



RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 2780

080687

0
3
3
5
9
7
0

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**) - **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 **11/10/2008**

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

3. WELL LOCATION:

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

LAUREL RIDGE WELL OFF BAIRDS CREEK OFF

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

TOPOGRAPHIC / LAND SETTING:

Slope Valley Flat Ridge Other
(check appropriate box)

LATITUDE 3 **38.12948**

LONGITUDE **081.44350**

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: **20** 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): **50** METHOD OF TEST **Air**

f. DISINFECTION: Type **HTH** Amount **70**

g. WATER ZONES (depth):

From **350** To **380** From _____ To _____

From _____ To _____ From _____ To _____

From _____ To _____ From _____ To _____

6. CASING: Thickness/

Depth Diameter Weight Material
From **0** To **4** 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	35	DIRT
35	50	BLUE GRANITE
50	100	BLUE GRANITE
100	120	WHITE LIMESTONE
120	200	BLUE GRANITE
200	300	BLUE GRANITE
300	350	BLUE GRANITE
350	360	WHITE QUARTZ
360	405	BLUE GRANITE

11. REMARKS:

50 GPM 350 - 380 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 Presnell 12-6-08
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

KEITH PRESNELL

PRINTED NAME OF PERSON CONSTRUCTING THE WELL

RECEIVED
DIV. OF WATER QUALITY

DEC 14 2008