

088

SOURCE INFORMATION
GROUND WATER

Date Form Completed

01/28/03

PWS ID
01-95-447

Assigned

Source Code **W01** Well Name **well #1**

Code **G** Source Begin Date **MM / YY** Availability **P**
G = Ground P = Permanent
Y = G w/direct influence E = Emergency I = Interim
(GWUDI) S = Seasonal O = Other

Location of well within the system
up the road behind hotel 300ft

Latitude (N) **36-09-11.35** Longitude (W) **81-39-23.90** How Determined **D** GPS File Name: **U090816B(2000)**
Deg. Min Sec Deg. Min Sec G=GPS
M=Map
S=Surveyed
D=Differential GPS

ENTRY POINT INFORMATION System Monitoring? **Y** (Y/N)

Assigned
Entry Point Code **E01** Entry Point Name **in the office**

Use Code **C** Availability **P** Entry Point Begin Date **MM / YY** Entry Point End Date **MM / YY**
C=Ground/Permanent P=Permanent S=Seasonal
E=Emergency I=Interim O=Other
(1st Sample is Due)

Location: **office sink**

Well Site: Owned or controlled? **Y** (Y/N) Control Area (100' radius?) **N** (Y/N) If no, explain: **only 10ft owned**
Sources of pollution/distance: **road 10ft**

Surface water within 200'? **Y** (Y/N) If yes, actual distance **120** If yes, bact. samples collected? **Y** (Y/N)
Adequate slope? **Y** (Y/N) Flooding? **N** (Y/N) Site maintained? **Y** (Y/N)
Well House: Properly drained? **Y** (Y,N) Locked? **N** (Y,N) Free of stored material? **Y** (Y/N)
Condition of house: **ok building** Type of freeze protection: **insulation**

Well: Diameter: **6 1/4** Type: **DRILLED** (Example: Drilled) Yield (gpm) **unk** Properly sealed? **Y** (Y,N)
Properly vented? **Y** (Y,N) Casing Depth **unk** ft. (If unknown, put "unk")
Screened interval(s): Drilling Contractor: **unk** Date Completed: **1/1/67**

Concrete slab >= 3 ft. radius? **Y** (Y/N) If no, explain: Concrete slab cracked? **N** (Y,N)
Total depth (ft.) **unk** Open interval: Sample tap?: Before treatment? - (Y/N) After treatment? - (Y/N)

Pumps: Capacity: GPM: **unk** HP: **unk** Height above floor (pump/casing): / **18"**

Storage: Elevated: (gallons) Hydro / bladder: **0,119** (gallons) Ground: (gallons)
If hydro, pressure relief valves? (Y/N) Coded? (Y,N) Inspector tag? (Y/N)

TREATMENT INFORMATION

Is water treated? **N** (Y/N)
If other wells are treated here, which ones? If treated elsewhere, where?

DISINFECTION: (Hypochlorination - post (D4210)): (Y/N)
Chlorinator Make: Condition? Capacity:

Other type of disinfection:
Softening: (Ion Exchange (S4600)): (Y/N)

Other treatment:
Comments: