

110

SOURCE INFORMATION GROUND WATER

Date Form Completed

07/01/02

PWS
01-95-501

Owner Assigned

Source Code Well Name (If purchase, name of system)

31J

Well #1

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

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

S

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

Camp site area west of Blue Ridge Parkway

Latitude (N) Longitude (W) How Determined

Deg. Min Sec Deg. Min Sec

36°08'24.15"

81°44'13.98"

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

GPS File Name C061318A

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

Vulnerable VOC's Y N

Assessment Date

MM - DD - YY

ENTRY POINT INFORMATION

Use Code

Availability

Entry Point Begin Date

MM - DD - YY

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

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

S

Owner Assigned

Entry Point Code

Entry Point Name

31K

Well #1 - wellhouse

Location: Camp site area west of parkway

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

Sources of pollution/distance: None visible

Surface water within 200'? Y N If yes, actual distance: If yes, bact. samples collected? N (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: Good Type of freeze protection: Electric heater

Well: Diameter: 6 1/4" Type: Drilled in 1979 Yield (gpm): 60 Properly sealed? Y (Y,N)

Properly vented? Y (Y,N) Casing Depth 48 ft (If unknown, put 'UNK') Well depth: 200' Meter available? Y (Y,N)

Concrete slab adequate? Y (Y,N) If no, explain: Size: 8' x 8'

Size of blow-off: 1 1/4" Sample tap?: Before treatment? Y (Y,N) After Treatment? Y (Y,N)

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

Type pump: Submersible Height above floor (pump/casing): / 20"

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.