



# RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 2681

060743

335997

### 1. WELL CONTRACTOR:

**STEVE PETTY**

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 **11/22/2006**

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

### 3. WELL LOCATION:

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

**RIDGE RD. OFF N. PINE RUN 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 14.934**

LONGITUDE **081 35.452**

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: **505**

b. DOES WELL REPLACE EXISTING WELL? YES  NO  X

c. WATER LEVEL Below Top of Casing: **200** 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): **60** METHOD OF TEST **Air**

f. DISINFECTION: Type **HTH** Amount **64**

g. WATER ZONES (depth):

From **420** To **422** From **480** To **483**

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

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

### 6. CASING:

From	To	Depth	Diameter	Weight	Material
0	80	80 Ft.	6 1/8	350	PVC
0	0	0 Ft.			

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_

### 7. GROUT:

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

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_

### 8. SCREEN:

From	To	Depth	Diameter	Slot Size	Material

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_ in. \_\_\_\_\_ in.

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_ in. \_\_\_\_\_ in.

### 9. SAND/GRAVEL PACK:

From	To	Depth	Size	Material

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Ft. \_\_\_\_\_

### 10. DRILLING LOG

From	To	Formation Description
0	50	DIRT
50	420	GRANITE
420	422	SHALE
422	480	GRANITE
480	483	SHALE
483	505	GRANITE

RECEIVED  
DIV. OF WATER QUALITY  
DEC 14 2006

### 11. REMARKS:

**2 GPM 420 - 422 58 GPM 480 - 483**

**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.

*Steve Petty* **12-7-06**  
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

**STEVE PETTY**  
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.