

143

### SOURCE INFORMATION GROUND WATER

Date Form Completed

08/25/06

01-95-557  
PWS

Owner Assigned

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

W01 Well 1

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

Availability

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

If purchase, seller ID# Source Begin Date Direct Influence Date  
MM - YY MM - DD - YY

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

in the middle of plant buildings

Latitude (N) Longitude (W) How Determined

Deg. Min Sec

Deg. Min Sec

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

36-15-02.52

81-39-00.92

GPS File Name U090814A-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 Office Restroom - Groundfloor

Use Code Availability Entry Point Begin Date Entry Point End Date

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

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

12-00  
MM / YY

MM / YY

Location: this restroom is across the hall from the receptionist

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

Sources of pollution/distance: plant, machinery

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

Adequate slope? Y (Y,N) Flooding? N (Y,N) Maintenance: paved industrial

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

Condition of house: fair Type of freeze protection: insulated

Well: Diameter: 6 1/4" Type: drilled 7-29-86 Yield (gpm): 22 Properly sealed? Y (Y,N)

Properly vented? Y (Y,N) Casing Depth 55 ft (If unknown, put 'UNK') Well depth: 304 Meter available? N (Y,N)

Concrete slab adequate? N (Y,N) If no, explain: no slab Size: none

Size of blow-off: none Sample tap?: Before treatment? Y (Y,N) After Treatment? n/a (Y,N)

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

Type pump: submersible Height above floor (pump/casing): / 12"

Storage at well site: Elev: Hydro: Ground:

If hydro, air volume control? Y (Y,N) Safety valves: n/a (Y,N) Coded? n/a (Y,N)

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

Is water treated? N (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.