RESIDENTIAL WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR CERTIFICATION # 2179

1. WELL CONTRACTOR:

Roger W. Jackson
Well Contractor (Individual) Name

Jackson Well Company
Well Contractor Company Name

STREET ADDRESS 5660 McDougald Road

Lillington, North Carolina 27546
City or Town State Zip Code

(910)-893-2372
Area code- Phone number

2. WELL INFORMATION:

SITE WELL ID #(if applicable) typ HF5-25990

STATE WELL PERMIT#(if applicable)

DWQ or OTHER PERMIT #(if applicable)

WELL USE (Check Applicable Box): Residential Water Supply ☑

DATE DRILLED 3-4-11

TIME COMPLETED 3:00 AM☐ PM☑

3. WELL LOCATION:

CITY: Broadway COUNTY HARNETT

P.O. Box 336 Broadway NC. 27505
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

☐Slope ☐Valley ☐Flat ☐Ridge ☐ Other 397
(check appropriate box)

LATITUDE 35° 25.249
LONGITUDE 78° 58.189

May be in degrees, minutes, seconds or in a decimal format

Latitude/longitude source: ☑GPS ☐Topographic 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 Norman Leon Cameron

STREET ADDRESS P.O. Box 336

Broadway NC. 27505
City or Town State Zip Code

(919) 258 9890
Area code- Phone number

5. WELL DETAILS:

a. TOTAL DEPTH: 200'

b. DOES WELL REPLACE EXISTING WELL? YES☐ NO☑

c. WATER LEVEL Below Top of Casing: 45 FT.
(Use "+" if Above Top of Casing)

d. TOP OF CASING IS 1 FT. Above Land Surface*
*Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118.

e. YIELD (gpm): 25 METHOD OF TEST Air

f. DISINFECTION: Type HTH Amount 16 oz.

g. WATER ZONES (depth):

From 194 To 195 From ____ To ____
From ____ To ____ From ____ To ____
From ____ To ____ From ____ To ____

6. CASING:

	Depth		Diameter	Thickness/ Weight	Material
From 0	To 80	Ft.	6"	SDR	PVC
From ____	To ____	Ft.			
From ____	To ____	Ft.			

7. GROUT:

	Depth		Material	Method
From 0	To 20	Ft.	Sand Cement	Pouring
From ____	To ____	Ft.		
From ____	To ____	Ft.		

8. SCREEN:

	Depth		Diameter	Slot Size	Material
From ____	To ____	Ft.	____ in.	____ in.	
From ____	To ____	Ft.	____ in.	____ in.	
From ____	To ____	Ft.	____ in.	____ in.	

9. SAND/GRAVEL PACK:

	Depth		Size	Material
From ____	To ____	Ft.		
From ____	To ____	Ft.		
From ____	To ____	Ft.		

10. DRILLING LOG

From	To	Formation Description
0	30	Clay
30	35	Sand
35	74	Clay
74	200	Slate

11. REMARKS:

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

Roger W. Jackson 3-7-11
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

Roger W. Jackson
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt., 1617 Mail Service Center – Raleigh, NC 27699-1617 – Phone #: (919) 733-7015 ext 566

Form GW-1a