

WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR (INDIVIDUAL) NAME (print) Eric Sadorf CERTIFICATION # 3217
WELL CONTRACTOR COMPANY NAME U. S. Geological Survey, WRD, Raleigh N.C. PHONE # (919) 571-4000
STATE WELL CONSTRUCTION PERMIT# NA ASSOCIATED WQ PERMIT# NA
(if applicable) (if applicable)

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

2. WELL LOCATION:
Nearest Town: Camp Lejeune MCB County Onslow

(Street Name, Numbers, Community, Subdivision, Lot No., Zip Code)

Topographic/Land setting
 Ridge Slope Valley Flat
(check appropriate box)

Latitude/longitude of well location
N 34 37 44.2 W 077 25 30.8

3. OWNER: U. S. Marine Corp Base
Address Camp Lejeune, N.C.
(Street or Route No.)

(degrees/minutes/seconds)
Latitude/longitude source: GPS Topographic map
(check box)

City or Town State Zip Code
()- _____
Area code- Phone number

4. DATE DRILLED 11/07/03
5. TOTAL DEPTH: 18.5' BELOW LAND
6. DOES WELL REPLACE EXISTING WELL? YES NO
7. STATIC WATER LEVEL Below Top of Casing: 10.72 FT.
(Use "+" if Above Top of Casing)

DEPTH		DRILLING LOG
From	To	Formation Description
<u>0-2</u>	<u> </u>	<u>MEDIUM SILTY GRAY SAND</u>
<u>2-4</u>	<u> </u>	<u>SAME, CLAY BALLS</u>
<u>4-6</u>	<u> </u>	<u>SANDY TAN CLAY, FIRM DRY</u>
<u>6-8</u>	<u> </u>	<u>SANDY TAN CLAY MOIST</u>
<u>8-10</u>	<u> </u>	<u>SAME</u>
<u>10-12</u>	<u> </u>	<u>SANDY CLAY, TAN/BROWN</u>
<u>12-14</u>	<u> </u>	<u>SLIGHTLY SANDY CLAY, LT, TAN</u>
<u>14-16</u>	<u> </u>	<u>SAME</u>
<u>16-20</u>	<u> </u>	<u>NO CUTTINGS</u>

8. TOP OF CASING IS 2.40 FT. Above Land Surface*
*Top of casing terminated at/or below land surface requires a variance in accordance with 15A NCAC 2C .0118.
9. YIELD (gpm): 4.0 METHOD OF TEST _____
10. WATER ZONES (depth): 6.0' TO 20.0' BELOW LAND

LOCATION SKETCH
Show direction and distance in miles from at least two State Roads or County Roads. Include the road numbers and common road names.

11. DISINFECTION: Type NA Amount _____

12. CASING: _____ Wall Thickness _____

From 0.0 To 8.5 Ft. 2 Sch 40 Material PVC
From _____ To _____ Ft. _____ Sch _____ Material _____
From _____ To _____ Ft. _____ Sch _____ Material _____

13. GROUT: _____ Material _____ Method _____
From 0.0 To 6.0 Ft. Cement
From 6.0 To 8.0 Ft. Bentonite

14. SCREEN: _____ Material _____
From 8.5 To 18.5 Ft. 2 in. .010 in. PVC
From _____ To _____ Ft. _____ in. _____ in. _____

15. SAND/GRAVEL PACK: _____ Material _____
From 8.0 To 20.0 Ft. #2 Sand
From _____ To _____ Ft. _____ _____

16. REMARKS: LOCAL WELL NAME : OD/OD K-2 MW-3 USGS ID 343744077253101 Land Surface 24.49

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED 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 PERSON CONSTRUCTING THE WELL DATE