



# RESIDENTIAL WELL CONSTRUCTION RECORD

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

330808

WELL CONTRACTOR CERTIFICATION # 2780

060333

### 1. WELL CONTRACTOR:

**KEITH PRESNELL**

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 - 284-2851 )

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  X

DATE DRILLED 7/13/2006

TIME COMPLETED 8:00 AM  PM  X

### 3. WELL LOCATION:

CITY: **BOONE** COUNTY: **WATAUGA**

**LOT #7 CHICORY OFF RIVERWOOD OFF WAT R**

(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

### TOPOGRAPHIC / LAND SETTING:

Slope  Valley  Flat  Ridge  Other  
(check appropriate box)

LATITUDE 3 36.13503

LONGITUDE 081.47761

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  X

c. WATER LEVEL Below Top of Casing: 40 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): 15 METHOD OF TEST Air

f. DISINFECTION: Type HTH Amount 72

g. WATER ZONES (depth):

From 200 To 210 From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

### 6. CASING:

Depth	Diameter	Weight	Material
From <u>0</u> To <u>28</u> Ft.	<u>6 1/8</u>	<u>350</u>	<u>PVC</u>
From <u>0</u> To <u>0</u> Ft.			
From _____ To _____ Ft.			

### 7. GROUT:

Depth	Material	Method
From <u>0</u> To <u>20</u> Ft.	<u>Cement</u>	<u>Gravity Flow</u>
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
<u>0</u>	<u>20</u>	<u>DIRT</u>
<u>20</u>	<u>100</u>	<u>GRANITE LITTLE SHA</u>
<u>100</u>	<u>200</u>	<u>GRANITE</u>
<u>200</u>	<u>210</u>	<u>SHALE</u>
<u>210</u>	<u>280</u>	<u>GRAY GRANITE</u>
<u>280</u>	<u>320</u>	<u>GRANITE</u>
<u>320</u>	<u>400</u>	<u>GRANITE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

### 11. REMARKS:

15 GPM 200 - 210 0 GPM -  
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.

Keith C Presnell 8-10-06  
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

**KEITH PRESNELL**  
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