WELL ABANDONMENT RECORD

WELL ABANDONMENT RECORD

North Carolina Department of Environment and Natural Resources- Division of Water Quality

WELL CONTRACTOR CERTIFICATION #_____

1. WELL CONTRACTOR:

_____
Well Contractor (Individual) Name

_____
Well Contractor Company Name

STREET ADDRESS _____

_____
City or Town State Zip Code

(_____) - _____
Area code - Phone number

2. WELL INFORMATION:

SITE WELL ID # (if applicable)_____

STATE WELL PERMIT # (if applicable)_____

COUNTY WELL PERMIT # (if applicable)_____

DWQ or OTHER PERMIT # (if applicable)_____

WELL USE (Check applicable use): ☐ **Monitoring** ☐ **Residential**

☐ **Municipal/Public** ☐ **Industrial/Commercial** ☐ **Agricultural**

☐ **Recovery** ☐ **Injection** ☐ **Irrigation**

☐ Other (list use) _____

3. WELL LOCATION:

COUNTY_____ QUADRANGLE NAME _____

NEAREST TOWN: _____

_____
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:

☐ Slope ☐ Valley ☐ Flat ☐ Ridge ☐ Other_____
(Check appropriate setting)

LATITUDE ___ ___ _____

LONGITUDE ___ ___ _____

May be in degrees, minutes, seconds, or in a decimal format

Latitude/longitude source: ☐ **GPS** ☐ **Topographic map**

(Location of well must be shown on a USGS topo map and attached to this form if not using GPS.)

4a. FACILITY- The name of the business where the well is located. Complete 4a and4b. (If a residential well, skip 4a; complete 4b, well owner information only.)

FACILITY ID #(if applicable) _____

NAME OF FACILITY_____

STREET ADDRESS _____

_____
City or Town State Zip Code

4b. CONTACT PERSON/WELL OWNER:

NAME _____

STREET ADDRESS_____

5. WELL DETAILS:

a. Total Depth: _____ ft. Diameter:_____ in.

b. Water Level (Below Measuring Point): _____ ft.

Measuring point is _____ ft. above land surface.

6. CASING: Length Diameter

a. Casing Depth (if known): _____ ft. _____ in.

b. Casing Removed: _____ ft. _____ in.

7. DISINFECTION: _____

(Amount of 65%-75% calcium hypochlorite used)

8. SEALING MATERIAL:

Neat Cement

Cement _____ lb.
Water_____ gal.

Sand Cement

Cement_____ lb.
Water_____ gal.

Bentonite

Bentonite lb.

Type: ☐ Slurry ☐ Pellets

Water_____ gal.

Other

Type material _____

Amount _____

9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:

_____
_____
_____
_____

10. WELL DIAGRAM: Draw a detailed sketch of the well on the back of this form showing total depth, depth and diameter of screens (if any) remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.

11. DATE WELL ABANDONED _____

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

_____ _____
SIGNATURE OF CERTIFIED WELL CONTRACTOR **DATE**

_____
SIGNATURE OF PRIVATE WELL OWNER ABANDONING THE WELL DATE
(The private well owner must be an individual who personally abandons his/her residential well in accordance with 15A NCAC 2C .0113.)

_____
PRINTED NAME OF PERSON ABANDONING THE WELL

Submit a copy to the owner and the original to the Division of Water Quality within 30 days.
Attn: Information Management, 1617 Mail Service Center – Raleigh, NC 27699-1617, Phone No. (919) 733-7015 ext 568.

Form GW-30
Rev. 5/06