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Project Number	Project Name	Type of Need	Reasons for Need	NRHE	C/F	Reg/Sec	Design Cap.	Diameter	Length	Number Needed	Cost Estimate	Date of Cost	Doc.
1000	Abandon Well #1	R5	A1	H	F	4A	1.38			1			6,10
1001	Rehab Well #2	R1	A1	H	F	4A	2.34 MGD			1			6,10
1002	Rehab Well #3	R1	A1	H	F	4A	1.44 MGD			1			6,10
1003	Rehab Well #4	R1	A1	H	F	4A	1.62 MGD			1			6,10
1004	Rehab Well #5	R1	A1	H	F	4A	1.87 MGD			1			6,10
1005	Disinfection - Chlorinator Replace 2	T10	A6	R	F	1B	2.34 MGD			1			6,10
1006	Disinfection - Chlorinator Replace 3	T10	A6	R	F	1B	1.44 MGD			1			6,10
1007	Disinfection - Chlorinator Replace 4	T10	A6	R	F	1B	1.62 MGD			1			6,10
1008	Disinfection - Chlorinator Replace 5	T10	A6	R	F	1B	1.87 MGD			1			6,10
1009	Fluoridation - Feeder Well 2	T37	A1	R	F	4A	2.34 MGD			1			6,10
1010	Fluoridation - Feeder Well 3	T37	A1	R	F	4A	1.44 MGD			1			6,10
	Fluoridation - Feeder Well 4	T37	A1	R	F	4A	1.62 MGD			1			6 10

1011													,
1012	Fluoridation - Feeder Well 5	T37	A1	R	F	4A	1.87 MGD			1			6,10
1013	Treatment Building Rehabs	R3	A1	H	F	4A				4			6,10
1014	Rehab Elevated Tank at Well #2	S1	A1	H	F	4A	0.25 MG			1			6,10
1015	Rehab Elevated Tanks at Wells #4 and #5	S1	A1	H	F	4A	0.5 MG			2			6,10
2000	Existing Distribution Replacement	M1	A1	R	F	4A			36960 ft				6,10
3000	Water Meter Replacement	M8	A11	N	C	2B		0.75		870			6,10