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Charlotte, NC 28202

Mailing Address:
PO Box 1006
Mail Code EC13K
Charlotte, NC 28201-1006

704 382 4761

704 382 6240 fax

April 8, 2015

North Carolina Department of Environment and Natural Resources
Division of Water Resources
Information Processing Unit
1617 Mail Service Center
Raleigh, NC 27699-1617

Subject: Well Construction Records
Duke Energy Carolinas, LLC
Dan River Steam Station
900 S Edgewood Road, Eden, NC 27288

Dear DWR Representative:

Duke Energy is providing well construction records for fourteen (14) non-water supply monitoring wells installed at Duke Energy's Dan River Steam Station in Eden, North Carolina between March 10, 2015 and April 1, 2015. These monitoring wells were installed in the vicinity of the Ash Storage Area 1 in the northeastern portion of the Dan River site. Per 15A NCAC 02C .0307(a), these records are being submitted within 30 days of completion of construction.

Records are provided for observation wells

OW-401S,
OW-403S,
OW-406S,
OW-407S,
OW-409S,

OW-410S,
OW-411S,
OW-412S,
OW-413S,
OW-414S,

OW-415S,
OW-416S,
OW-417S, and
OW-419S

If you have any questions, please feel free to contact me at 704-382-4761 or at Sean.DeNeale@duke-energy.com

Sincerely,

Sean DeNeale, Engineer II
Environmental Services

cc: Elizabeth Werner, NCDENR Solid Waste Section

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Stefan Smith

Well Contractor Name

3576-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

N/A

2. Well Construction Permit #:

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/26/15 Well ID# OW-401 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4963 N -79.7179 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: 29.2 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 9.9 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

12. Well construction method: auger

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

Table with columns: FROM, TO, DESCRIPTION. Rows: N/A ft. N/A ft. N/A; N/A ft. N/A ft. N/A

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

Table with columns: FROM, TO, DIAMETER, THICKNESS, MATERIAL. Row: N/A ft. N/A ft. N/A in. N/A N/A

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

Table with columns: FROM, TO, DIAMETER, THICKNESS, MATERIAL. Row: 0 ft. 13.9 ft. 2 in. Sch. 40 PVC; N/A ft. N/A ft. N/A in. N/A N/A

17. SCREEN

Table with columns: FROM, TO, DIAMETER, SLOT SIZE, THICKNESS, MATERIAL. Row: 13.9 ft. 28.9 ft. 2 in. 0.010 Sch. 40 PVC; N/A ft. N/A ft. N/A in. N/A N/A

18. GROUT

Table with columns: FROM, TO, MATERIAL, EMPLACEMENT METHOD & AMOUNT. Row: 0 ft. 10 ft. Neat Cement Tremie; 10 ft. 12 ft. Bentonite Pour & Hydrate; N/A ft. N/A ft. N/A N/A

19. SAND/GRAVEL PACK (if applicable)

Table with columns: FROM, TO, MATERIAL, EMPLACEMENT METHOD. Row: 12 ft. 30 ft. #2 Silica Sand wash; N/A ft. N/A ft. N/A N/A

20. DRILLING LOG (attach additional sheets if necessary)

Table with columns: FROM, TO, DESCRIPTION (color, hardness, soil/rock type, grain size, etc.). Row: 0 ft. 7 ft. Silty Sand; 7 ft. 18.5 ft. PWR; 18.5 ft. 23.5 ft. Silty Sand; 23.5 ft. 30 ft. PWR

21. REMARKS

N/A

22. Certification:

Signature of Certified Well Contractor: Stefan Smith

Date: 04/07/15

Signature of Certified Well Contractor

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program, 1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Stefan Smith

Well Contractor Name

3576-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/30/15 Well ID# OW-403 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4963 N -79.7148 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: 50 (ft.)
For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 17 (ft.)
If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	34.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
34.7 ft.	49.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	31 ft.	Neat Cement	Tremie
31 ft.	33 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
33 ft.	50 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

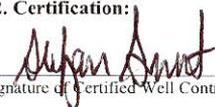
20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	13.5 ft.	Silty Sand
13.5 ft.	18.5 ft.	PWR
18.5 ft.	23 ft.	Sandy Silt
23 ft.	25 ft.	Sandy Clayey Silt
25 ft.	50.4 ft.	PWR
ft.	ft.	
ft.	ft.	

21. REMARKS

N/A

22. Certification:


Signature of Certified Well Contractor

04/07/15

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Stefan Smith

Well Contractor Name

3576-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, etc.)

3. Well Use (check well use):

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

4. Date Well(s) Completed: 4/1/15 Well ID# OW-406 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4954 N -79.7183 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: 26 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 4.6 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	10.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
10.7 ft.	25.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	7 ft.	Neat Cement	Tremie
7 ft.	9 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
9 ft.	26 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	7 ft.	Clay
7 ft.	11 ft.	Silty Sand
11 ft.	26 ft.	PWR
ft.	ft.	

21. REMARKS

N/A

22. Certification:

Stefan Smith

Signature of Certified Well Contractor

04/07/15

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/16/15 Well ID# OW-407 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4951

N

-79.7163

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: 63.5 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 48.9 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	48.2 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
48.2 ft.	63.2 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	44.5 ft.	Neat Cement	Tremie
44.5 ft.	46.5 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
46.5 ft.	63.5 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	1.5 ft.	Fill: Silty Sand
1.5 ft.	38.5 ft.	Fill: Ash
38.5 ft.	43.5 ft.	Organic Debris
43.5 ft.	48.5 ft.	Sandy Clay
48.5 ft.	54 ft.	Clayey Sand
54 ft.	58.5 ft.	Silty Sand
58.5 ft.	63.8 ft.	PWR

21. REMARKS

N/A

22. Certification:

Richy Lemire

04/07/15

Signature of Certified Well Contractor

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, etc.)

3. Well Use (check well use):

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

4. Date Well(s) Completed: 4/1/15 **Well ID#** OW-409 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4948 N **-79.7179** 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: 14 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 1.3 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A **Method of test:** N/A

13b. Disinfection type: N/A **Amount:** N/A

For Internal Use ONLY:

14. WATER ZONES						
FROM	TO	DESCRIPTION				
N/A ft.	N/A ft.	N/A				
N/A ft.	N/A ft.	N/A				
15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)						
FROM	TO	DIAMETER	THICKNESS	MATERIAL		
N/A ft.	N/A ft.	N/A in.	N/A	N/A		
16. INNER CASING OR TUBING (geothermal closed-loop)						
FROM	TO	DIAMETER	THICKNESS	MATERIAL		
0 ft.	5 ft.	2 in.	Sch. 40	PVC		
N/A ft.	N/A ft.	N/A in.	N/A	N/A		
17. SCREEN						
FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL	
5 ft.	14 ft.	2 in.	0.010	Sch. 40	PVC	
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A	
18. GROUT						
FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT			
0 ft.	3 ft.	Neat Cement	Tremie			
3 ft.	4 ft.	Bentonite	Pour & Hydrate			
N/A ft.	N/A ft.	N/A	N/A			
19. SAND/GRAVEL PACK (if applicable)						
FROM	TO	MATERIAL	EMPLACEMENT METHOD			
4 ft.	14 ft.	#2 Silica Sand	wash			
N/A ft.	N/A ft.	N/A	N/A			
20. DRILLING LOG (attach additional sheets if necessary)						
FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)				
0 ft.	7 ft.	Sandy Clay				
7 ft.	14 ft.	PWR				
ft.	ft.					
ft.	ft.					
ft.	ft.					
ft.	ft.					
21. REMARKS						
N/A						

22. Certification:

Richy Lemire 04/07/15
Signature of Certified Well Contractor Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636**

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: **N/A**

List all applicable well permits (i.e. County, State, Variance, Injection, 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: **3/26/15** Well ID# **OW-410 S**

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4943 N **-79.7164** 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: **54.5** (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: **39.3** (ft.)

If water level is above casing, use "+"

11. Borehole diameter: **7** (in.)

12. Well construction method: **auger**

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) **N/A** Method of test: **N/A**

13b. Disinfection type: **N/A** Amount: **N/A**

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	39.2 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
39.2 ft.	54.2 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	35 ft.	Neat Cement	Tremie
35 ft.	37 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
37 ft.	54.5 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	1.5 ft.	Fill: Sandy Clay
1.5 ft.	34.7 ft.	Fill: Ash
34.7 ft.	38.5 ft.	Silty Sand
38.5 ft.	54.5 ft.	PWR
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

N/A

22. Certification:



Signature of Certified Well Contractor

04/07/15

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

I. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/23/15 Well ID# OW-411 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4944

N

-79.7147

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: 66 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 44.1 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

12. Well construction method: auger

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	50.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
50.7 ft.	65.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	47 ft.	Neat Cement	Tremie
47 ft.	49 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
49 ft.	66 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

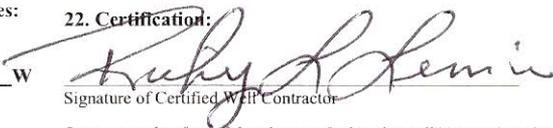
20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	2 ft.	Fill: Silty Sand
2 ft.	31 ft.	Fill: Ash (Sandy Clay 18-19.8)
31 ft.	38.5 ft.	Silty Sand / Sandy Silt
38.5 ft.	58.5 ft.	PWR
58.5 ft.	60 ft.	Silty Sand
60 ft.	66.4 ft.	PWR
ft.	ft.	

21. REMARKS

N/A

22. Certification:

 04/07/15
Signature of Certified Well Contractor Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/18/15 **Well ID#** OW-412 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4950 N **-79.7132** 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: 58 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 33.5 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

12. Well construction method: auger

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A **Method of test:** N/A

13b. Disinfection type: N/A **Amount:** N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	42.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
42.7 ft.	57.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	39 ft.	Neat Cement	Tremie
39 ft.	41 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
41 ft.	58 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	0.5 ft.	Fill: Silty Gravel
0.5 ft.	6 ft.	Fill: Sandy Clay
6 ft.	23.5 ft.	Silty Sand
23.5 ft.	59 ft.	PWR (Silty Sand zones 28.5-30 & 41-45)
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

N/A

22. Certification:

Richy Lemire 04/07/15
Signature of Certified Well Contractor Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636**

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/13/15 Well ID# OW-413 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4941 N -79.7172 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: 27 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 14.1 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

12. Well construction method: auger

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

Table with columns: FROM, TO, DESCRIPTION. Rows show N/A for both zones.

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

Table with columns: FROM, TO, DIAMETER, THICKNESS, MATERIAL. Row shows N/A for all fields.

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

Table with columns: FROM, TO, DIAMETER, THICKNESS, MATERIAL. Row shows 0 to 16.7 ft, 2 in, Sch. 40, PVC.

17. SCREEN

Table with columns: FROM, TO, DIAMETER, SLOT SIZE, THICKNESS, MATERIAL. Row shows 16.7 to 26.7 ft, 2 in, 0.010, Sch. 40, PVC.

18. GROUT

Table with columns: FROM, TO, MATERIAL, EMPLACEMENT METHOD & AMOUNT. Rows show Neat Cement, Bentonite, and N/A.

19. SAND/GRAVEL PACK (if applicable)

Table with columns: FROM, TO, MATERIAL, EMPLACEMENT METHOD. Row shows 13 to 27 ft, #2 Silica Sand, wash.

20. DRILLING LOG (attach additional sheets if necessary)

Table with columns: FROM, TO, DESCRIPTION. Rows show depth intervals and soil types like Silty Sand and PWR.

21. REMARKS

N/A

22. Certification:

Signature of Richy Lemire

04/07/15

Signature of Certified Well Contractor

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program, 1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, etc.)

3. Well Use (check well use):

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

4. Date Well(s) Completed: 3/25/15 **Well ID#:** OW-414 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4933

N

-79.7160

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: 29.5 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 22.4 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A **Method of test:** N/A

13b. Disinfection type: N/A **Amount:** N/A

For Internal Use ONLY:

14. WATER ZONES					
FROM	TO	DESCRIPTION			
N/A ft.	N/A ft.	N/A			
N/A ft.	N/A ft.	N/A			
15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	
N/A ft.	N/A ft.	N/A in.	N/A	N/A	
16. INNER CASING OR TUBING (geothermal closed-loop)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	
0 ft.	14.2 ft.	2 in.	Sch. 40	PVC	
N/A ft.	N/A ft.	N/A in.	N/A	N/A	
17. SCREEN					
FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
14.2 ft.	29.2 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A
18. GROUT					
FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT		
0 ft.	10 ft.	Neat Cement	Tremie		
10 ft.	12 ft.	Bentonite	Pour & Hydrate		
N/A ft.	N/A ft.	N/A	N/A		
19. SAND/GRAVEL PACK (if applicable)					
FROM	TO	MATERIAL	EMPLACEMENT METHOD		
12 ft.	29.5 ft.	#2 Silica Sand	wash		
N/A ft.	N/A ft.	N/A	N/A		
20. DRILLING LOG (attach additional sheets if necessary)					
FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)			
0 ft.	3 ft.	Fill: Silty Sand			
3 ft.	18 ft.	Fill: Ash			
18 ft.	23.5 ft.	Silty Sandy Gravel			
23.5 ft.	30 ft.	PWR			
ft.	ft.				
ft.	ft.				
ft.	ft.				
21. REMARKS					
N/A					
22. Certification:					
 Signature of Certified Well Contractor					04/07/15 Date
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 Resources, Information Processing Unit, 1617 Mail Service Center, Raleigh, NC 27699-1617					
24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program, 1636 Mail Service Center, Raleigh, NC 27699-1636					
24c. For Water Supply & Injection Wells:					
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.					

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/10/15 Well ID# OW-415 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4939

N

-79.7137

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: 24 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 14.05 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	7.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
7.7 ft.	17.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	4 ft.	Neat Cement	Tremie
4 ft.	6 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
6 ft.	24 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	8.5 ft.	Silty Sand
8.5 ft.	13.5 ft.	PWR
13.5 ft.	18.5 ft.	Silty Sand
18.5 ft.	24.6 ft.	PWR
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

N/A

22. Certification:

Richy Lemire
Signature of Certified Well Contractor

04/07/15

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/11/15 Well ID# OW-416 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4931 N -79.7149 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: 32.5 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 24.9 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	18.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
18.7 ft.	28.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	15 ft.	Neat Cement	Tremie
15 ft.	17 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
17 ft.	32.5 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	5 ft.	Fill: Sandy Silt
5 ft.	18.5 ft.	Silty Sand / Sandy Silt
18.5 ft.	32.5 ft.	PWR
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

N/A

22. Certification

 Richy Lemire 04/07/15
Signature of Certified Well Contractor Date

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 INSTRUCTIONS

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

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

24b. **For Injection Wells ONLY:** 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Stefan Smith

Well Contractor Name

3576-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 4/1/15 Well ID# OW-417 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4964 N -79.7199 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: 34 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 24.1 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

12. Well construction method: auger

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	18.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
18.7 ft.	33.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	15 ft.	Neat Cement	Tremie
15 ft.	17 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
17 ft.	34 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	8.5 ft.	Silty Sand
8.5 ft.	13.5 ft.	PWR
13.5 ft.	23.5 ft.	Silty Sand
23.5 ft.	34 ft.	PWR
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

N/A

22. Certification:


Signature of Certified Well Contractor

04/07/15

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells:

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.

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Richy Lemire

Well Contractor Name

2593-A

NC Well Contractor Certification Number

SAEDACCO

Company Name

2. Well Construction Permit #: N/A

List all applicable well permits (i.e. County, State, Variance, Injection, 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: 3/31/15 Well ID# OW-419 S

5a. Well Location:

Duke Energy-Dan River

N/A

Facility/Owner Name

Facility ID# (if applicable)

900 S. Edgewood Rd, Eden, NC

Physical Address, City, and Zip

Rockingham

798908886870

County

Parcel Identification No. (PIN)

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

36.4956 N -79.7174 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: 31 (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 23.2 (ft.)

If water level is above casing, use "+"

11. Borehole diameter: 7 (in.)

12. Well construction method: auger

(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) N/A Method of test: N/A

13b. Disinfection type: N/A Amount: N/A

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
N/A ft.	N/A ft.	N/A
N/A ft.	N/A ft.	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
N/A ft.	N/A ft.	N/A in.	N/A	N/A

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	15.7 ft.	2 in.	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
15.7 ft.	30.7 ft.	2 in.	0.010	Sch. 40	PVC
N/A ft.	N/A ft.	N/A in.	N/A	N/A	N/A

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	12 ft.	Neat Cement	Tremie
12 ft.	14 ft.	Bentonite	Pour & Hydrate
N/A ft.	N/A ft.	N/A	N/A

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
14 ft.	31 ft.	#2 Silica Sand	wash
N/A ft.	N/A ft.	N/A	N/A

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	5 ft.	Fill: Sandy Silt
5 ft.	8.5 ft.	Silty Sand
8.5 ft.	31.1 ft.	PWR
ft.	ft.	

21. REMARKS

N/A

22. Certification:

Richy Lemire

Signature of Certified Well Contractor

04/07/15

Date

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 INSTRUCTIONS

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

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

24b. For Injection Wells ONLY: 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 Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636**

24c. For Water Supply & Injection Wells:

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.