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)

STATE WELL PERMIT#(if applicable)

DWQ or OTHER PERMIT #(if applicable)

WELL USE (Check Applicable Box): Residential Water Supply ☑

DATE DRILLED 5-2-11

TIME COMPLETED 3:00 AM☐ PM☑

3. WELL LOCATION:

CITY: Christian Light F.V. COUNTY Harnett

Christian Light Rd. 7136
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

☑Slope ☐Valley ☐Flat ☐Ridge ☐ Other
(check appropriate box)

LATITUDE 35° 34.411

LONGITUDE 78° 86.444

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 Peter Ormond

STREET ADDRESS 7136 Christian Light Rd

F.V. N.C. 27526
City or Town State Zip Code

(919) 356-6129
Area code- Phone number

5. WELL DETAILS:

a. TOTAL DEPTH: 200

b. DOES WELL REPLACE EXISTING WELL? YES☐ NO☐

c. WATER LEVEL Below Top of Casing: 30 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): 8 METHOD OF TEST A/P

f. DISINFECTION: Type HTH Amount 16oz

g. WATER ZONES (depth):

From 170 To 172 From ____ To ____
From ____ To ____ From ____ To ____
From ____ To ____ From ____ To ____

6. CASING:

	Depth		Diameter	Thickness/ Weight	Material
From 0	To 27	Ft.	6"	SR 21	PVC
From ____	To ____	Ft.			
From ____	To ____	Ft.			

7. GROUT:

	Depth		Material	Method
From 0	To 20	Ft.	Sand Cement	Pouring
From ____	To ____	Ft.		
From ____	To ____	Ft.		

8. SCREEN:

	Depth		Diameter	Slot Size	Material
From ____	To ____	Ft.	in.	in.	
From ____	To ____	Ft.	in.	in.	
From ____	To ____	Ft.	in.	in.	

9. SAND/GRAVEL PACK:

	Depth		Size	Material
From ____	To ____	Ft.		
From ____	To ____	Ft.		
From ____	To ____	Ft.		

10. DRILLING LOG

From	To	Formation Description
0	14	Clay
14	200	Slate

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 5-4-11
SIGNATURE OF CERTIFIED WELL CONTRACTOR 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.,
1617 Mail Service Center, Raleigh, NC 27699-1617 Phone No. (919) 733-3715 ext 560

Form GW-1a