

WELL ABANDONMENT RECORD

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

WELL CONTRACTOR CERTIFICATION #_ 3104

I. WELL CONTRACTOR:		WELL DETAILS:	
Van Elliott		a. Total Depth: 75 ft. Diarneter: 24 in.	
Well Contractor (Individual) Name			
SOUTHERN WELL DRILLING		b. Water Level (Below Measuring I	
Well Contractor Company Name		Measuring point is	II. above land surface.
STREET ADDRESS 1530 Beaver Dam Road		CASING:	Length Diameter
The state of the s	27522	a. Casing Depth (if known):	n. 24 in.
	ip Code	b. Casing Removed:	ft. in.
(919) - 603-7165 Area code - Phone number	7.	DISINFECTION: HT	H
2. WELL INFORMATION: TILL NIAS DAIS		(Amount of 65%-75% calcium hy	mochlorite used)
SITE WELL ID # (if applicable) EH2 408 0015		8. SEALING MATERIAL:	
STATE WELL PERMIT # (if applicable)_		Neal Cement	Sand Cement
CONTINUE		CementIb.	Cement Ib.
COUNTY WELL PERMIT # (if applicable)		Water gal.	Water gal.
DWQ or OTHER PERMIT # (if applicable)		Bentonite	
WELL USE (Check applicable use): Monitoring Residential		Bentonite lb.	
☐ Municipal/Public ☐ Industrial/Commercial ☐ Agricultural		Type: Slurry Pellets	
☐ Recovery ☐ Injection ☐ Irrigation		Watergal.	
Other (list use)		Other	
		Type material Clay	
3. WELL LOCATION: COUNTY HAT NE QUADRANGLE NAME		AMOUNT 2 Damp Truck loads	
		Amount & Pari	p men mays
NEAREST TOWN: BUN 16. V2			
105 Spearman Lane		9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:	
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)		1111/29 04	1 2
TOPOGRAPHIC / LAND SETTING:		fillied with clay	
Slope Valley Flat Ridge Other		top of with cement	
(Check appropriate setting)			
	10		ed sketch of the well on the back of this
LATITODE	May be in degrees, minutes, seconds, or in a		d diameter of screens (if any) remaining is of casing perforations, and depths and
LONGITUDE	decimal format	types of fill materials used.	s of casing perforations, and depths and
Latitude/longitude source: GPS Top	ographic map		11-26-24
(Location of well must be shown on a USGS topo I	nap and	DATE WELL ABANDONED	11 26 21
attached to this form if not using GPS.)	ID	O HEREBY CERTIFY THAT THIS WELL	WAS ABANDONED IN ACCORDANCE
4a. FACILITY- The name of the business where the well it (If a residential well, skip 4a; complete 4b, well owner is	is located. Complete 4a and4b. WI	TH ISA NCAC 2C, WELL CONSTRUCTIONS RECORD HAS BEEN PROVIDED TO	ON STANDARDS, AND THAT A COPY OF
FACILITY ID #(if applicable),	iornation only.)	1/ 6//	THE WELL OWNER
NAME OF FACILITY Clayton Homes		· Janos	
STREET ADDRESS		GNATURE OF CERTIFIED WELL CON	TRACTOR DATE
311121 TUDBICUS			
City or Town State	Zip Code SIG	CNATURE OF PRIVATE WELL OWNE	R ABANDONING THE WELL DATE
4b. CONTACT PERSON/WELL OWNER:	in	accordance with 15A NCAC 2C .0113.)	who personally abandons his/her residential well
NAME Clayton Hom	25	Van Ellist	
STREET ANDRESS Raleigh	PR	INTED NAME OF PERSON ABANDON	THE WELL
STREET ADDRESS			A 100