

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells.

I. Well Contractor Information:

Larry Williford Jr.

Well Contractor Name

2863-A

NC Well Contractor Certification Number

Williford's Well Drilling

Company Name

2. Well Construction Permit #: 16-5-40484

List all applicable well permits (i.e. County, State, Interstate, Injection, etc.)

3. Well Use (check well use):

Water Supply Well:

- Agricultural Municipal/Public
- Confined (Flowing/Outflow Supply) Residential Water Supply (single)
- Industrial/Commercial Residential Water Supply (shared)

Occupation

Non-Water Supply Well:

- Mining Veterinary
- Injection Well:
 - Aquifer Storage Groundwater Remediation
 - Aquifer Storage and Recovery Geofiber Barrier
 - Aquifer Test Groundwater Drainage
 - Geophysical Technology Subsurface Control
 - Geothermal (Closed Loop) Ureter
 - Geothermal (Flowing/Outflow Return) Other (explain under #21 Remarks)

4. Well (s) Completion: 2-1-17 Well ID#

5a. Well Location:

Johnie Stewart

Facility/Owner Name

Facility ID# (if applicable)

635 Bryan Mcclamb LN Dunn NC 28334

Physical Address, City, and Zip

Harnett

1528-56-9140 02

County

Parcel Identification No. (PIN)

5b. Latitude and Longitude in degrees/minutes/seconds or decimal degrees: (If well field, one in/long is sufficient)

35° 21.511 N 78° 34.721 W

6. Is (are) the well(s): Permanent or Temporary

7. Is this a repair to an existing well: Yes or No
If this is a repair, fill out former well construction information and explain the nature of the repair under #21 remarks section or on the back of this form.

8. Number of wells constructed: 1
For multiple injection or non-water supply wells ONLY with the same construction, you can submit one form.

9. Total well depth below land surface: 24 (ft.)
For multiple wells list all depths if different (example: 26(20') and 28(100'))

10. Static water level below top of casing: 11 (ft.)
If water level is above casing, use "-"

11. Borehole diameter: 6 (in.)

12. Well construction method: mud rotary
(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) 8 Method of test: pumping

13b. Wellhead type: HTH Access: 44 cup

For Interval Use ONLY:					
14. WATER COLUMN					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	REMARKS
21'	24'				course tan sand
15. OUTER CASING					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	REMARKS
-1'	20'	2"		SCM40	PVC
16. INNER CASING OR TUBING (specify brand and size)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	REMARKS
-2'	24'	1 1/4"		SCM40	PVC
17. GROUT					
FROM	TO	DIAMETER	SLUMP	THICKNESS	MATERIAL
21'	24'	1 1/4"	1010		SCM40 PVC
18. GROUT					
FROM	TO	MATERIAL	REPLACEMENT METHOD & AMOUNT		
0'	20'	Bentonite	pour/gravity		
19. SANDRAVEL (check if applicable)					
FROM	TO	DIAMETER	REPLACEMENT METHOD		
20'	24'	#2 Sand	pour/gravity		
20. WELL LOGS (check if applicable)					
FROM	TO	DIAMETER	REMARKS		
0'	2'		topsoil		
2'	9'		reddish sandy clay		
9'	21'		tan clay		
21'	26'		course tan sand		
21. REMARKS					
1528 093					

22. Certification: Larry Williford Jr. 2-1-17
Signature of Certified Well Contractor Date

By signing this form, I hereby certify that the well(s) was (were) constructed in accordance with 15A NCAC 82C .0100 or 15A NCAC 82C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

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 INSTRUCTIONS

24a. For All Wells: Submit this form within 30 days of completion of well construction to the following:
Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27689-1617

24b. For Injection Wells ONLY: In addition to sending the form to the address in 24a above, also submit a copy of this form within 30 days of completion of well construction to the following:
Division of Water Resources, Underground Injection Control Program,
826 Mail Service Center, Raleigh, NC 27689-826

24c. For Water Supply & Injection Wells: Also submit one copy of this form within 30 days of completion of well construction to the county health department of the county where constructed.