North Carolina Department of Environment, Health, and Natural Resources
Division of Environmental Health, Public Water Supply Section

155

SOURCE INFORMATION
GROUND WATER

Date Form Completed: 03/14/05

PWS: 30-95-004

Owner Assigned Source Code: S03

Well Name (If purchase, name of seller): Well #3

Code: G (G=Ground, W=Purchase/G, Y=G w/direct influence, Z=W w/direct influence)

If purchase, seller ID#

Source Begin Date (MM - YY)

Direct Influence Date (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): at entrance to S/D to right

Latitude (N) Deg. Min Sec: 36-07-51.65

Longitude (W) Deg Min Sec: 81-42-56.32

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

How Determined: G (G=GPS, M=Map, S=Surveyed, D=Differential GPS)

GPS File Name: A070814A-2002

Vulnerable VOC's: Y / N

Assessment Date (MM - DD - YY)

ENTRY POINT INFORMATION

Owner Assigned Entry Point Code: E03

Entry Point Name: Well #3

Use Code: C (C=Ground/Permanent, D=Ground/non-Permanent)

Availability: P (P=Year-round, S=Seasonal, E=Emergency, I=Interim, O=Other)

Entry Point Begin Date (MM / YY): 08/02

Entry Point End Date (MM / YY):

Location: first tap after treatment

Well Site: Owned or controlled? Y (Y,N) Control Area (100' radius?) N (Y,N) If no, explain: 20' to Hwy221

Sources of pollution/distance: also 20' to Yohonolasse road

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, well house Type of freeze protection: insulated

Well: Diameter: 6 1/4" Type: drilled 1988 Yield (gpm): 20est Properly sealed? Y (Y,N)

Properly vented? Y (Y,N) Casing Depth unk ft (If unknown, put 'UNK') Well depth: 300 Meter available? N (Y,N)

Concrete slab adequate? Y (Y,N) If no, explain: ____ Size: 3'r

Size of blow-off: 1.5" Sample tap?: Before treatment? Y (Y,N) After Treatment? Y (Y,N)

Pumps: Capacity: GPM: unk HP: 1 1/2 Pump intake depth: 220 Auxiliary Power? N (Y,N)

Type pump: submersible Height above floor (pump/casing): / 2"

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? 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.