

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Felton Jacobs

Well Contractor Name

2765-A

NC Well Contractor Certification Number

N.W. Poole Well & Pump Co.

Company Name

2. Well Construction Permit #: 18-5-43830

List all applicable well permits (i.e. County, State, Variance, Injection, etc.)

3. Well Use (check well use):

Water Supply Well:

- Agricultural
- Geothermal (Heating/Cooling Supply)
- Industrial/Commercial
- Irrigation
- Municipal/Public
- Residential Water Supply (single)
- Residential Water Supply (shared)

Non-Water Supply Well:

- Monitoring
- Recovery

Injection Well:

- Aquifer Recharge
- Aquifer Storage and Recovery
- Aquifer Test
- Experimental Technology
- Geothermal (Closed Loop)
- Geothermal (Heating/Cooling Return)
- Groundwater Remediation
- Salinity Barrier
- Stormwater Drainage
- Subsidence Control
- Tracer
- Other (explain under #21 Remarks)

4. Date Well(s) Completed: 4-25-19 Well ID#

5a. Well Location:

Lori Carlyle

Facility/Owner Name

Facility ID# (if applicable)

2686 Wade Stephenson Rd

Physical Address, City, and Zip

Harnett

County

Parcel Identification No. (PIN)

5b. Latitude and Longitude in degrees/minutes/seconds or decimal degrees: (if well field, one lat/long is sufficient)

35.574838 N -78.896772 W

6. Is (are) the well(s): Permanent or Temporary

7. Is this a repair to an existing well: Yes or No

If this is a repair, fill out known well construction information and explain the nature of the repair under #21 remarks section or on the back of this form.

8. Number of wells constructed: 1

For multiple injection or non-water supply wells ONLY with the same construction, you can submit one form.

9. Total well depth below land surface: 304 (ft)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 6 (ft)

If water level is above casing, use "+"

11. Borehole diameter: 6 (in.)

Rotary

12. Well construction method:

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) 6 Method of test: Blow

13b. Disinfection type: HTH Amount: 1 lb.

For Internal Use ONLY:

14. WATER ZONES:

FROM	TO	DESCRIPTION
ft.	80 ft.	2
ft.	26 ft.	4

15. OUTER CASING (for multi-cased wells) OR LINER (if applicable):

FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	64 ft.	6 in.	.188	Galvanized

16. INNER CASING OR TUBING (geothermal closed-loop):

FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	ft.	in.		
ft.	ft.	in.		

17. SCREEN:

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			

18. GROUT:

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	20 ft.	Hole Plug	Pour
ft.	ft.		
ft.	ft.		

19. SAND/GRAVEL PACK (if applicable):

FROM	TO	MATERIAL	EMPLACEMENT METHOD
ft.	ft.		
ft.	ft.		

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	3 ft.	Top soil
3 ft.	20 ft.	Clay
20 ft.	50 ft.	Sand
50 ft.	345 ft.	Slate
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS:

Used hardened steel drive shoe

22. Certification:

Felton Jacobs 4-25-19
Signature of Certified Well Contractor Date

By signing this form, I hereby certify that the well(s) was (were) constructed in accordance with 15A NCAC 02C .0100 or 15A NCAC 02C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

23. Site diagram or additional well details:

You may use the back of this page to provide additional well site details or well construction details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

24a. For All Wells: Submit this form within 30 days of completion of well construction to the following:

Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

24b. For Injection Wells ONLY: In addition to sending the form to the address in 24a above, also submit a copy of this form within 30 days of completion of well construction to the following:

Division of Water Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

Also submit one copy of this form within 30 days of completion of well construction to the county health department of the county where constructed.