

**APPLICATION
REGISTRATION FOR WELL DRILLING CONTRACTOR**

1. Name of Applicant _____

2. Address _____

County _____ Telephone _____

Individual _____ Partnership _____ Corporation _____

3. State Driller Registration Number _____

4. Check one of the following: _____ New _____ Renewal _____ No longer in or intend to
drill in Edgecombe County

5. Certified by NWWA: ___ Yes _____ No _____ Category _____

6. Number (by type) of drill rigs to be operated under this registration:

_____ Air Rotary _____ Cable Tool _____ Jet _____ Auger _____ Core

_____ Mud Rotary _____ Boring _____ Drive _____ Other

7. Number (by type) of wells drilled in North Carolina in _____ (year).

_____ Domestic _____ Industrial _____ Public Supply _____ Other

8. Average depth of wells drilled _____ Average Casing Depth _____

Contractor Name & Title (print or type)

Signature of Contractor

Date