

157

SOURCE INFORMATION GROUND WATER

Date Form Completed

03/22/05

PWS
30-95-007

Owner Assigned

Source Code

Well Name (If purchase, name of seller)

S01

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

P

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

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

SW corner of 520 High Peak Drive (in rock well house)

Latitude (N)

Longitude (W)

How Determined

Deg. Min Sec

Deg. Min Sec

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

36-09-32.855

81-36-36.716

D

GPS File Name U032214B-2005

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

Well House Tap

Use Code

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

C

Availability

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

P

Entry Point Begin Date

07/03

MM / YY

Entry Point End Date

MM / YY

Location: tap located after storage

Well Site: Owned or controlled?

N

(Y,N)

Control Area (100' radius?)

N

(Y,N)

If no, explain: no well lot

Sources of pollution/distance:

septic field in front of 520 High Peak Dr. 150 feet away

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? N

(Y,N)

Condition of house: good

Type of freeze protection: heater, insulation

Well: Diameter: 5"

5"

Type: drilled

1969

Yield (gpm): 10

10

Properly sealed? Y

(Y,N)

Properly vented? Y

(Y,N)

Casing Depth unk

(If unknown, put 'UNK')

Well depth: unk

Meter available? N

(Y,N)

Concrete slab adequate? N

(Y,N)

If no, explain: no slab

Size:

Size of blow-off: none

none

Sample tap?: Before treatment? Y

(Y,N)

After Treatment? n/a

(Y,N)

Pumps: Capacity: GPM: 25

25

HP: 3

3

Pump intake depth: unk

unk

Auxiliary Power? N

(Y,N)

Type pump: submersible

Height above floor (pump/casing): / 6"

6"

Storage at well site: Elev:

Hydro: 50

50

Ground:

If hydro, air volume control? (Y,N)

Safety valves: (Y,N)

Coded? (Y,N)

High service pumps: 1. gpm hp

gpm

hp

2. gpm hp

gpm

hp

3. gpm hp

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)

(Y/N)

If yes, complete back of form.