



# RESIDENTIAL WELL CONSTRUCTION RECORD

341542

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

WELL CONTRACTOR CERTIFICATION # 2878

070128

### 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** ) - **284-2851**  
Area code - Phone number

### 2. WELL INFORMATION:

SITE WELL ID #(if applicable) \_\_\_\_\_

STATE WELL PERMIT #(if applicable) **W95-0101**

DWQ or OTHER PERMIT #(if applicable) \_\_\_\_\_

WELL USE (Check Applicable Box): Residential Water Supply

DATE DRILLED **4/23/2007**

TIME COMPLETED **05:00** AM  PM

### 3. WELL LOCATION:

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

**LOT # 12 BEAR CUBS OFF ROBY GREENE RD.**

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

### TOPOGRAPHIC / LAND SETTING:

Slope  Valley  Flat  Ridge  Other  
(check appropriate box)

LATITUDE 3 **36.14716**

LONGITUDE \_\_\_\_\_ **081.37675**

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: **1105**

b. DOES WELL REPLACE EXISTING WELL? YES  NO

c. WATER LEVEL Below Top of Casing: **300** 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): **1** METHOD OF TEST **Air**

f. DISINFECTION: Type **HTH** Amount **151**

g. WATER ZONES (depth):

From **000** To **000** From \_\_\_\_\_ To \_\_\_\_\_

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

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

### 6. CASING:

Depth	Diameter	Weight	Material
From <b>0</b> To <b>07</b> Ft.	<b>8 1/8</b>	<b>350</b>	<b>PVC</b>
From <b>0</b> To <b>0</b> Ft.			
From _____ To _____ Ft.			

### 7. GROUT:

Depth	Material	Method
From <b>0</b> To <b>20</b> Ft.	<b>Cement</b>	<b>Gravity Flow</b>
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
<b>0</b>	<b>01</b>	<b>DIRT</b>
<b>01</b>	<b>008</b>	<b>GRANITE</b>
<b>008</b>	<b>000</b>	<b>QUARTZ GRANITE</b>
<b>000</b>	<b>1105</b>	<b>GRANITE</b>

### 11. REMARKS:

**1 GPM 008 - 000 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.

*Steve Price* **5-4-07**  
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

**STEVE PRICE**  
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

RECEIVED  
N.C. Dept of ENR  
JUL 02 2007  
Winston-Salem  
Regional Office

RECEIVED  
DIV. OF WATER QUALITY  
MAY 18 2007