

WELL ABANDONMENT RECORD WELL CONTRACTOR Paradigm Drilling
 WELL CONTRACTOR CERTIFICATION # 2393

1. WELL USE (Check Applicable Box): Residential Municipal Industrial Agricultural Monitoring
 Recovery Heat Pump Water Injection Other If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
 Nearest Town: Wilson County Wilson
Wilson County Landfill (Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No. _____

3. OWNER: Wilson County Solid Waste Mgt
PO Box 1728

4. ADDRESS: Wilson, NC 27894

5. TOPOGRAPHY: draw, slope, hilltop, valley, flat (circle one)

6. TOTAL DEPTH: 15 DIAMETER 2"

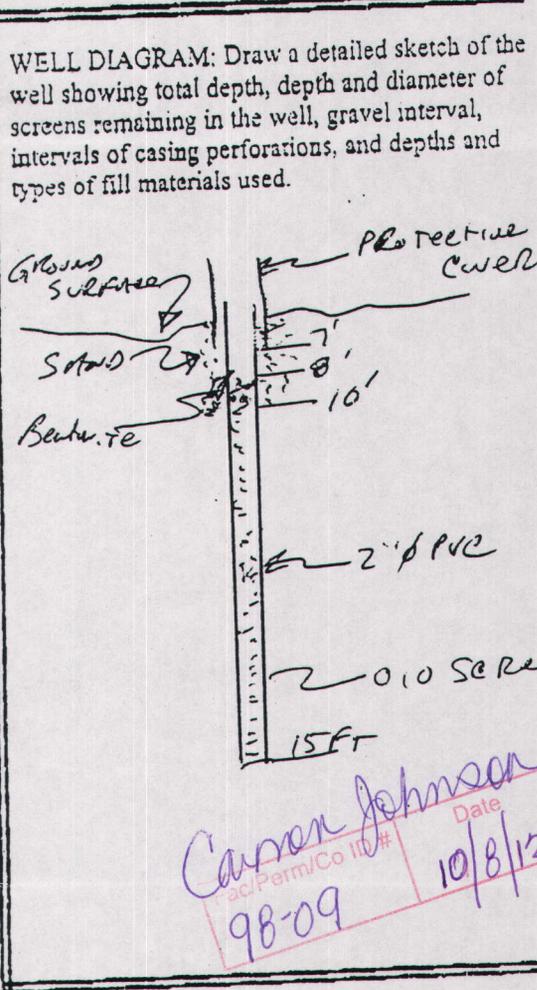
7. CASING REMOVED:
 feet NA diameter _____

8. DISINFECTION: NA
 (Amount of 70% hypochlorite used:)

9. SEALING MATERIAL:
 Neat Cement bags of cement 1 Sand Cement bags of cement _____
 gallons of water 6 gallons of water _____
 Other Type material 5 LBS Bentonite
 Amount _____

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
fill

11. DATE WELL ABANDONED 2 June 04



Cameron Johnson
 Fac/Permi/Co ID# 98-09 Date 10/8/12 Doc ID# _____
 DIN _____

I do hereby certify that this well was abandoned in accordance with 15A NCAC 2C, well construction standards, and that a copy of the record has been provided to the well owner.

Signature of person abandoning the well Geo L. Butler Date June 7, 04

WELL LOCATION: Draw a location sketch on the reverse of this sheet, showing the direction and distance of the well to at least two (2) nearby reference points such as roads, intersections and streams. Identify roads with State Highway road identification numbers.

Submit original to the Division of Water Quality, Groundwater Section, one copy to the owner within 30 days from completion of abandonment.