WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

For Internal Use ONLY:

1. Well Contractor Information:

Matthew Brown
Well Contractor Name

3036A
NC Well Contractor Certification Number

Yadkin Well Company, Inc.
Company Name

2. Well Construction Permit #: 203643
List all applicable well construction permits (i.e. County, State, Variance, etc.)

3. Well Use (check well use):

Water Supply Well:	
☐Agricultural	☐Municipal/Public
☐Geothermal (Heating/Cooling Supply)	☒Residential Water Supply (single)
☐Industrial/Commercial	☐Residential Water Supply (shared)
☐Irrigation	
Non-Water Supply Well:	
☐Monitoring	☐Recovery
Injection Well:	
☐Aquifer Recharge	☐Groundwater Remediation
☐Aquifer Storage and Recovery	☐Salinity Barrier
☐Aquifer Test	☐Stormwater Drainage
☐Experimental Technology	☐Subsidence Control
☐Geothermal (Closed Loop)	☐Tracer
☐Geothermal (Heating/Cooling Return)	☐Other (explain under #21 Remarks)

4. Date Well(s) Completed: 9-3-14 **Well ID#** AAL-862

5a. Well Location: Phone number 704-592-2451 cell 704-796-4398 9883 2312
Gary Lunsford
Facility/Owner Name
Facility ID# (if applicable)

164 Paddock Mocksville
Physical Address, City, and Zip

Iredell
County

Parcel Identification No. (PIN)

5b. Latitude and Longitude in degrees/minutes/seconds or decimal degrees: (if well field, one lat/long is sufficient)

36 03.327 N 80 58.246 W

6. Is (are) the well(s): ☒Permanent or ☐Temporary

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 repair under #21 remarks section or on the back of this form.

8. Number of wells constructed: 1
For multiple injection or non-water supply wells ONLY with the same construction, you can submit one form.

9. Total well depth below land surface: 322 (ft.)
For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 50' (ft.)
If water level is above casing, use "+"

11. Borehole diameter: 6 (in.) Bit Off 6.095"

12. Well construction method: Rotary
(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) 4 **Method of test:** air

13b. Disinfection type: HTH **Amount:** 1 cups

MB +SW

14. WATER ZONES

FROM	TO	DESCRIPTION
195 ft.	196 ft.	+2.5gpm 275-278-1.5gpm
250 ft.	255 ft.	

15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)

FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	ft.	in.		

16. INNER CASING OR TUBING (geothermal closed-loop)

FROM	TO	DIAMETER	THICKNESS	MATERIAL
+1 ft.	102 ft.	6 1/8 in.	SDR-21	PVC
ft.	ft.	in.		

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	3 ft.	Bentonite Chips	Gravity 3 Bags
3 ft.	25 ft.	Bentonite Slurry	Pumped 2 1/2
ft.	ft.		

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
ft.	ft.		
ft.	ft.		

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, drill rock type, grain size, etc.)
0 ft.	90 ft.	Soil
90 ft.	195 ft.	Light Granite
195 ft.	280 ft.	Brown Rock + Granite Layers
280 ft.	322 ft.	Granite
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

Self-grout per S. Henderson 15,

22. Certification:

Signature of Certified Well Contractor — Date: 9-3-14

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.

23. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well construction details. You may also attach additional pages if necessary.

SUBMITTAL INSTUCTIONS

24a. For All Wells: Submit this form within 30 days of completion of well construction to the following:

Division of Water Quality, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

24b. For Injection Wells: In addition to sending the form to the address in 24a above, also submit a copy of this form within 30 days of completion of well construction to the following:

Division of Water Quality, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. 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 construction to the county health department of the county where constructed.

Date Site Visited: 8-7-14 By: UB