

WELL CONSTRUCTION RECORD (GW-1)**1. Well Contractor Information:**

Well Contractor Name: Donnie Smith (Donald Smith)
35415 A
 NC Well Contractor Certification Number
 Company Name: Watkins Well Drilling

2. Well Construction Permit #: 4577141
 List all applicable well construction permits (i.e. UIC, County, State, Variance, 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: 5-27-26 Well ID# _____

5a. Well Location:

Facility/Owner Name: Joshua and Judith Robbins
 Facility ID# (if applicable): _____
3661 Sandy Creek Road Franklin NC 27025
 Physical Address, City, and Zip
Granville
 County: _____ Parcel Identification No. (PIN): Not stated on permit

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

36.17178 N 78.56726 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. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same construction, only 1 GW-1 is needed. Indicate TOTAL NUMBER of wells drilled: _____

9. Total well depth below land surface: 240 (ft.)
 For multiple wells list all depths if different (example- 3 @ 200' and 2 @ 100')

10. Static water level below top of casing: 30 (ft.)
 If water level is above casing, use "+"

11. Borehole diameter: 6 (in.)

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

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm): 15 Method of test: air lift

13b. Disinfection type: HTH Amount: 2 lb

For Internal Use Only:

14. WATER ZONES

FROM	TO	DESCRIPTION
75 ft.	85 ft.	10 GPM
210 ft.	220 ft.	5 GPM

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
1 ft.	68 ft.	6 1/2 in.	SDR 27	PVC

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

FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	ft.	in.		
ft.	ft.	in.		

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS
ft.	ft.	in.		
ft.	ft.	in.		

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD
0 ft.	20 ft.	Bentonite	Pour/hyd
ft.	ft.		11 bags
ft.	ft.		

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT
ft.	ft.		
ft.	ft.		

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, etc.)
0 ft.	55 ft.	Sand/clay
55 ft.	240 ft.	Blue Granite
ft.	ft.	
ft.	ft.	
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

3 ft + Pcs of steel at bottom of casing

22. Certification:

Signature of Certified Well Contractor: [Signature]
 Date: 5-27

By signing this form, I hereby certify that the well(s) was (were) constructed with 15A NCAC 02C .0100 or 15A NCAC 02C .0200 Well Construction Standards. 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. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

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

Division of Water Resources, Information Processing
 1617 Mail Service Center, Raleigh, NC 27699-1

24b. **For Injection Wells:** In addition to sending the form to above, also submit one copy of this form within 30 days of construction to the following:

Division of Water Resources, Underground Injection
 1636 Mail Service Center, Raleigh, NC 276

24c. **For Water Supply & Injection Wells:** In addition to the address(es) above, also submit one copy of this completion of well construction to the county health where constructed.