

RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 3474

1. WELL CONTRACTOR:	f. DISINFECTION: Type/powel Amount And I-
Colors of Hardustin Bardoct	g. WATER ZONES (depth):
Well Contractor (Individual) Name	From
Bardants Well	FromToToTo
Well Contractor Company Name	FromToToTo
STREET ADDRESS ////8/NC Huy50	6. CASING: Thickness/
South Newton Grove 28366	From Depth Diameter Weight Material
City or Town State Zip Code	FromToFt
919-291-508	FromToFt
Area code- Phone number	7. GROUT: Depth Material Method
2. WELL INFORMATION:	From C To 21 Ft. Holeplus Gravity
SITE WELL ID #(if applicable)	From To Ft.
STATE WELL PERMIT#(if applicable)	FromToFt
DWQ or OTHER PERMIT #(if applicable)	8. SCREEN: Depth Diameter Slot Size Material
WELL USE (Check Applicable Box): Residential Water Supply	From To Ft. in. in.
DATE DRILLED 7-25-//	FromToFtininin
TIME COMPLETED 5 2/ AM PM	9. SAND/GRAVEL PACK:
3. WELL LOCATION:	Depth Size Material
CITY: Bunlevel COUNTY Harnett	From To Ft. 2
110 Books Ton	From To Ft.
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)	
TOPOGRAPHIC / LAND SETTING:	10. DRILLING LOG
□ Slope □ Valley □ Flat □ Ridge □ Other (check appropriate box)	From To Formation Description
May be in degrees,	15-18 <
LONGITUDE $\frac{3}{8}$. $\frac{310370}{1000}$ minutes, seconds or in a decimal format	18-22 Clay 1
	22-30 36-0
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 M	
OWNER'S NAME ALLOW	1
STREET ADDRESS	
City of Taylor	
City or Town State Zip Code	
Area code - Phone number	
5. WELL DETAILS:	11. REMARKS:
a. TOTAL DEPTH: SO	
b. DOES WELL REPLACE EXISTING WELL? YES A NO D	
14	I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH
c. WATER LEVEL Below Top of Casing:FT. (Use "+" if Above Top of Casing)	154 NICAC 20 MIELL CONSTRUCTION STANDARDS THE THAT A CODY OF THE
, and a second s	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*	RECORD HAS BEEN PROVIDED TO THE WELL OWNER.
*Top of casing terminated at/or below land surface may require	RECORD HAS BEEN PROVIDED TO THE WELL OWNER. SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE
	Cofafax / 9-29-11