



# RESIDENTIAL WELL CONSTRUCTION RECORD

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

334758

080571

WELL CONTRACTOR CERTIFICATION # 2878

### 1. WELL CONTRACTOR:

**STEVE PRICE**  
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  X  
DATE DRILLED 9/29/2006  
TIME COMPLETED 4:00 AM  PM  X

### 3. WELL LOCATION:

CITY: TODD COUNTY: WATAUGA  
HWY 194 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 38.17152  
LONGITUDE 081.38994

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: 405  
b. DOES WELL REPLACE EXISTING WELL? YES  NO  X  
c. WATER LEVEL Below Top of Casing: 30 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): 30 METHOD OF TEST Air

### f. DISINFECTION: Type HTH Amount 74

g. WATER ZONES (depth):  
From 327 To 328 From 340 To 350  
From 388 To 389 From \_\_\_\_\_ To \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

### 6. CASING:

Depth	Diameter	Weight	Material
From <u>0</u> To <u>41</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>35</u>	<u>DIRT</u>
<u>35</u>	<u>327</u>	<u>GRANITE</u>
<u>327</u>	<u>328</u>	<u>QUARTZ</u>
<u>328</u>	<u>349</u>	<u>GRANITE</u>
<u>349</u>	<u>350</u>	<u>QUARTZ</u>
<u>350</u>	<u>388</u>	<u>GRANITE</u>
<u>388</u>	<u>389</u>	<u>QUARTZ</u>
<u>389</u>	<u>405</u>	<u>GRANITE RECEIVED</u>
		<u>DIV. OF WATER QUALITY</u>
		<u>NOV 16 2006</u>

### 11. REMARKS:

1 GPM 327 - 328 1 GPM 349 - 350  
28 GPM 388 - 389 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.

Steve Price 11-16-06  
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE  
**STEVE PRICE**  
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