

RESIDENTIAL WELL CONSTRUCTION RECORD

North Carolina Department of Environment and Natural Resource 1- Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 2179

1. WELL CONTRACTOR:	g. WATER ZINES (depth):
Roger W. Jackson	From 242 To 244 From To
Well Contractor (Individual) Name	FromTo FromTo
Jackson Well Company	FromToToTo
Well Contractor Company Name	6. CASING: Thickness/
STREET ADDRESS _ 5660 McDougald Road	Depth Diameter Weight Material
	From To Pt
Lillington, North Carolina 27546 City or Town State Zip Code	FromYoFt
(910)-893-2372 Area code- Phone number	7. GROUT: Depth . Material . Method
2. WELL INFORMATION:	From To Pt. SAND HENEY fouring
SITE WELL ID #(If applicable)	From To Ft.
STATE WELL PERMIT#(# applicable)	
DWQ or OTHER PERMIT #(if applicable)	6. SCREEN: Depth Diameter Stot Size Material From To Pt in in.
	From To Ft in. in.
WELL USE (Check Applicable Box): Residential Water Supply	FromToFtininin.
DATE DRILLED 5-15-15	9. SAND/GRAVEL PACK:
TIME COMPLETED 3 100 AMO PMD	Depth Size Material
3. WELL LOCATION:	· FromToFt
ory: Bonn Level county Annett.	From To Ft.
2.Ke Williams Al	rioniori
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)	
TOPOGRAPHIC/LAND SETTING:	10. DRILLING LCG From To Formation Description
Slope Dvalley DFlat DRidge Dother 40. 364	0 145 CEBY.
(creex althoheses not	145 320 SINTE
LATITUDE 3 5 18.753 May be in degrees, minutes, seconds or	
LONGITUDE 78° 52086 in a decimal format	
Latitude/longitude source: GGPS DTopographic map	
(location of well must be shown on a USGS topo map and attached to this form if not using GPS)	
4. WELL OWNER	
OWNER'S NAME OMALY STATEL	
STREET ADDRESS SOS MIKE WILLIAMS Ke	
City or Town State Zin Code	
L 9/9 - 762 9078	
Area code- Phone number	11. REMARKS:
5. WELL DETAILS:	
G. TOTAL DEPTH: 320	
b. DOES WELL REPLACE EXISTING WELL? YESD NOD	TOO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH
a. WATER LEVEL Below Top of Casing:	15A NCAC 2C, WELL IXONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.
	D 1 D
"Top of casing terminated at/or below land surface may require a variance in accordance with 15A NGAC 2C .0118.	SIGNATURE OF CERSOFIED WELL CONTRACTOR DATE
e. YIELD (gpm): / O METHOD OF TEST ATA	Roger W. Jackson
1. DISINFECTION: Type HTH Amount 1602	PRINTED NAME OF PERSON CONSTRUCTING THE WELL