WELL CONSTRUCTION RECORD (GW-1)		For Internal Use Only:				
1. Well Contractor Information:						
Jon Poole		14:WATER	ZONES	TO REAL AND THE YEAR		
Well Contractor Name		FROM ft.	TO ft.	DESCRIPTION	n	
2281A		ft.	265 ft.	10 gp1.		· · · · · · · · · · · · · · · · · · ·
NC Well Contractor Certification Number		15. OUTER	CASING ((or.)	nulti-cased wells) (	OR LINER (if ap	plicable)
Grady Poole Well & Pump Co.		FROM ft.	34 ft.	DIAMETER In.	· ! & &	MATERIAL
Company Name			_	OBING (geotherm	al closed-loop)	Jawanico
2. Well Construction Permit #: EH2402 - 0012  List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.)		O ft.	80 R	DIAMETER in.	THICKNESS	PVC
3. Well Use (check well use):		ft.	ft.	. in.	foot and the street of the state of the	
Water Supply Well:					T SIZE THICK	NESS MATERIAL
□Agricultural □Municipal/P		ſt.	ft.	in.		
	Water Supply (single) Water Supply (shared)	ſt.	u.	in.		
□Initigation □Wells > 100		18. GROUT FROM	то	MATERIAL		T METHOD & AMOUNT
Non-Water Supply Well:		O ft.	10 R.	bentanite		14
☐Monitoring ☐Recovery Injection Well:		· \r.	u,		0 +	lled
Aquifer Recharge		ft.	ft.			
□Aquifer Storage and Recovery □Salinity Barrier		19: SAND/GRAVEL PACK (I applicable) FROM TO MATERIAL EMPLACEMENT METHOD				
□Aquifer Test □Stormwater		ft.	ſt.			
□Experimental Technology □Subsidence (	Control	ft.	ft.			
OGeothermal (Closed Loop)		20 DRILLE FROM	NG LOG (attac	h additional sheets	if necessary)	ock type, grain size, etc.)
Geothermal (Heating/Cooling Return) Other (explain	in under #21 Remarks)	D ft.	as n	Clay	ior, narunese, soneri	sex type, grain size, etc.)
4. Date Well(s) Completed: 3 27 24 Well ID#		25 ft.	280 m	granit	e rock	
Sa. Well Location:  Susan Weathers  Facility/Owner Name  To F. K. A. H. Weathers  Facility ID# (if applicable)		ft.	ft. ft.			
Physical Address, City, and Zip	R.	ſt.				
Harnett		21 REMAR	KS-A	A STATE OF THE STATE OF	Constitution of the	
County Parcel Iden						
5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees: (if well field, one lat/long is sufficient)		22. Certifica	tiona .			
, N w		Par Dude # 77211 =175174				
6. Is(are) the well(s): Permanent or DTemporary		Signapore of Certified Well Contractor  Date				
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		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.				
repair under #21 remarks section or on the back of this form.		23. Site diagram or additional well details:				
8. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same construction, only 1 GW-1 is needed. Indicate TOTAL NUMBER of wells drilled:		You may use the back of this page to provide additional well construction info (add 'See Over' in Remarks Box). You may also attach additional pages if necessary.				
9. Total well depth below land surface: 240  For multiple wells list all depths if different (example-3@200' and 2@100')  (ft.)		24. SUBMITTAL INSTRUCTIONS  Submit this GW-1 within 30 days of well completion per the following:				
10. Static water level below top of casing: 30 (ft.)  If water level is above casing, use "+"		24a. For All Wells: Original form to Division of Water Resources (DWR), Information Processing Unit, 1617 MSC, Raleigh, NC 27699-1617				
11. Borchole diameter: 614 (in.)		24b. For Injection Wells: Copy to DWR, Underground Injection Control (IUC) Program, 1636 MSC, Raleigh, NC 27699-1636				
12. Well construction method: air rotary (i.e. suger, rotary, enble, direct push, etc.)		24c. For Water Supply and Open-Loop Goothermal Return Wells: Copy to the county environmental health department of the county where installed				
FOR WATER SUPPLY WELLS ONLY:  13a. Yield (gpm)   O Method of test: ble W		24d. For Water Wells producing over 100,000 GPD: Copy to DWR, CCPCUA Permit Program, 1611 MSC, Raleigh, NC 27699-1611				
13a. Yield (gpm) Method of test: 13b. Disinfection type: h th Amount:			150			
Amount:	1					