



# WELL ABANDONMENT RECORD

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

WELL CONTRACTOR CERTIFICATION # 2457 A

### 1. WELL CONTRACTOR:

Farrell Brown  
Well Contractor (Individual) Name

Brown Brothers Well Drilling  
Well Contractor Company Name

STREET ADDRESS 2075 Grantville Ln  
Asheboro NC 27205  
City or Town State Zip Code

(336)-465-1240  
Area code - Phone number

### 2. WELL INFORMATION:

SITE WELL ID # (if applicable) \_\_\_\_\_

STATE WELL PERMIT # (if applicable) \_\_\_\_\_

COUNTY WELL PERMIT # (if applicable) 2305-0001

DWQ or OTHER PERMIT # (if applicable) \_\_\_\_\_

WELL USE (Circle applicable use):  Monitoring  Residential  
 Municipal/Public  Industrial/Commercial  Agricultural  
 Recovery  Injection  Irrigation  
Other (list use) \_\_\_\_\_

### 3. WELL LOCATION:

COUNTY Hartnett QUADRANGLE NAME \_\_\_\_\_

NEAREST TOWN: ~~Asheboro~~ Angier  
1556 Hwy 210 Angier NC  
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

#### TOPOGRAPHIC / LAND SETTING:

Slope Valley  Flat  Ridge Other \_\_\_\_\_  
(Circle appropriate setting)

LATITUDE N35° 29.623

LONGITUDE W 78° 45.559

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.)

### 4a. FACILITY- The name of the business where the well is located. Complete 4a and 4b. (If a residential well, skip 4a; complete 4b, well owner information only.)

FACILITY ID # (if applicable) \_\_\_\_\_

NAME OF FACILITY \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

City or Town State Zip Code

### 4b. CONTACT PERSON/WELL OWNER:

NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

City or Town State Zip Code

( ) - \_\_\_\_\_  
Area code - Phone number

### 5. WELL DETAILS:

a. Total Depth: 34 ft. Diameter: 24 in.

b. Water Level (Below Measuring Point): 20 ft.  
Measuring point is 1 ft. above land surface.

### 6. CASING: Length Diameter

a. Casing Depth (if known): \_\_\_\_\_ ft. \_\_\_\_\_ in.

b. Casing Removed: \_\_\_\_\_ ft. \_\_\_\_\_ in.

### 7. DISINFECTION:

(Amount of 65%-75% calcium hypochlorite used)

### 8. SEALING MATERIAL:

#### Neat Cement

Cement \_\_\_\_\_ lb.  
Water \_\_\_\_\_ gal.

#### Sand Cement

Cement \_\_\_\_\_ lb.  
Water \_\_\_\_\_ gal.

#### Bentonite

Bentonite \_\_\_\_\_ lb.  
Type: Slurry \_\_\_\_\_ Pellets \_\_\_\_\_  
Water \_\_\_\_\_ gal.

#### Other

Type material \_\_\_\_\_

Amount \_\_\_\_\_

### 9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:

Filled with Dirt  
Topped with 5' concrete

### 10. WELL DIAGRAM: Draw a detailed sketch of the well on the back of this form showing total depth, depth and diameter of screens (if any) remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.

### 11. DATE WELL ABANDONED 6-7-23

I DO HEREBY CERTIFY THAT THIS WELL WAS ABANDONED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

Farrell Brown 6-7-23  
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

\_\_\_\_\_  
SIGNATURE OF PRIVATE WELL OWNER ABANDONING THE WELL DATE  
(The private well owner must be an individual who personally abandons his/her residential well in accordance with 15A NCAC 2C .0113.)

Farrell Brown  
PRINTED NAME OF PERSON ABANDONING THE WELL

Submit a copy to the owner and the original to the Division of Water Quality within 30 days.

Attn: Information Management, 1617 Mail Service Center - Raleigh, NC 27699-1617, Phone No. (919) 733-7015 ext 568.

Form GW-30  
Rev. 5/06