WELL CONSTRUCTION RECORD This form can be used for single or multiple wells	F	For Internal	Use Of	NLY:																		
1. Well Contractor Information:																						
Jonathan Kamionka		14. WATE	R ZON	IES			194-19			k Tillian												
Well Contractor Name		FROM ft.	то	ft.	DESCRIPT	ION																
3465-A	-	ft.		ft.																		
NC Well Contractor Certification Number					multi-cased	vells) (RIINE	P (if ann	licable)													
Bill's Well Drilling Co.		FROM	TO		DIAMETE	R	THICK		MATE	RIAL												
Company Name		ft.		ft.	UBING (geo	in.																
2. Well Construction Permit #: 2307-0021		FROM	то	_	DIAMETE	R	THICK!		MATE	RIAL												
List all applicable well permits (i.e. County, State, Variance, Injection, etc.)		+1 ft.	169	ft.	6-1/4	in.	SDF	R21		PVC												
3. Well Use (check well use):	<u> </u>	169 ft.	200	ft.	6-1/4	in.	SDF	₹17		PVC												
Water Supply Well:		FROM	ТО		DIAMETER	SLOT	SIZE	THICK	NESS	MATERIAL												
□Agricultural □Municipal/Public		ft.		ft.	in.																	
□Geothermal (Heating/Cooling Supply) □Residential Water Supply		ft.		ft.	in.																	
□Industrial/Commercial □Residential Water Supply		18. GROUT FROM TO MATERIAL EMPLACEMENT METHOD & AMOUNT						OD & AMOUNT														
Olrrigation Non-Water Supply Well:	[c) ft.	30	ft.	bentonit	е	pump	ped														
□Monitoring □Recovery		ft.	8	ft.																		
Injection Well:		ft.		ft.																		
□Aquifer Recharge □Groundwater Remediation		19. SANDA FROM	GRAV	EL PACI	(if applical MATERIA			EMBL AC	EMENIT	METHOD												
□Aquifer Storage and Recovery □Salinity Barrier		ft.	_	ft.	MATERIA		_	EMPLAC	ENIENI	METHOD												
□Aquifer Test □Stormwater Drainage		ft.		ft.																		
□Experimental Technology □Subsidence Control □Geothermal (Closed Loop) □Tracer		20. DRILI	ING L	OG (atta	ich additional sheets if necessary)																	
□Geothermal (Heating/Cooling Return) □Other (explain under #21		FROM ft.	то 5	ft.	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)																	
		5 ft.		ft.	sand orange clay																	
4. Date Well(s) Completed: 6-4-24 Well ID#	-	10 ft.	1.7	ft.				Sand	iy													
5a. Well Location:	F	39 ft.	_	ft.			2007	-														
Clayton Homes	0.5	Gray clay																				
Facility/Owner Name Facility ID# (if applicable	. –	Saliu																				
340 Pine Oak, Cameron, NC 28326	1	100 Red & Gray Mixed Clay																				
Physical Address, City, and Zip	<u></u>	180 II. 195 II.																				
Harnett		195-400 Gray Rock																				
County Parcel Identification No. ((PIN)																					
5b. Latitude and Longitude in degrees/minutes/seconds or decimal de (if well field, one lat/long is sufficient)	egrees: 2	2. Certifi	cation:	:																		
(if well field, one lablong is sufficient)		1	/	^	//	/_		2	0.4	2.4												
N	W		Carrida	4 W-11 C					6-4-	24												
6. Is (are) the well(s): ☑Permanent or □Temporary		Signature of Certified Well Contractor Date By signing this form, I hereby certify that the well(s) was (were) constructed in accordance																				
7 I Abia and the second discount of the second of the seco	w	ith 15A NC	AC 020	.0100 or	15A NCAC	02C .02	200 Well	(were) co	onstructe tion Star	ed in accordance idards and that a												
7. Is this a repair to an existing well: Yes or No If this is a repair, fill out known well construction information and explain the nature of the			copy of this record has been provided to the well owner.																			
repair under #21 remarks section or on the back of this form. 8. Number of wells constructed: For multiple injection or non-water supply wells ONLY with the same construction, you can submit one form.		23. Site diagram or additional well details: You may use the back of this page to provide additional well site details or well construction details. You may also attach additional pages if necessary. SUBMITTAL INSTUCTIONS																				
												9. Total well depth below land surface: 400 For multiple wells list all depths if different (example- 3@200' and 2@100')		24a. For All Wells: Submit this form within 30 days of completion of well								
												137		construction to the following:								
If water level is above casing, use "+"		Division of Water Resources, Information Processing Unit, 1617 Mail Service Center, Raleigh, NC 27699-1617																				
11. Borchole diameter: 5.75 (in.)		24b. For Injection Wells ONLY: In addition to sending the form to the address																				
12. Well construction method: Mud & air Rotary (i.e. auger, rotary, cable, direct push, etc.)		24a above, also submit a copy of this form within 30 days of completion of we construction to the following:																				
FOR WATER SUPPLY WELLS ONLY:										ol Program,												
13a. Yield (gpm) 5 Method of test: blow		1636 Mail Service Center, Raleigh, NC 27699-1636 24c. For Water Supply & Injection Wells: Also submit one copy of this form within 30 days of completion of																				
13b. Disinfection type: HTH Amount: 1 cup	vell consti	uction	to the	this form county heal	withir th dep	artment	ys of cor of the	mpletio county	n of where													
	co	onstructed																				