WELL ABANDONMENT RECORD		For Internal Use ONLY:	
1. Well Contractor Information:		WELL ABANDONMENT DETAILS	
0	ı	WELL ABANDONMENT DETAILS	
Well Contractor Name (or well owner personally abandoning well on his/her property)		7a. For Geoprobe/DPT or Closed-Loop Geothermal Versil Construction/depth, only 1 GW-30 is needed. Indicated and the construction of the constru	
	abandoning well on his/her property)	wells abandoned:	———
4515-C		7b. Approximate volume of water remaining in well(s): 500 (gal.)
NC Well Contractor Certification Number		70. Approximate volume of water remaining in went),(gal.)
Beal well 2 Pur	7	FOR WATER SUPPLY WELLS ONLY:	
Company Name		7c. Type of disinfectant used: Colcium Hyp.	ochlorite.
2. Well Construction Permit #: EH 2307 - 00/2			,
List all applicable well construction permits (i.e.	UIC, County, State, Variance, etc.) if known	7d. Amount of disinfectant used:	
3. Well use (check well use):			
Water Supply Well:		7e. Sealing materials used (check all that apply):	
□Agricultural	□Municipal/Public	□ Neat Cement Grout □ Bentonit	te Chips or Pellets
☐Geothermal (Heating/Cooling Supply)	Residential Water Supply (single)	☐ Sand Cement Grout ☐ Dry Clay	у
□Industrial/Commercial	☐Residential Water Supply (shared)	☐ Concrete Grout ☐ Drill Cu	ttings
□Irrigation		☐ Specialty Grout ☐ Gravel	
Non-Water Supply Well:		☐ Bentonite Slurry ☐ Other (e	xplain under 7g)
☐Monitoring Injection Well:	□Recovery	7f. For each material selected above, provide amount	of materials used:
□ Aquifer Recharge	☐Groundwater Remediation		
□Aquifer Storage and Recovery	□Salinity Barrier	brevel, exceveted dirt 2	CENTA
□Aquifer Test	□Stormwater Drainage	920	
□Experimental Technology	□Subsidence Control		
□Geothermal (Closed Loop)	□Tracer	7g. Provide a brief description of the abandonment p	rocedure:
□Geothermal (Heating/Cooling Return)	□Other (explain under 7g)	Dus down & cut cosin	e filled
		with elean bravel + Fo) 1
4. Date well(s) abandoned: 8/16	6/23	1	ppra will
4. Date well(s) abandoned:		Cenent cop.	
5a. Well location:			
Bradley Built INC			
Facility/Owner Name	Facility ID# (if applicable)	8. Certification:	
5493 Siney Grove	Rol.	(//////////////////////////////////////	8/16/23
Physical Address, City, and Zip		Signature of Certified Well Contractor or Well Owner	Date
Hornett		By signing this form, I hereby certify that the well(s)	was burne) abandoned in
County	Parcel Identification No. (PIN)	accordance with 15A NCAC 02C .0100 or 2C .0200 We	ell Construction Standards
5b. Latitude and longitude in degrees/mi	nutes/seconds or decimal degrees	and that a copy of this record has been provided to the v	
5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees: (if well field, one lat/long is sufficient)		9. Site diagram or additional well details:	
35,495357 N -	78.690858 W	You may use the back of this page to provide addition	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	abandonment details. You may also attach additional pa	ges if necessary.
CONSTRUCTION DETAILS OF WEL		SUBMITTAL INSTRUCTIONS	
Attach well construction record(s) if available. For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form.		10. For All Waller Coloris 4: Consider 20 1	6 16 6 11
6a. Well ID#:		10a. For All Wells: Submit this form within 30 da abandonment to the following:	ys of completion of well
6b. Total well depth:(ft.)		Division of Water Resources, Information I 1617 Mail Service Center, Raleigh, NC	
6c. Borehole diameter:		10b. For Injection Wells: In addition to sending the above, also submit one copy of this form within 30 d	
oc. Dorelloic diameter (II.)		abandonment to the following:	-, ,
6d. Water level below ground surface:		Division of Water Resources, Underground Inject 1636 Mail Service Center, Raleigh, NC	
6e. Outer casing length (if known):		10c. For Water Supply & Injection Wells: In addition	
		address(es) above, also submit one copy of this form wi of well abandonment to the county health department	
		abandoned.	an of the county where
6g. Screen length (if known):	V/A. (ft.)		

WELL ABANDONMENT RECORD		For Internal Use ONLY:	
1. Well Contractor Information:		WELL ABANDONMENT DETAILS	
Daniel T Beal		7a. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same well construction/depth, only 1 GW-30 is needed. Indicate TOTAL NUMBER of	
Well Contractor Name (or well owner personally abandoning well on his/her property)			
4515-6		wells abandoned:	F' 2 -
NC Well Contractor Certification Number		7b. Approximate volume of water remaining in well(s): 500 (gal.)	
Beal well & Pu	m.o	FOR WATER SUPPLY WELLS ON	LY:
Company Name			of colour Hypochloss
2 Well Construction Parmit # EH 2	307-0012	c. Type of disinfectant used:	of Colcum (1700 colo)
2. Well Construction Permit #: FH 2307-00/Z List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.) if known		7d. Amount of disinfectant used:	1602
3. Well use (check well use):		/u. Allount of distillectant used.	4-2
Water Supply Well:		7e. Sealing materials used (check all th	nat apply):
□Agricultural	□Municipal/Public	Neat Cement Grout	☐ Bentonite Chips or Pellets
□Geothermal (Heating/Cooling Supply)	Daresidential Water Supply (single)	☐ Sand Cement Grout	□ Dry Clay
□Industrial/Commercial	□Residential Water Supply (shared)	□ Concrete Grout	□ Drill Cuttings
□Irrigation		☐ Specialty Grout	☐ Gravel
Non-Water Supply Well:		☐ Bentonite Slurry	☐ Other (explain under 7g)
□Monitoring	□Recovery		
Injection Well:		7f. For each material selected above, p	rovide amount of materials used:
□ Aquifer Recharge	□Groundwater Remediation	cenent + dic	£
□ Aquifer Storage and Recovery	□Salinity Barrier		
□ Aquifer Test	□Stormwater Drainage		-
□Experimental Technology	□Subsidence Control	7g. Provide a brief description of the a	bandonment procedure:
Geothermal (Closed Loop)	□Tracer	due down I cut	- Costila . Quared
□Geothermal (Heating/Cooling Return)	□Other (explain under 7g)	, ,	Cooking Surprot
8/11	121	Clown water t	filled with
4. Date well(s) abandoned: 8//6	163	Coment Cover	ed with execute
5a. Well location:			col colle incomi
Bradley BUIT I	100	0,0	
Facility/Owner Name	Facility ID# (if applicable)	8. Certification:	
F# 07 -1 /	- 1		17 / 2/11/10
5493 Placy GO	ve (10.	I foral f	8/16/2
Physical Address, City, and Zip		Signature of Certified Well Contractor or Well	Owner / Date
tanett		By signing this form, I hereby certify to	hat the well(s) was (were) abandoned in
County	Parcel Identification No. (PIN)	accordance with 15A NCAC 02C .0100 and that a copy of this record has been p	or 2C .0200 Well Construction Standards
5b. Latitude and longitude in degrees/m	inutes/seconds or decimal degrees:	and that a copy of this record has been p	novided to the well owner.
(if well field, one lat/long is sufficient)	70 100000	9. Site diagram or additional well details: You may use the back of this page to provide additional well site details or well abandonment details. You may also attach additional pages if necessary.	
35,496781 N	-18-689439 W		
CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED Attach well construction record(s) if available. For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form. 6a. Well ID#:		SUBMITTAL INSTRUCTIONS	
		10a. For All Wells: Submit this formabandonment to the following:	m within 30 days of completion of well
6b. Total well depth:(ft.)			, Information Processing Unit, r, Raleigh, NC 27699-1617
6c. Borehole diameter:(in.)		above, also submit one copy of this for	to sending the form to the address in 10a rm within 30 days of completion of well
6d. Water level below ground surface: _	(ft.)	abandonment to the following: Division of Water Resources, Underground Injection Control Program, 1636 Mail Service Center, Raleigh, NC 27699-1636	
6e. Outer casing length (if known):(ft.)		address(es) above, also submit one copy	ells: In addition to sending the form to the of this form within 30 days of completion health department of the county where
6f. Inner casing/tubing length (if known):(ft.)		abandoned.	
6g. Screen length (if known):	V/A(ft.)		

1. Well Contractor Information:	WELL ABANDONMENT DETA	
Donel I Beal	f	7a. For Geoprobe/DPT or Closed
Well Contractor Name (or well owner personally		well construction/depth, only 1 GW
4515 - C	wells abandoned:	
NC Well Contractor Certification Number		7b. Approximate volume of water
Beal well 2 1	Pump	FOR WATER SUPPLY WELLS
Company Name		7c. Type of disinfectant used:
2. Well Construction Permit #:E/_/ List all applicable well construction permits (i.e.	2307-00/2 UIC, County, State, Variance, etc.) if known	7d. Amount of disinfectant used:
3. Well use (check well use):		
Water Supply Well:		7e. Sealing materials used (check
□Agricultural	□Municipal/Public	☐ Neat Cement Grout
☐Geothermal (Heating/Cooling Supply)	Residential Water Supply (single)	☐ Sand Cement Grout
□Industrial/Commercial	□Residential Water Supply (shared)	☐ Concrete Grout
□Irrigation	0.000 (20.000) 150	☐ Specialty Grout
Non-Water Supply Well:		☐ Bentonite Slurry
□Monitoring	□Recovery	*
Injection Well:		7f. For each material selected ab
□ Aquifer Recharge	☐Groundwater Remediation	Govel + ex
□Aquifer Storage and Recovery	☐Salinity Barrier	0.00
□Aquifer Test	□Stormwater Drainage	
□Experimental Technology	□Subsidence Control	7g. Provide a brief description of
□Geothermal (Closed Loop)	□Tracer	/
□Geothermal (Heating/Cooling Return)	☐Other (explain under 7g)	dug down t
		folled with c
4. Date well(s) abandoned: 8//6	123	with cenent
5a. Well location:	4	excarted
Browlley Built II	C	
Facility/Owner Name	Facility ID# (if applicable)	8. Certification:
5493 piney 6000	re Rd.	(hir 1 +1
Physical Address, City, and Zip		Signature of Certified Well Contractor
Homett	Parcel Identification No. (PIN)	By signing this form, I hereby ce
County		accordance with 15A NCAC 02C and that a copy of this record has
5b. Latitude and longitude in degrees/mill (if well field, one lat/long is sufficient)	mutes/seconds of decimal degrees:	9. Site diagram or additional we
35,498567 -	78.689202 W	You may use the back of this pag
		abandonment details. You may als
CONSTRUCTION DETAILS OF WEL. Attach well construction record(s) if available. For	or multiple injection or non-water supply wells	SUBMITTAL INSTRUCTIONS
ONLY with the same construction/abandonment, 6a. Well ID#:	you can switte one form.	10a. For All Wells: Submit th abandonment to the following:
6b. Total well depth:	(1)	Division of Water Reso 1617 Mail Service
on rotal well deput.	(16.)	10b For Indication W.B. T.
6c. Borehole diameter: 24-	_(in.)	10b. For Injection Wells: In ad- above, also submit one copy of t abandonment to the following:
6d. Water level below ground surface: _	20 (ft.)	Division of Water Resources, 1636 Mail Service
6e. Outer casing length (if known):	0 ,	10c. For Water Supply & Injecti address(es) above, also submit one of well abandonment to the co
6f. Inner casing/tubing length (if known)):(ft.)	abandoned.
6g. Screen length (if known):	N/A. (ft)	

WELL ABANDONMENT RECORD

For Internal Use ONLY:					
WELL ABANDONMENT DETAIL	<u>.s</u>				
7a. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same well construction/depth, only 1 GW-30 is needed. Indicate TOTAL NUMBER of wells abandoned:					
7b. Approximate volume of water remaining in well(s): 470 (gal.)					
FOR WATER SUPPLY WELLS ONLY:					
7c. Type of disinfectant used: Colcium Hyphtloute.					
7d. Amount of disinfectant used: 16 0Z					
7e. Sealing materials used (check al	ll that apply):				
☐ Neat Cement Grout	☐ Bentonite Chips or Pellets				
☐ Sand Cement Grout	☐ Dry Clay				
☐ Concrete Grout	□ Drill Cuttings				
☐ Specialty Grout	Gravel				
☐ Bentonite Slurry	☐ Other (explain under 7g)				
7f. For each material selected above	e, provide amount of materials used:				
Gove + excepted dist.					
7g. Provide a brief description of the	ne abandonment procedure:				
,					
folled with cle	on brave I topped				
	L Covered with				
excarded o	list .				
8. Certification:					
Signature of Certified Well Contractor or	8/16/23. Date				

ertify that the well(s) was (were) abandoned in .0100 or 2C .0200 Well Construction Standards been provided to the well owner.

ell details:

ge to provide additional well site details or well so attach additional pages if necessary.

is form within 30 days of completion of well

ources, Information Processing Unit, Center, Raleigh, NC 27699-1617

dition to sending the form to the address in 10a this form within 30 days of completion of well

Underground Injection Control Program, Center, Raleigh, NC 27699-1636

ion Wells: In addition to sending the form to the e copy of this form within 30 days of completion ounty health department of the county where