto.



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
WATER BUREAU

**PERMIT FOR WATER SYSTEM CONSTRUCTION**

THIS PERMIT IS ISSUED UNDER PROVISIONS OF SEC. 4 OF ACT 399, P.A. 1976, AS AMENDED, FOR CONSTRUCTION OR ALTERATION OF A WATERWORKS SYSTEM OR PORTIONS THEREOF DESCRIBED HEREON. IT DOES NOT OBVIATE THE NEED TO SATISFY VARIOUS REQUIREMENTS OF OTHER AGENCIES.

Nestle Waters North America, Inc. 19275 8-Mile Road Stanwood, Michigan 49346		DRINKING WATER AND ENVIRONMENTAL HEALTH SECTION 525 W. Allegan, P.O. Box 30273 LANSING MI 48909-7773	
PERMIT NUMBER <b>6705002</b>	DATE ISSUED <b>Amended March 6, 2006</b>	ISSUED TO <b>Nestle Waters North America, Inc.</b>	WSSN NO.
SUBJECT: Nestle Waters North America Bulk Water Load Station 2510 East U.S. 10 Ewart, Michigan		ISSUED BY  <b>Stanley F. Pruss</b> Deputy Director 	

March 6, 2006

This permit is for construction of the following located in the city of Ewart, Osceola County, Michigan in accordance with plans prepared and submitted to the Department of Environmental Quality (DEQ) by STS Consultants, Ltd.

Water load station processing up to 500 gallons per minute for transport to bottling facility (Source of water - Ewart City Well #7), including:

Transition manhole and connecting piping to load station

9000 gallon stainless steel surge tank

2 Alfa-Laval 15 horsepower centrifugal transfer pumps

1 Alfa-Laval 5 horsepower centrifugal jockey pump

2 Ultraviolet light treatment units providing minimum light intensity of 1.0 mW/s/cm<sup>2</sup>

Metering, piping, hoses, valves, and controls for water transfer to tankers

4,000 gallon neutralization tank, pump, chemical storage metering, valves, piping, and controls for clean-in-place procedures.

Final source approval for potable use is subject to sampling demonstrating compliance with drinking water standards for total coliform and final inspection.

This permit consists of 1 of 2 page(s).

This permit is valid for 2 years from date of issuance. If construction is not commenced within 2 years, a permit extension may be applied for in writing by identifying the project and the number on the permit for which the extension is requested.

As a condition of this permit that the permittee give notice to public utilities pursuant to Act No. 53 of the Public Acts of 1974, as amended (CLA 460.701 et seq.), and comply with the requirements of that Act.

Issuance of this permit is in compliance with the provisions of Executive Order 1974-4 and issued pursuant thereto.

cc: Mr. Roger Elkins, Evart City Manager  
Ms. Michelle Patton, Central Michigan District Health Department  
Mr. Elgar Brown, DEQ  
Mr. Richard Overmyer, DEQ  
Mr. Brad Slater, DEQ  
Ms. Tracy Boks, DEQ

This permit consists of 2 of 2 page(s)

This permit is valid for 2 years from date of issuance. If construction is not commenced within 2 yrs., a permit extension may be applied for in writing by identifying the project and the number on the permit for which the extension is requested.

It is a condition of this permit that the permittee give notice to public utilities pursuant to Act No. 53 of the Public Acts of 1974, as amended (MCLA 460.701 et seq.), and comply with the requirements of that Act.

Issuance of this permit is in compliance with the provisions of Executive Order 19744 and issued pursuant thereto.



JENNIFER M. GRANHOLM  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
LANSING



STEVEN E. CHESTER  
DIRECTOR

June 1, 2009

Mr. Kent Jensen  
Nestle Waters North America Inc.  
19275 Eight Mile Road  
Stanwood, Michigan 49346

WH54-001

Dear Mr. Jensen:

SUBJECT: Water Hauler License Renewal

Enclosed is your 2009-2010 certificate licensing you as a water hauler in accordance with the Michigan Safe Drinking Water Act, 1976 PA 399, as amended. Also enclosed is your tank licensing decals. Please attach these decals over the previous licensing decals affixed to your transportation tank(s).

Per your letters of April 2, 2009 and April 23, 2009, we have amended your license as follows: removed 6,500 gallon tankers and added Nestle White Pine Well, PW-101, WSSN: 20166-67, as an approved source for hauling water.

These licensed tanks are the only transportation tanks approved for your water hauling business. If, in the future, you wish to use additional tanks or vehicles, please contact this office for approval prior to use. Also, if you should add customers that provide water to the public; this office should be informed. We must inspect and approve the receiving tanks that store the water for this use.

If you have any questions concerning the items discussed above, please contact this office.

Sincerely,

Starr Wirth  
Noncommunity Unit  
Drinking Water and Environmental Health Section  
Water Bureau  
517-241-1370

Enclosures

cc: Mecosta County Health Department



## CERTIFICATION OF COMPLIANCE WITH WATER CONSERVATION MEASURES FOR BEVERAGE INDUSTRY SECTOR

Nestlé Waters North America Inc. hereby certifies that it is in compliance with the accepted water conservation practices as developed and submitted to the Michigan Department of Environmental Quality for the beverage industry sector.

Nestlé Waters North America Inc.

Dated: 7/15/16

By: Mikell Plosz

Its: QA Manager