

RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICA	TION#3474
1. WELL CONTRACTOR:	f. DISINFECTION: Type Choling Amount James
Well-Contractor (Individual) Name	g. WATER ZONES (depth): From 165 To 205 From To
Well Contractor Company Name	FromToTo
STREET ADDRESS 72 Roundald Charles	6. CASING: Thickness/
City or Town State Zip Code State Zip Code Area code- Phone number	From To Ft. Weight Material From To Ft. From To Ft.
2. WELL INFORMATION:	7. GROUT: Depth Material Method
SITE WELL ID #(if applicable)	From To Ft. portland pour and
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 in in in in in in in in.
TIME COMPLETED 10:30 AMO PMO	From To Ft in in in.
3. WELL LOCATION:	9. SAND/GRAVEL PACK: Depth Size Material
CITY: Dunn COUNTY HORNOYT	From To Ft.
3375 Mandowlark Rd Dunne (Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)	FromToFt
TOPOGRAPHIC / LAND SETTING: 2837	2
□ Slope □ Valley □ Flat □ Ridge □ Other	10. DRILLING LOG From To Formation Description
(check appropriate box) ATTUDE 2 5 18 184 May be in degrees,	D-400
LATITUDE 3 3 3 37.259 w minutes, seconds or in a decimal format	163-205 Bed fork
Latitude/longitude source: LATS 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 Sharon (95tg/do	
STREET ADDRESS 3375 Mondow ho KRY	
City or Town State Zip Code	
Area code - Phone number	
6. WELL DETAILS:	11. REMARKS:
a. TOTAL DEPTH: 204	
b. DOES WELL REPLACE EXISTING WELL? YES NO D	
c. WATER LEVEL Below Top of Casing: 100 FT. (Use '+' if Above Top of Casing)	I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 16A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROPERTY TO THE WELL COWNER.
d. TOP OF CASING ISFT. Above Land Surface* "Top of casing terminated at/or below land surface may require	11-19-08
a variance in accordance with 15A NCAC 2C .0118	SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE
e. YIELD (gpm): METHOD OF TEST	PRINTED NAME OF PERSON CONSTRUCTING THE WELL
	SI SONOTHO THE WELL