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North Carolina Department of Environment, Health, and Natural Resources
Division of Environmental Health, Public Water Supply Section

SOURCE INFORMATION
GROUND WATER

Date Form Completed: 10/28/04

PWS: 01-95-112

Owner Assigned Source Code: 9BT

Well Name (If purchase, name of system): Well 10

Code: G (G=Ground, W=Purchase/G, Y=G w/direct influence, Z=W w/direct influence)

If purchase, seller ID#:

Source Begin Date (MM - YY):

Direct Influence Date (MM - DD - YY):

Availability: P (P=Permanent, E=Emergency, S=Seasonal, I=Interim, O=Other)

Location of well within the system (If purchase, location of master meter): next to 60K tank

Latitude (N) Deg. Min Sec: 36-10-54.61

Longitude (W) Deg Min Sec: 81-44-19.87

How Determined: G (G=GPS, M=Map, S=Surveyed, D=Differential GPS)

GPS File Name: R021014C-1997

If purchase, use seller's primary source lat/long)

Vulnerable VOC's: Y / N

Assessment Date (MM - DD - YY):

ENTRY POINT INFORMATION

Owner Assigned Entry Point Code: 9AT

Entry Point Name: Well 10

Use Code: C (C=Ground/Permanent, D=Ground/non-Permanent)

Availability: P (P=Year-round, S=Seasonal, E=Emergency, I=Interim, O=Other)

Entry Point Begin Date (MM / YY):

Entry Point End Date (MM / YY):

Location: after treatment in well house

Well Site: Owned or controlled? Y (Y,N) Control Area (100' radius?) N (Y,N) If no, explain: road 40'

Sources of pollution/distance: well lot is approved as is. this street is a dead end and only serves a couple of houses, most days there is no traffic other than Carolina Water's vehicle

Surface water within 200'? N (Y/N) If yes, actual distance: If yes, bact. samples collected? (Y/N)

Adequate slope? Y (Y,N) Flooding? N (Y,N) Maintenance: good

Well House: Free of stored materials? Y (Y,N) Properly drained? Y (Y,N) Locked? Y (Y,N)

Condition of house: excellent Type of freeze protection: electric heat

Well: Diameter: 6 1/4" Type: drilled 6-29-90 Yield (gpm): 19 Properly sealed? Y (Y,N)

Properly vented? Y (Y,N) Casing Depth 21 ft (If unknown, put 'UNK') Well depth: 600' Meter available? Y (Y,N)

Concrete slab adequate? Y (Y,N) If no, explain: Size: 3'r

Size of blow-off: 2" Sample tap?: Before treatment? Y (Y,N) After Treatment? Y (Y,N)

Pumps: Capacity: GPM: unk HP: 20 Pump intake depth: unk Auxiliary Power? N (Y,N)

Type pump: Submersible Height above floor (pump/casing): / 18"

Storage at well site: Elev: Hydro: Ground:

If hydro, air volume control? (Y,N) Safety valves: (Y,N) Coded? (Y,N)

High service pumps: 1. gpm hp 2. gpm hp 3. gpm hp Auxiliary power? (Y,N)

Is water treated at this well? Y (Y,N) If yes, complete back of form.

If other wells are treated here, which ones? If treated elsewhere, where?

If purchase, retreat? (Y/N) If yes, complete back of form.

DEHNR 3803 (Revised 7/96)
Public Water Supply Section (Review 7/99)