



# RESIDENTIAL WELL CONSTRUCTION RECORD

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

337665

WELL CONTRACTOR CERTIFICATION # 2878

080763

### 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 28607**

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 **12/11/2006**

TIME COMPLETED **12:00** AM  PM  X

### 3. WELL LOCATION:

CITY: **NEWLAND** COUNTY: **AVERY**

**LTL PLUMTREE CRK RD. OFF SQUIRREL CREEK**

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

### TOPOGRAPHIC / LAND SETTING:

Slope  Valley  Flat  Ridge  Other  
(check appropriate box)

LATITUDE **3 36.02834**

LONGITUDE **081.57840**

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: **805**

b. DOES WELL REPLACE EXISTING WELL? YES  NO  X

c. WATER LEVEL Below Top of Casing: **40** 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): **1** METHOD OF TEST **Air**

f. DISINFECTION: Type **HTH** Amount **145**

g. WATER ZONES (depth):

From **550** To **551** From **760** To **761**

From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

### 6. CASING:

Depth	Diameter	Weight	Material
From <b>0</b> To <b>76</b> Ft.	<b>6 1/8</b>	<b>350</b>	<b>PVC</b>
From <b>0</b> To <b>0</b> Ft.			
From _____ To _____ Ft.			

### 7. GROUT:

Depth	Material	Method
From <b>0</b> To <b>20</b> Ft.	<b>Cement</b>	<b>Gravity Flow</b>
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
<b>0</b>	<b>70</b>	<b>MUD SAND</b>
<b>70</b>	<b>550</b>	<b>GRANITE</b>
<b>550</b>	<b>551</b>	<b>QUARTZ</b>
<b>551</b>	<b>760</b>	<b>GRANITE</b>
<b>760</b>	<b>761</b>	<b>QUARTZ</b>
<b>761</b>	<b>805</b>	<b>GRANITE</b>

### 11. REMARKS:

**0.25 GPM 550 - 551 0.75 GPM 760 - 761**

**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 **1-22-2007** DATE

**STEVE PRICE**

PRINTED NAME OF PERSON CONSTRUCTING THE WELL

RECEIVED  
DIV. OF WATER QUALITY

JAN 20 2007

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.