



RESIDENTIAL WELL CONSTRUCTION RECORD

North Carolina Department of Environment and Natural Resources - Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 2878

060591

1. WELL CONTRACTOR:

STEVE PRICE

Well Contractor (Individual Name)

DEWEY WRIGHT WELL & PUMP CO., INC.

Well Contractor Company Name

STREET ADDRESS **P. O. BOX 308**

BOONE

NC

28807

City or Town

State

Zip Code

(**828**) - **284-2851**

Area code - Phone number

2. WELL INFORMATION:

SITE WELL ID #(if applicable) _____

STATE WELL PERMIT #(if applicable) _____

DWQ or OTHER PERMIT #(if applicable) _____

WELL USE (Check Applicable Box): Residential Water Supply X

DATE DRILLED **10/30/2006**

TIME COMPLETED **2:30** AM PM X

3. WELL LOCATION:

CITY: **BANNER ELK** COUNTY: **AVERY**

HORSE BOTTOM RD. OFF DOBBINS RD. OFF 184

(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

Slope Valley Flat Ridge Other
(check appropriate box)

LATITUDE 3 **38.09512**

LONGITUDE **081.50234**

May be in degrees, minutes, seconds or in a decimal format

Latitude/longitude source: GPS Topographic map

(location of well must be shown on a USGS topo map and attached to this form if not using GPS)

5. WELL DETAILS:

a. TOTAL DEPTH: **245**

b. DOES WELL REPLACE EXISTING WELL? YES NO X

c. WATER LEVEL Below Top of Casing: **60** FT.
(Use "+" if Above Top of Casing)

d. TOP OF CASING IS **1** FT. Above Land Surface*
* Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118

e. YIELD (gpm): **10** METHOD OF TEST **Air**

f. DISINFECTION: Type **HTH** Amount **35**

g. WATER ZONES (depth):

From **139** To **140** From **215** To **218**

From _____ To _____ From _____ To _____

From _____ To _____ From _____ To _____

6. CASING:

Depth	Diameter	Thickness/Weight	Material
From 0 To 25 Ft.	6 1/8	350	PVC
From 0 To 0 Ft.			
From _____ To _____ Ft.			

7. GROUT:

Depth	Material	Method
From 0 To 20 Ft.	Cement	Gravity Flow
From _____ To _____ Ft.		
From _____ To _____ Ft.		

8. SCREEN:

Depth	Diameter	Slot Size	Material
From _____ To _____ Ft.	_____ in.	_____ in.	
From _____ To _____ Ft.	_____ in.	_____ in.	
From _____ To _____ Ft.	_____ in.	_____ in.	

9. SAND/GRAVEL PACK:

Depth	Size	Material
From _____ To _____ Ft.		
From _____ To _____ Ft.		
From _____ To _____ Ft.		

10. DRILLING LOG

From	To	Formation Description
0	18	DIRT ROCK
18	139	GRANITE SHALE
139	140	GRANITE
140	215	GRANITE
215	218	QUARTZ
218	245	GRANITE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

RECEIVED
DIV. OF WATER QUALITY

DEC 14 2006

11. REMARKS:

1 GPM 139 - 140 9 GPM 215 - 218
0 GPM - 0 GPM -
0 GPM - 0 GPM -

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

Steve Price
SIGNATURE OF CERTIFIED WELL CONTRACTOR _____ DATE _____

STEVE PRICE

PRINTED NAME OF PERSON CONSTRUCTING THE WELL _____

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt.,
1617 Mail Service Center - Raleigh, NC 27699-1617 Phone No. (919) 733-7015 ext 568.