

RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 3104

1. WELL CONTRACTOR:	f. DISINFECTION: TypeAmount
Van Elliott	g. WATER ZONES (depth):
Well Contractor (Individual) Name	From 205 To From To
SOUTHERN WELL DRILLING	FromToTaTa
Well Contractor Company Name	FromToToTo
STREET ADDRESS 1530 Beaver Dam Road	6. CASING: Thickness/ Depth 1 Diameter Weight Material
Creedmoor NC 27522	From 1 To 150 Ft Diameter Weight Material
City or Town State Zip Code	FromToFt
(919) 603-7165	FromToFt
Area code- Phone number	7. GROUT: Depth Material Method
2. WELL INFORMATION:	From O To-20 FLPAUNTland Poured
SITE WELL ID #(if applicable) 13-5- 3/336	FromToFt
STATE WELL PERMIT#(if applicable)	FromToFL
DWQ or OTHER PERMIT #(if applicable)	8. SCREEN: Depth Diameter Slot Size Material From To Ft. in. in.
WELL USE (Check Applicable Box): Residential Water Supply	From To Ft in in.
DATE DRILLED 6-19-13	FromToFtinin
TIME COMPLETED AM PM	9. SAND/GRAVEL PACK:
3. WELL LOCATION:	Depth Size Material
CITY: Bunn Level COUNTY Harnett	FromToFL
Mc Lean Chapel Rd (Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)	FromToFt
TOPOGRAPHIC / LAND SETTING:	10. DRILLING LOG
□Slope □Valley □Flat □Ridge □Other	From To Formation Description
(check appropriate box) May be in degrees,	
LATITUDE 3 minutes, seconds or	
LONGITUDE 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)	
OWNER'S NAME Mc Lean Chapel Partners	
STREET ADDRESS 2611	
Raleigh N.C.	
City or Town State Zip Code	
, , ,	
Area code - Phone number	
E WELL BETALLO	11. REMARKS:
a. TOTAL DEPTH: 240	
b. DOES WELL REPLACE EXISTING WELL? YES NO 12	
c. WATER LEVEL Below Top of Casing: 25 FT. (Use "+" if Above Top of Casing)	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.
d. TOP OF CASING IS + FT. Above Land Surface*	Van 3//2
*Top of casing terminated at/or below land surface may require	SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE
a variance in accordance with 15A NCAC 2C .0118.	SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE
e. YIELD (gpm): 20 METHOD OF TEST AIR	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