WELL ABANDONMENT RECORD 1. Well Contractor Information: Baucom Business Plaza - Owner James Moore		For Internal Use ONLY:					
		WELL ABANDONMENT DETAILS 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	y abandoning well on his/her property)	wells abandoned:	Is needed. Indicate TOTAL NUMBER of
				James Moore			
NC Well Contractor Certification Number		7b. Approximate volume of water remaining in well(s): (gal.)					
		FOR WATER SUPPLY WELLS ON	LY:				
Company Name		7c. Type of disinfectant used:					
2. Well Construction Permit #: CH24	401-0020						
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 the	hat apply):				
□Agricultural	□Municipal/Public	□ Neat Cement Grout	□ Bentonite Chips or Pellets				
Geothermal (Heating/Cooling Supply)	Residential Water Supply (single)	□ Sand Cement Grout	□ Dry Clay				
□Industrial/Commercial	□Residential Water Supply (shared)	Concrete Grout	□ Drill Cuttings				
Irrigation New Weter Survely Wells		Specialty Grout	□ Gravel				
Non-Water Supply Well:	□Recovery	Bentonite Slurry	\Box Other (explain under 7g)				
Injection Well:		7f. For each material selected above, provide amount of materials used:					
□Aquifer Recharge	□Groundwater Remediation	4.5 to 5 cubic yards					
□Aquifer Storage and Recovery	□Salinity Barrier						
□Aquifer Test	□Stormwater Drainage						
□Experimental Technology	□Subsidence Control	7 - Duraida - haif daraidin af tha	- h d				
□Geothermal (Closed Loop) □Tracer		7g. Provide a brief description of the a	-				
□Geothermal (Heating/Cooling Return)	□Other (explain under 7g)		, piping and obstructions. 2				
		22" RCP about 4' below g	ground. 3) Dug out soil to th				
4. Date well(s) abandoned: 6 March 2024		16" around entire casing.	16" around entire casing. 4) visually inspected for re				
5a. Well location:		4) Pumped all the water out. 5) Filled with concrete					
451' East of HWY 401		, ,	,				
Facility/Owner Name	Facility ID# (if applicable)	8. Certification:					
Baucom Business Plaza LLC		James P. Moc	ore 3/11/2024				
Physical Address, City, and Zip		Signature of Certified Well Contractor or Wel					
11132 HWY 401N, Fuqua		U					
		By signing this form, I hereby certify that the well(s) was (were) abandoned in accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standards					
5h. Latitude and langitude in degrees/	inutes/seconds on desimal degrees	and that a copy of this record has been p					
5b. Latitude and longitude in degrees/m (if well field, one lat/long is sufficient)	inutes/seconds or decimal degrees:	9. Site diagram or additional well deta	aile				
-78.815343 _N 35.543728 _W			provide additional well site details or well				
IN	W	abandonment details. You may also atta	ach additional pages if necessary.				
CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED Attach well construction record(s) if available. For multiple injection or non-water supply wells		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 Walls, Submit this for	m within 20 days of completion of well				
6a. Well ID#:		10a. <u>For All Wells</u> : Submit this form within 30 days of completion of well abandonment to the following:					
		Division of Water Resources	s, Information Processing Unit,				
6b. Total well depth:(ft.)		1617 Mail Service Cente	er, Raleigh, NC 27699-1617				
		10b. For Injection Wells: In addition	to sending the form to the address in 10a				
6c. Borehole diameter: <u>22 (</u> (in.)		above, also submit one copy of this form within 30 days of completion of well					
		abandonment to the following:					
6d. Water level below ground surface: <u>11</u> (ft.)		Division of Water Resources, Underground Injection Control Program, 1636 Mail Service Center, Raleigh, NC 27699-1636					
6e. Outer casing length (if known):(ft.) 6f. Inner casing/tubing length (if known):(ft.)			<u>Vells</u> : In addition to sending the form to the				
			y of this form within 30 days of completion health department of the county where				
		abandoned.	1				
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6g. Screen length (if known): _____(ft.)