

059

### SOURCE INFORMATION GROUND WATER

Date Form Completed

11/10/05

PWS  
01-95-162

Owner Assigned

Source Code

Well Name (If purchase, name of seller)

W04

Well 4

Code G=Ground  
W=Purchase/G  
**G** Y=G w/direct influence  
Z=W w/direct influence

If purchase, seller ID#

Source Begin Date

Direct Influence Date

MM - YY

MM - DD - YY

Availability

P=Permanent  
**P** E=Emergency I=Interim  
S=Seasonal O=Other

Location of well within the system (If purchase, location of master meter)

well next to lot 484 Margo Road

Latitude (N)

Longitude (W)

How Determined

Deg. Min Sec

Deg. Min Sec

G=GPS  
**G** M=Map  
S=Surveyed  
D=Differential GPS

GPS File Name S031914A-1998

36-12-41.75

81-37-33.49

MM - DD - YY

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

Vulnerable VOC's  Y  
 N

Assessment Date

### ENTRY POINT INFORMATION

Owner Assigned

Entry Point Code

Entry Point Name

E04

Well 4

Use Code

Availability

Entry Point Begin Date

Entry Point End Date

**C** C=Ground/Permanent  
D=Ground/non-Permanent

**P** P=Year-round S=Seasonal  
E=Emergency I=Interim O=Other

MM / YY

MM / YY

Location: after treatment in well house - need a tap for sample collection

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

Sources of pollution/distance:

Surface water within 200'? **N** <sup>Y</sup>/<sub>N</sub> If yes, actual distance  If yes, bact. samples collected?  (Y,N)

Adequate slope? **Y** (Y,N) Flooding? **N** (Y,N) Maintenance: **fair**

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

Condition of house: **good** Type of freeze protection: **elec. heater**

Well: Diameter: **6 1/4"** Type: **drilled** **3-3-87** Yield (gpm): **7.5** Properly sealed? **Y** (Y,N)

Properly vented? **Y** (Y,N) Casing Depth **54** ft (If unknown, put 'UNK') Well depth: **484'** Meter available? **Y** (Y,N)

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

Size of blow-off: **1.5"** Sample tap?: Before treatment? **Y** (Y,N) After Treatment? **N** (Y,N)

Pumps: Capacity: GPM: **9** HP: **2** Pump intake depth: **unk** Auxiliary Power? **N** (Y,N)

Type pump: **submersible** Height above floor (pump/casing):  / **6"**

Storage at well site: Elev:  Hydro: **3,500** Ground:

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

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

Is water treated? **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.