WELL ABANDONMENT RECORD		For Internal Use ONLY:  WELL ABANDONMENT DETAILS			
1. Well Contractor Information:					
Well Contractor Name (or well owner personally abandoning well on his/her property)  4515 - C  NC Well Contractor Certification Number  Beal well & Purp  Company Name		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:			
			7c. Type of disinfectant used: Calcium 4-190 Chbs. tc		
				2411-0003	/ .
			List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.) if known		7d. Amount of disinfectant used: 10 0Z
			3. Well use (check well use):		
		Water Supply Well:		7e. Sealing materials used (check all that 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		☐ Specialty Grout ☐ Gravel			
Non-Water Supply Well:		☐ Bentonite Slurry ☐ Other (explain under 7g)			
□Monitoring	□Recovery				
Injection Well:		7f. For each material selected above, provide amount of materials used:			
□ Aquifer Recharge	☐Groundwater Remediation	57 Stone & cener			
□ Aquifer Storage and Recovery	☐Salinity Barrier	or more of the			
□Aquifer Test	□Stormwater Drainage				
□Experimental Technology	□Subsidence Control				
□Geothermal (Closed Loop)	□Tracer	7g. Provide a brief description of the abandonment procedure:			
Geothermal (Heating/Cooling Return)	☐Other (explain under 7g)	Due up too custos filled with			
4. Date well(s) abandoned:	5/24	Genel F' Copied with Cernin			
Altra A					
ALON MINMON	Facility ID# (if applicable)	8. Certification:			
Facility/Owner Name	1	11/10/0			
3635 Olivia A	d.	Signature of Certified Well Contractor or Well Owner Date			
Hasa ett		By signing this form, I hereby certify that the well(s) was (were) abandoned in			
County	Parcel Identification No. (PIN)	accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standard			
5b. Latitude and longitude in degrees/n	ninutes/seconds or decimal degrees:	and that a copy of this record has been provided to the well owner.			
(if well field, one lat/long is sufficient)		9. Site diagram or additional well details:			
		You may use the back of this page to provide additional well site details or well			
N	W	abandonment details. You may also attach 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  ONLY with the same construction/abandonment, you can submit one form.  6a. Well ID#:		SUBMITTAL INSTRUCTIONS			
		10a. For All Wells: Submit this form within 30 days of completion of we abandonment to the following:			
oa. Treation.		Division of Water Resources, Information Processing Unit,			
6b. Total well depth: Off (ft.)		1617 Mail Service Center, Raleigh, NC 27699-1617			
6c. Borehole diameter:(in.)		<b>10b.</b> For Injection Wells: In addition to sending the form to the address in 10 above, also submit one copy of this form within 30 days of completion of we abandonment to the following:			
6d. Water level below ground surface:(ft.)		Division of Water Resources, Underground Injection Control Program, 1636 Mail Service Center, Raleigh, NC 27699-1636			
6e. Outer casing length (if known):(ft.)		10c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well abandonment to the county health department of the county when			
6f. Inner casing/tubing length (if know	n): /// (ft.)	abandoned.			
6g. Screen length (if known):	(ft.)				