

104

### SOURCE INFORMATION GROUND WATER

Date Form Completed

03/31/05

PWS ID  
01-95-488

Assigned

Source Code

Well Name

W01

WELL #1

Code

Source Begin Date

Availability

G = Ground  
Y = G w/direct influence (GWUDI)

G

MM / YY

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

P

Location of well within the system

flower bed by church sign between 2 big trees

Latitude (N)

Longitude (W)

How Determined

Deg. Min Sec

Deg. Min Sec

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

36-16-41.78

81-46-52.48

G

GPS File Name: A012916A(2001)

### ENTRY POINT INFORMATION

System Monitoring? Y (Y/N)

Assigned

Entry Point Code

Entry Point Name

E01

kitchen sink

Use Code

Availability

Entry Point Begin Date

Entry Point End Date

C = Ground/Permanent

C

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

P

MM / YY

MM / YY

(1st Sample is Due)

Location: kitchen sink in fellowship hall

Well Site: Owned or controlled? Y (Y/N) Control Area (100' radius)? N (Y/N) If no, explain: road 15ft

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) 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: good tile/lid Type of freeze protection: INSULATION

Well: Diameter: 6 1/4 Type: DRILLED (Example: Drilled) Yield (gpm) 4 Properly sealed? Y (Y,N)

Properly vented? Y (Y,N) Casing Depth 22 ft. (If unknown, put "unk")

Screened interval(s): \_\_\_\_\_ Drilling Contractor: Dewey Wright Reg. #266 Date Completed: 11/14/88

Concrete slab >= 3 ft. radius? N (Y/N) If no, explain: not large enough Concrete slab cracked? N (Y,N)

Total depth (ft.) 184 Open interval: \_\_\_\_\_ Sample tap?: Before treatment? - (Y/N) After treatment? - (Y/N)

Pumps: Capacity: GPM: UNK HP: UNK Height above floor (pump/casing): \_\_\_\_\_ / \_\_\_\_\_ 2

Storage: Elevated: \_\_\_\_\_ (gallons) Hydro / bladder: 0,020 (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: \_\_\_\_\_