

074

SOURCE INFORMATION GROUND WATER

Date Form Completed

02/17/05

PWS
01-95-419

Owner Assigned

Source Code

Well Name (If purchase, name of seller)

W01

Well 2

Code

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

G

If purchase, seller ID#

Source Begin Date

Direct Influence Date

MM - YY

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 tennis court behind school

Latitude (N)

Longitude (W)

How Determined

Deg. Min Sec

Deg. Min Sec

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

36-16-39.18

81-38-43.77

G

GPS File Name U082513C-2000

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

MM - DD - YY

Vulnerable VOC's

Y
 N

Assessment Date

ENTRY POINT INFORMATION

Owner Assigned

Entry Point Code

Entry Point Name

E01

1st floor work room

Use Code

Availability

Entry Point Begin Date

Entry Point End Date

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

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

MM / YY

MM / YY

Location: in work room

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** (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: **heated**

Well: Diameter: **6 1/4** Type: **drilled** **5-13-92** Yield (gpm): **50** Properly sealed? **Y** (Y,N)

Properly vented? **Y** (Y,N) Casing Depth **63** ft (If unknown, put 'UNK') Well depth: **305'** Meter available? **Y** (Y,N)

Concrete slab adequate? **Y** (Y,N) If no, explain: _____ Size: **6'r**

Size of blow-off: **1 1/2"** Sample tap?: Before treatment? **Y** (Y,N) After Treatment? **Y** (Y,N)

Pumps: Capacity: GPM: **42** HP: **5** Pump intake depth: **275'** Auxiliary Power? **N** (Y,N)

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

Storage at well site: Elev: _____ Hydro: **1,000** Ground: **6,000**

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

High service pumps: 1. **42** gpm **5.0** hp 2. **42** gpm **5.0** 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.