



RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 2179

1. WELL CONTRACTOR:

Roger W. Jackson

Well Contractor (Individual) Name

Jackson Well Company

Well Contractor Company Name

STREET ADDRESS 5660 McDougald Road

Lillington, North Carolina 27546

City or Town State Zip Code

(910) 893-2372

Area code- Phone number

2. WELL INFORMATION:

SITE WELL ID #(if applicable) 11-5-27379

STATE WELL PERMIT #(if applicable)

DWG or OTHER PERMIT #(if applicable)

WELL USE (Check Applicable Box): Residential Water Supply

DATE DRILLED 8-19-11

TIME COMPLETED 3:00 AM PM

3. WELL LOCATION:

CITY: Cameron COUNTY: WAKE

132 Trent Dr J-3-A 28326

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

TOPOGRAPHIC / LAND SETTING:

Slope Valley Flat Ridge Other (check appropriate box)

LATITUDE 35 19.506

LONGITUDE 79 07.415

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)

4. WELL OWNER

OWNER'S NAME Wayne Mangum

STREET ADDRESS 132 Trent Dr

Cameron N.C. 28326

City or Town State Zip Code

(919) 258 5538

Area code- Phone number

5. WELL DETAILS:

a. TOTAL DEPTH: 600'

b. DOES WELL REPLACE EXISTING WELL? YES NO

c. WATER LEVEL Below Top of Casing: 130 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): 3 METHOD OF TEST 110

f. DISINFECTION: Type HTH Amount 32oz

g. WATER ZONES (depth):

From 421 To 424 From _____ To _____

From _____ To _____ From _____ To _____

From _____ To _____ From _____ To _____

6. CASING:

From 0 To 180 Ft. Diameter 66 Thickness/Weight 5821 Material SPC

From _____ To _____ Ft. _____ _____ _____

From _____ To _____ Ft. _____ _____ _____

7. GROUT:

From 0 To 32 Ft. Material SAND/CEMENT MORTAR Method _____

From _____ To _____ Ft. _____ _____

From _____ To _____ Ft. _____ _____

8. SCREEN:

From _____ To _____ Ft. _____ in. _____ in. Material _____

From _____ To _____ Ft. _____ in. _____ in. _____

From _____ To _____ Ft. _____ in. _____ in. _____

9. SAND/GRAVEL PACK:

From _____ To _____ Ft. Size _____ Material _____

From _____ To _____ Ft. _____ _____

From _____ To _____ Ft. _____ _____

10. DRILLING LOG

From _____ To _____

0 25

25 46

46 152

152 600

Formation Description

CLAY

SAND

CLAY

SAND

11. REMARKS:

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.

Roger W. Jackson
SIGNATURE OF CERTIFIED WELL CONTRACTOR 9-6-11 DATE

Roger W. Jackson
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt., 1817 Mall Branch Center, Raleigh, NC 27601-1000 Phone: (919) 733-2347 Fax: (919) 733-2348