



RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION #

2780

060695

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**) - **284-2651**

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 **11/17/2006**

TIME COMPLETED **3:00** AM PM X

3. WELL LOCATION:

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

PEORIA RD. OFF GUY FORD RD. OFF 321 OFF 4

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

TOPOGRAPHIC / LAND SETTING:

Slope Valley Flat Ridge Other
(check appropriate box)

LATITUDE **3** **36 17 048**

LONGITUDE **081 53 867**

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)

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

5. WELL DETAILS:

a. TOTAL DEPTH: **445**

b. DOES WELL REPLACE EXISTING WELL? YES NO X

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): **8** METHOD OF TEST **Air**

f. DISINFECTION: Type **HTH** Amount **73**

g. WATER ZONES (depth):

From **350** To **357** From _____ To _____

From _____ To _____ From _____ To _____

From _____ To _____ From _____ To _____

6. CASING:

Thickness/

Depth Diameter Weight Material

From **0** To **100** Ft. **8 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 **92** **DIRT**

92 **120** **RED GRANITE**

120 **200** **GRAY GRANITE**

200 **300** **GRAY GRANITE**

300 **350** **GRAY GRANITE**

350 **357** **WHITE LIMESTONE**

357 **445** **GRANITE GRAY**

RECEIVED
DIV. OF WATER QUALITY
DEC 14 2006

11. REMARKS:

8 GPM 350 - 357 0 GPM

0 GPM - 0 GPM

0 GPM - 0 GPM

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

576566