WELL CONSTRUCTION RECORD (GW-1)

1. Well Contractor Information:

For Internal Use Only:

1. Wen Contractor Information.			
		14. WATER	ZONES
Well Contractor Name		FROM	то
		ft.	1
NC Well Contractor Certification Number		ft.	1
NC wen Contractor Certification Number		15. OUTER FROM	CASING (f
		ft.	1
Company Name		16. INNER	
2. Well Construction Permit #:	UIC County State Variance etc.)	FROM ft.	TO
3. Well Use (check well use):	ore, county, shale, furtance, ele.y	ft.	1
Water Supply Well:		17. SCREEN	N
	□Municipal/Public	FROM ft.	TO ft.
Geothermal (Heating/Cooling Supply)	□Residential Water Supply (single)		
□Industrial/Commercial	□Residential Water Supply (shared)	ft.	ft.
	\Box Wells > 100,000 GPD	18. GROUT FROM	то
Non-Water Supply Well:		ft.	t
□Monitoring	□Recovery	ft.	1
Injection Well:		ft.	1
□Aquifer Recharge	□Groundwater Remediation	19. SAND/G	RAVEL PA
□Aquifer Storage and Recovery	□Salinity Barrier	FROM	то
□Aquifer Test	□Stormwater Drainage	ft.	1
□Experimental Technology	□Subsidence Control	ft.	1
□Geothermal (Closed Loop)	□Tracer	20. DRILLI FROM	NG LOG (a TO
Geothermal (Heating/Cooling Return)	□Other (explain under #21 Remarks)	ft.	10
4. Date Well(s) Completed:	Well ID#	ft.	1
_		ft.	1
5a. Well Location:		ft.	1
		ft.	1
Facility/Owner Name	Facility ID# (if applicable)	ft.	1
		ft.	1
Physical Address, City, and Zip		21. REMAR	
County	Densel Identification Mar (DINI)		
5	Parcel Identification No. (PIN)		
5b. Latitude and longitude in degrees/m (if well field, one lat/long is sufficient)	inutes/seconds or decimal degrees:	22. Certifica	tion
		22. Certifica	10011:
N	W		
6. Is(are) the well(s): Permanent or	□Temporary	Signature of C	ertified Wel
		By signing this	
7. Is this a repair to an existing well: If this is a repair, fill out known well constructio	\Box Yes or \Box No <i>n</i> information and explain the nature of the	15A NCAC 02 of this record	
repair under #21 remarks section or on the back		23. Site diag	•
8. For Geoprobe/DPT or Closed-Loop (eothermal Wells having the same	You may us	
construction, only 1 GW-1 is needed. Indi		(add 'See Ov	er' in Rema
drilled:		24. SUBMI	ITAL INS
9. Total well depth below land surface:		Submit this	GW-1 wit
For multiple wells list all depths if different (exa	mple- 3@2007 and 2@1007)		
10. Static water level below top of casing If water level is above casing, use "+"	g:(ft.)	24a. <u>For A</u> Information	
		24b. For In	iection W
11. Borehole diameter:	(in.)	Program, 16	
12. Well construction method:		24c. <u>For Wa</u>	<u>ter</u> Suppl
(i.e. auger, rotary, cable, direct push, etc.)		county envir	
FOR WATER SUPPLY WELLS ONLY	? :	24d. For W	ater Wells
13a. Yield (gpm)	Method of test.	Permit Progr	
15a, 11ciu (gpiil) 1			
13b. Disinfection type:	Amount:		

		R ZONI TO	ES		DECOND	ION							
FRO	M ft.	10	£	t.	DESCRIPT	ION							
	ft.			t.									
			-					ID /10					
15. C		TO	NG (fo	or n	r multi-cased wells) OR LINER (if applicable) DIAMETER THICKNESS MATERIAL								
FKU	ft.	-	f	t.	DIAMETER THIC		THICK	NESS	MATERIAL				
16. I	NNER	CASIN	IG OF	t T	UBING (geo								
FRO	М	то			DIAMETE		THICK	NESS	MATERIAL				
	ft.		f	t.		in.							
	ft.		f	t.		in.							
	CREE												
FRO		то		D	IAMETER	SLO	T SIZE	THICK	NESS	MATERIAL			
	ft.		ft.		in.								
	ft.		ft.		in.								
	GROU												
FRO		то			MATERIA	L	EMPL	ACEMEN	T METH	IOD & AMOUNT			
	ft.	_		t.									
	ft.			t.									
	ft.			t.									
			EL PA	СК	(if applicat					AFFETTOD			
FRO		то			MATERIA	L		EMPLAC	EMENT	METHOD			
	ft.			t.									
	ft.		-	t.									
20. L FRO		ING LC)G (at	tac	h additional	l sheet	s if neces	sary)	als trung	grain size, etc.)			
FKU	ft.	-	f	t.	DESCRIPT	1010 (0	olor, narui	iess, son/re	ek type,	gram size, etc.)			
	ft.		f	t.									
	ft.		f	t.									
	ft.		f	t.									
	ft.		f	t.									
	ft.		f	t.									
	ft.		f	t.									
21. F	REMA	RKS											

Contractor

Date

by certify that the well(s) was (were) constructed in accordance with 15A NCAC 02C .0200 Well Construction Standards and that a copy ovided to the well owner.

Iditional well details:

of this page to provide additional well construction info arks Box). You may also attach additional pages if necessary.

TRUCTIONS

hin 30 days of well completion per the following:

Original form to Division of Water Resources (DWR), Unit, 1617 MSC, Raleigh, NC 27699-1617

ells: Copy to DWR, Underground Injection Control (IUC) Raleigh, NC 27699-1636

y and Open-Loop Geothermal Return Wells: Copy to the health department of the county where installed

s producing over 100,000 GPD: Copy to DWR, CCPCUA MSC, Raleigh, NC 27699-1611