337295

RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 2791

060607-2

1. WELL CONTRACTOR:

ALBERT SLATE
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 ☒

DATE DRILLED 11/30/2006

TIME COMPLETED 6:30 AM ☐ PM ☒

3. WELL LOCATION:

CITY: BOONE COUNTY WATAUGA

BENJAMIN RD. OFF ROBY GREENE RD. OFF OL
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:
☐ Slope ☐ Valley ☐ Flat ☐ Ridge ☐ Other _____
(check appropriate box)

LATITUDE 3 ___ ___
LONGITUDE ___ ___ ___

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:** 900

b. **DOES WELL REPLACE EXISTING WELL?** YES ☐ NO ☒

c. **WATER LEVEL** Below Top of Casing: 25 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):** 0.88 **METHOD OF TEST** Air

f. **DISINFECTION: Type** HTH **Amount** 156

g. **WATER ZONES** (depth):
From UNKNOWN To ____ From ____ To ____
From ____ To ____ From ____ To ____
From ____ To ____ From ____ To ____

6. CASING:

	Depth		Diameter	Thickness/ Weight	Material
From 0	To 20	Ft.	6 1/4	.188	GALV
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	12	DIRT
12	900	GRANITE QUARTZ

RECEIVED
DIV. OF WATER QUALITY
JAN 29 2007

11. REMARKS:
0.88 GPM UNKNOWN - 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.

Albert L. Slate 1-25-07
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

ALBERT SLATE
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