

HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT  
TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #: 1529-19-7397.000 Parcel #: 021529 9003 Application #: BRES1910-0023 Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

Applicant Name: B AND B ENTERPRISES  
Address: 57 WC Beasley Ln Coats, NC 27521

Type of Facility Served by Well: SFD

Sewage System: 25% Reduction Sys.

Permit Conditions: Location - 9007 NC 27 E BENSON, NC 27504

General Permit Conditions:

- Drinking water supply well construction must meet 15A NCAC 02C.100 rules
- The permitted drinking water supply well shall be located in accordance with the **SITE PLAN**
- **ANY ALTERATION** of the site of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit to revocation

Authorized State Agent [Signature] Date 03/12/2020

Grouting Inspection Witnessed \_\_\_\_\_ Date \_\_\_\_\_

Grouting self-certified by driller GW-1 provided?  Yes  No

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: 09/02/21 Application #: BRES1910-0023 Well Contractor: LARRY WILLIAMS JR.

Applicant Name: B AND B ENTERPRISES  
Address: 57 WC Beasley Ln Coats, NC 27521  
Directions to Site: 9007 NC 27 E BENSON, NC 27504

Use of Well: \_\_\_\_\_ Date Drilled: \_\_\_\_\_ Total Depth: \_\_\_\_\_ Replacement Well?  Yes  No  
Static Water Level: \_\_\_\_\_ Top of Casing is \_\_\_\_\_ in. above surface. Yield: \_\_\_\_\_ gpm at \_\_\_\_\_ ft.  
Disinfection: Type \_\_\_\_\_ Amount \_\_\_\_\_

Water Zone (depth)	Casing	Grout
From _____ To _____	From _____ To _____	From <u>0</u> To _____
From _____ To _____	Diameter: _____ Material: _____ Thickness: _____	Material: _____ Method: _____
From _____ To _____	From _____ To _____	From _____ To _____
	Diameter: _____ Material: _____ Thickness: _____	Material: _____ Method: _____
	From _____ To _____	From _____ To _____
	Diameter: _____ Material: _____ Thickness: _____	Material: _____ Method: _____

Inspector: \_\_\_\_\_ On Hold Date: \_\_\_\_\_ Release Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

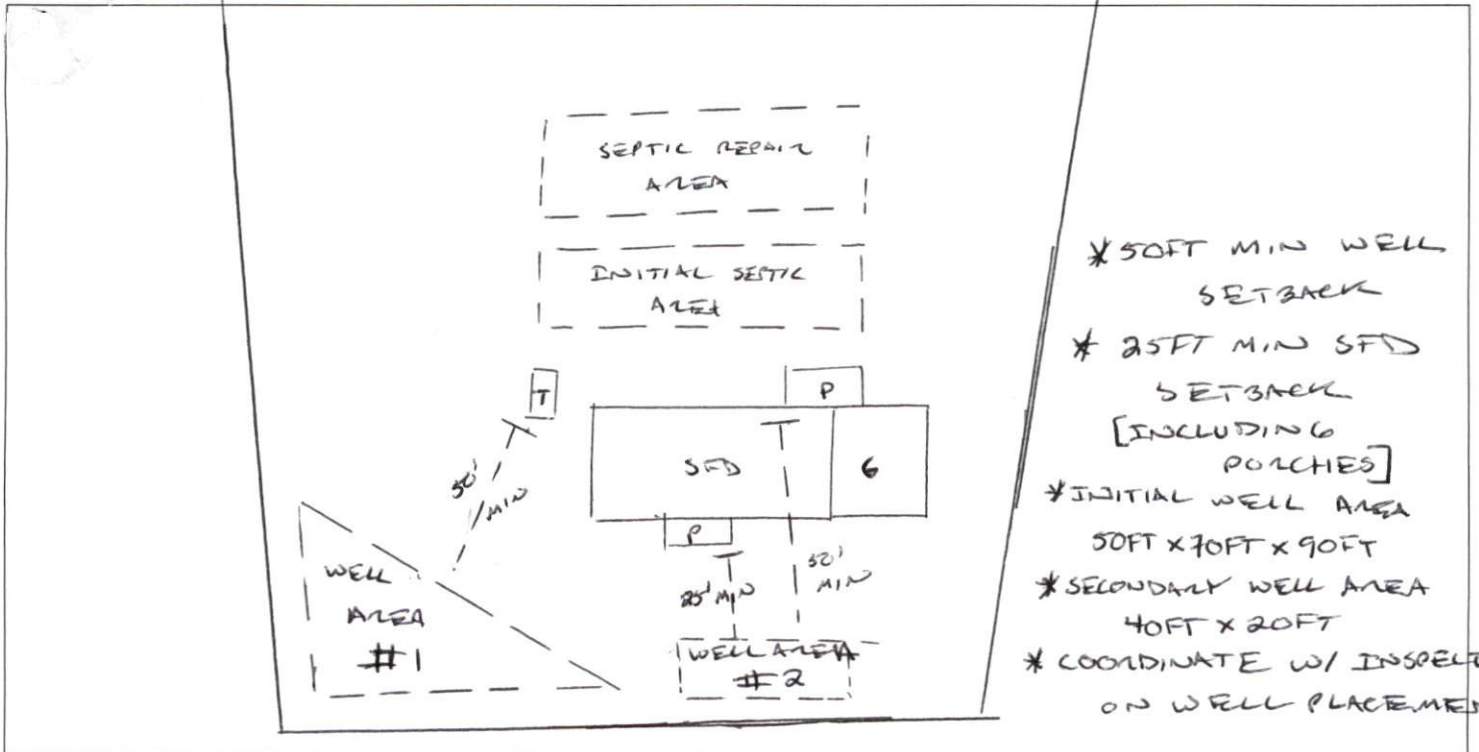
Well Head Information

Casing Height: 12.17 (above finished grade) Access Port:  Vent Stack:   
Well ID Tag:  Pump ID Tag:  Sampling Tap:  Backflow Preventer:   
Sample Taken?  Yes  No Well Head properly sealed:

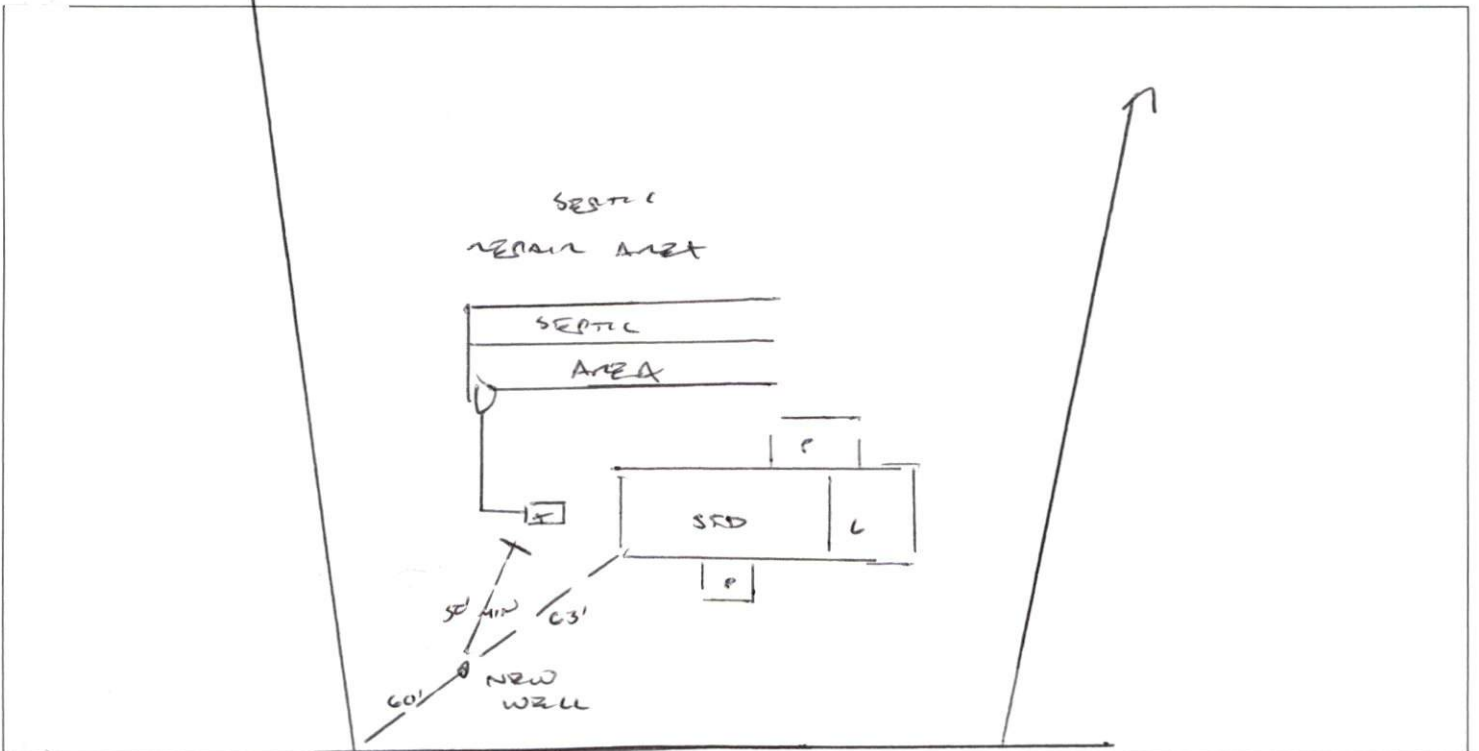
Remarks: DEFERRED FOR POWER  
Authorized State Agent [Signature] Date 09/02/2021

See Attachment for completion sketch

Well Construction Sketch



Completion Sketch



**1. Well Contractor Information:**

Larry Williford Jr  
 Well Contractor Name  
2863-A  
 NC Well Contractor Certification Number

Williford's Well Drilling  
 Company Name

**2. Well Construction Permit #:** Application # Bres1910-0023  
 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  Wells > 100,000 GPD

**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:** 6-28-21 Well ID# \_\_\_\_\_

**5a. Well Location:**

B's B Enterprises Facility ID# (if applicable) \_\_\_\_\_  
9007 NC 27 E Benson NC 27504  
 Physical Address, City, and Zip  
Harnett 152919 7397  
 County Parcel Identification No. (PIN)

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

35.396023 N - 78.591754 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:** 260 (ft.)  
 For multiple wells list all depths if different (example- 3@200' and 2@100')

**10. Static water level below top of casing:** 87 (ft.)  
 If water level is above casing, use "+"

**11. Borehole diameter:** 10 (in.)

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

**FOR WATER SUPPLY WELLS ONLY:**

**13a. Yield (gpm)** 30 Method of test: pumping  
**13b. Disinfection type:** HTH Amount: 1 cup

14. WATER ZONES					
FROM	TO	DESCRIPTION			
248 ft.	253 ft.	gray rock			
ft.	ft.				
15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	
+2 ft.	231 ft.	6 in.		Galvanize	
ft.	ft.				
16. INNER CASING OR TUBING (geothermal closed-loop)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	
ft.	ft.				
ft.	ft.				
17. SCREEN					
FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			
18. GROUT					
FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT		
0 ft.	20 ft.	Bentonite	11 bags - pour		
ft.	ft.				
ft.	ft.				
19. SAND/GRAVEL PACK (if applicable)					
FROM	TO	MATERIAL	EMPLACEMENT METHOD		
ft.	ft.				
ft.	ft.				
20. DRILLING LOG (attach additional sheets if necessary)					
FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)			
0 ft.	1 ft.	topsoil			
1 ft.	7 ft.	gray sandy clay			
7 ft.	19 ft.	tan clay			
19 ft.	47 ft.	black clay			
47 ft.	231 ft.	gray clay			
231 ft.	260 ft.	gray rock			
ft.	ft.				
21. REMARKS					

**22. Certification:**

Larry Williford Jr 6-28-21  
 Signature of Certified Well Contractor Date

By signing this form, I hereby certify that the well(s) was (were) constructed in accordance with 15A NCAC 02C .0100 or 15A NCAC 02C .0200 Well Construction Standards and that 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 construction info (add 'See Over' in Remarks Box). You may also attach additional pages if necessary.

**24. SUBMITTAL INSTRUCTIONS**

Submit this GW-1 within 30 days of well completion per the following:

**24a. For All Wells:** Original form to Division of Water Resources (DWR), Information Processing Unit, 1617 MSC, Raleigh, NC 27699-1617

**24b. For Injection Wells:** Copy to DWR, Underground Injection Control (IUC) Program, 1636 MSC, Raleigh, NC 27699-1636

**24c. For Water Supply and Open-Loop Geothermal Return Wells:** Copy to the county environmental health department of the county where installed

**24d. For Water Wells producing over 100,000 GPD:** Copy to DWR, CCPCUA Permit Program, 1611 MSC, Raleigh, NC 27699-1611