NORTH CAROLINA DEPARTMENT OF NATURAL RESOURCES AND COMMUNITY DEVELOPMENT
DIVISION OF ENVIRONMENTAL MANAGEMENT - GROUNDWATER SECTION
P.O. BOX 27687 - RALEIGH, N.C. 27611, PHONE (919) 733-5083

FOR OFFICE USE ONLY 164803
Quad. No. _____ Serial No. _____
Lat. _____ Long. _____ Pc _____
Minor Basin _____
Basin Code _____
Header Ent. _____ GW-1 Ent. _____

WELL CONSTRUCTION RECORD MW-9

DRILLING CONTRACTOR Groundwater Protection Inc.
DRILLER REGISTRATION NUMBER 1105

STATE WELL CONSTRUCTION PERMIT NUMBER: WM 0400140

1. WELL LOCATION: (Show sketch of the location below)
Nearest Town: Greensboro
4141 Spring Garden Street
(Road, Community, or Subdivision and Lot No.)

County: Guilford

2. OWNER Exxon Company USA
ADDRESS PO Box 30451 (Street or Route No.)
Charlotte (City or Town) NC (State) 28230 (Zip Code)

3. DATE DRILLED 12/6/95 USE OF WELL monitor
4. TOTAL DEPTH 30' CUTTINGS COLLECTED ☐ Yes ☒ No
5. DOES WELL REPLACE EXISTING WELL? ☐ Yes ☒ No
6. STATIC WATER LEVEL: 20.6 FT. ☐ above ☒ below TOP OF CASING,
TOP OF CASING IS 0 FT. ABOVE LAND SURFACE.
7. YIELD (gpm): — METHOD OF TEST —
8. WATER ZONES (depth):
9. CHLORINATION: Type _____ Amount _____

10. CASING:

	Depth From	Depth To	Diameter	Wall Thickness or Weight/Ft.	Material
	0	15	2"	SCH 40	PVC

11. GROUT:

	Depth From	Depth To	Material	Method
	0	11	cement	pour

12. SCREEN:

	Depth From	Depth To	Diameter	Slot Size	Material
	15	30	2"	.01 in.	PVC

13. GRAVEL PACK:

	Depth From	Depth To	Size	Material
	13	30	medium	sand

14. REMARKS: Bentonite seal 11-13 ft.

DRILLING LOG

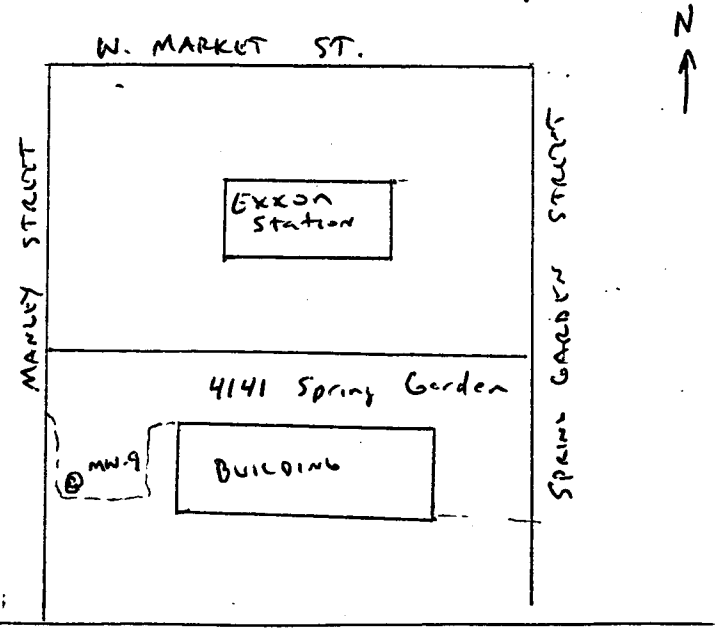
Depth From	Depth To	Formation Description
0	16	Orange-red silty clay
16	30	Orange-red clayey silt saprolite w/relic structure

If additional space is needed use back of form.

RECEIVED N.C. Dept. of EHNR JAN 31 1996 Winston-Salem Regional Office

RECEIVED EHNR DEM. GROUND WATERS SEC. 95 DEC 22 AM 10:56

LOCATION SKETCH
(Show direction and distance from at least two State Roads, or other map reference points)



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

SIGNATURE OF CONTRACTOR OR AGENT _____ DATE 12/18/95

GW-1 Revised 11/84 Submit original to Division of Environmental Management and copy to well owner.