RESIDENTIAL WELL CONSTRUCTION RECORD

North Carolina Department of Environment and Natural Resources - Division of Water Quality

WS

322291

060707

WELL CONTRACTOR CERTIFICATION # 2791

1. WELL CONTRACTOR:

ALBERT SLATE
Well Contractor (Individual Name)

DEWEY WRIGHT WELL & PUMP CO., INC.
Well Contractor Company Name

STREET ADDRESS P. O. BOX 308

BOONE | NC | 28607
City or Town | State | Zip Code

(828) - 264-2651
Area code - Phone number

2. WELL INFORMATION:

SITE WELL ID #(if applicable)

STATE WELL PERMIT #(if applicable)

DWQ or OTHER PERMIT #(if applicable)

WELL USE (Check Applicable Box): Residential Water Supply ☒

DATE DRILLED 12/28/2005

TIME COMPLETED _____ AM ☐ PM ☒

3. WELL LOCATION:

CITY: BOONE COUNTY WATAUGA

BEN MILLER RD. OFF 421
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:
☐ Slope ☐ Valley ☐ Flat ☐ Ridge ☐ Other
(check appropriate box)

LATITUDE 3 36.20467
LONGITUDE 081.714060

May be in degrees, minutes, seconds or in a decimal format

Latitude/longitude source: ☒ GPS ☐ Topographic map

(location of well must be shown on a USGS topo map and attached to this form if not using GPS)

5. WELL DETAILS:

a. **TOTAL DEPTH:** 400

b. **DOES WELL REPLACE EXISTING WELL?** YES ☐ NO ☒

c. **WATER LEVEL** Below Top of Casing: 80 FT.
(Use "+" if Above Top of Casing)

d. **TOP OF CASING IS** 1 FT. Above Land Surface*
* Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118

e. **YIELD (gpm):** 6 **METHOD OF TEST** Air

f. **DISINFECTION: Type** HTH **Amount** 69

g. **WATER ZONES** (depth):

From 95 To 97 From 310 To 311
From ____ To ____ From ____ To ____
From ____ To ____ From ____ To ____

6. CASING:

	Depth		Diameter	Thickness/ Weight	Material
From 0	To 69	Ft.	6 1/8	350	PVC
From 0	To 0	Ft.			
From ____	To ____	Ft.			

7. GROUT:

	Depth		Material	Method
From 0	To 20	Ft.	Cement	Gravity Flow
From ____	To ____	Ft.		
From ____	To ____	Ft.		

8. SCREEN:

	Depth		Diameter	Slot Size	Material
From ____	To ____	Ft.	in.	in.	
From ____	To ____	Ft.	in.	in.	
From ____	To ____	Ft.	in.	in.	

9. SAND/GRAVEL PACK:

	Depth		Size	Material
From ____	To ____	Ft.		
From ____	To ____	Ft.		
From ____	To ____	Ft.		

10. DRILLING LOG

From	To	Formation Description
0	65	DIRT SAND
65	95	QUARTZ GRANITE
95	97	CREVICE
97	310	QUARTZ GRANITE
310	311	CREVICE
311	400	QUARTZ GRANITE

11. REMARKS:

2 GPM 95 - 97 4 GPM 310 - 311
0 GPM - 0 GPM -
0 GPM - 0 GPM -

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

Albert Slate — SIGNATURE OF CERTIFIED WELL CONTRACTOR
1-19-06 — DATE

ALBERT SLATE
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt., 1617 Mail Service Center - Raleigh, NC 27699-1617 Phone No. (919) 733-7015 ext 568.

Form GW-1a
Rev. 7/05