

WELL CONSTRUCTION RECORD

WELL CONTRACTOR: Dewey Wright Well Pump Co. Inc.
 WELL CONTRACTOR CERTIFICATION #: 2687
 STATE WELL CONSTRUCTION PERMIT#: Steve Reese

050482

1. WELL USE (Check Applicable Box): Residential Municipal Industrial Agricultural Monitoring
 Recovery Heat Pump Water Injection Other If Other, List Use: _____

2. WELL LOCATION: (Show sketch of the location below)
 Nearest Town: CROSSNORE County: MEYER
154 OFF HWY 221
(Road Name and Numbers, Community, or Subdivision and Lot No.)

3. DATE DRILLED 02/26/05
 4. TOTAL DEPTH 305
 5. CUTTINGS COLLECTED YES NO
 6. DOES WELL REPLACE EXISTING WELL? YES NO
 7. STATIC WATER LEVEL Below Top of Casing: 20 FT.
(Use "+" if Above Top of Casing)

DRILLING LOG		DEPTH
From	To	Formation Description
0	55	DIRT SANDSTONE
55	64	GRANITE
64	65	QUARTZ
65	255	GRANITE
255	258	QUARTZ
258	305	GRANITE

9. TOP OF CASING IS 1 FT. Above Land Surface*
*Top of casing terminated at/or below land surface requires a variance in accordance with 15A NCAC 2C.0118
 10. YIELD (gpm): 2 METHOD OF TEST Air
 11. WATER ZONES (depth): 1.00 gpm 64-65 1.00 gpm 255-258
0.00 gpm 0.00 gpm

12. CHLORINATION: Type HTH Amount 57

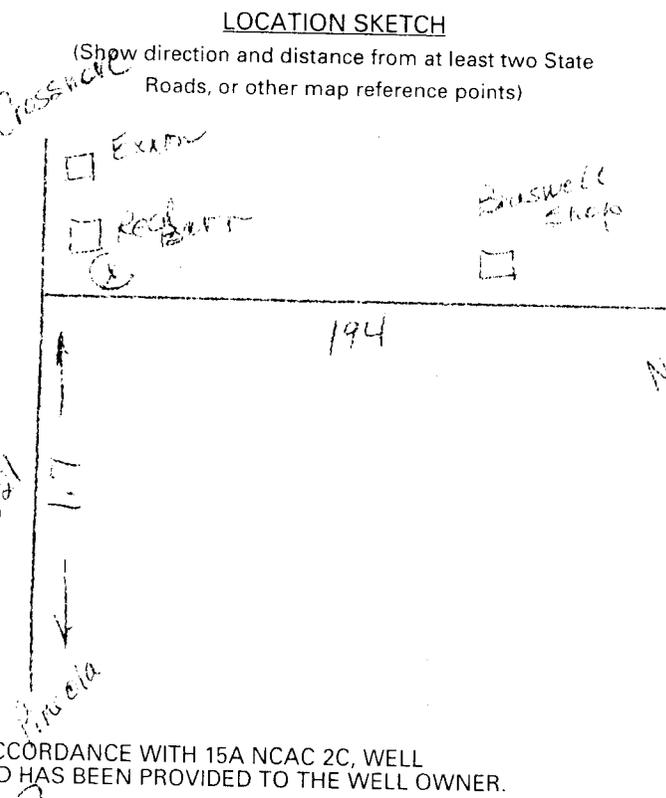
13. CASING:
 From 0 To 65 Ft. Diameter 8 1/4 Wall Thickness or Weight/Ft. 122 Material 304V
 From _____ To _____ Ft. _____
 From _____ To _____ Ft. _____

14. GROUT:
 From 0 To 20 Ft. Material Cement Method Gravity Flow
 From _____ To _____ Ft. _____

15. SCREEN:
 From _____ To _____ Ft. Diameter _____ in. Slot Size _____ in. Material _____
 From _____ To _____ Ft. _____ in. _____ in. _____
 From _____ To _____ Ft. _____ in. _____ in. _____

16. SAND/GRAVEL PACK:
 From _____ To _____ Ft. Size _____ Material _____
 From _____ To _____ Ft. _____

17. REMARKS: _____



FOR OFFICE USE ONLY
 Quad No: _____
 Serial No. _____

Steve Reese 10-12-05
 SIGNATURE OF PERSON CONSTRUCTING THE WELL
 Submit original to Division of Water Quality, Groundwater Section within 30 days