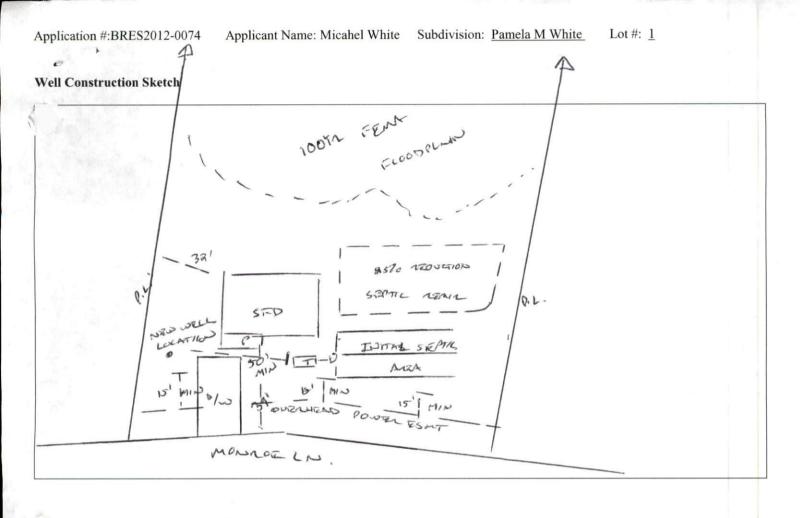
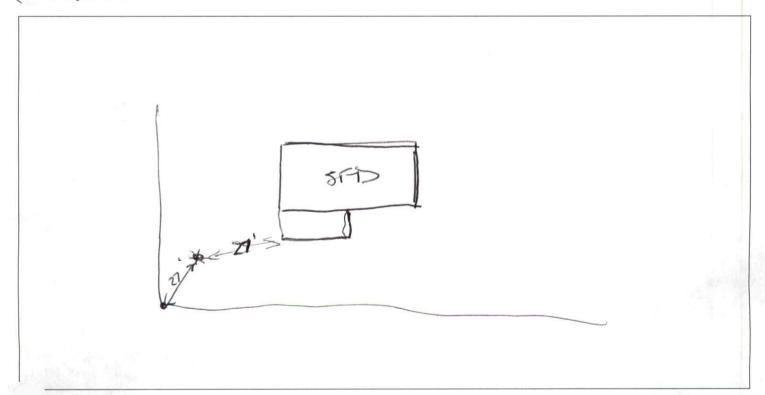
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #: <u>0598-42-0867.000</u> Parcel #: <u>070598 0019</u> A	pplication #: BRES2012-0074 Su	abdivision: Pamela M White	Lot #: 1
licant Name: Micahel White Licess: 112 Restonwood Dr Apex, NC 27539			
Type of Facility Served by Well: SFD			
Sewage System: 25% Reduction Sys.			
Permit Conditions: Location - 348 Monroe Ln. (US 421	<u>S.)</u>		
General Permit Conditions: • Drinking water supply well construction must meet • The permitted drinking water supply well shall be to any ALTERATION of the site of the site (include subject this Permit to revocation Authorized State Agent	located in accordance with the SIT	urtenance) or modification in	use of the well, may
Grouting Inspection Witnessed	Date No		
Grouting self-certified by driller GW-1 provide	ded? Yes No		
See attachment for construction sketch			
Date: Application #:BRES2012-0074 We licant Name: Micahel White Address: 112 Restonwood Dr Apex, NC 27539 Directions to Site: Location - 348 Monroe Ln. (US 421 Static Water Level: Top of Casing is Disinfection: Type Amount Water Zone (depth)	al Depth: Replaceme in. above surface. Yield: aterial: Thickness: aterial:		hod:
Inspector: On Hold Date: Relation Remarks: Well Head Information Casing Height: (above finished grade)	cess Port: Vent Stack inpling Tap: Ba irroperly sealed:	ackflow Preventer:	



Completion Sketch



WELL CONSTRUCTION R	ECORD (GW-1)	1 1/1 1100	THE UNION	971						
1. Well Contractor Information:										
Landon Phillips		14. WATE	R ZONES							
Well Contractor Name		FROM	TO	DESCRIP	TION					
3441A		75 "	80 1	00						
		ft.	fi		-41-5	OR LIN	ED /// an	nticable)	
NC Well Contractor Certification Number		15. OUTEI	TO TO	r multi-cased	wells)	THICK	NESS	MAT	ERIAL	
NW Poole Well and Pump	NW Poole Well and Pump Company		66 "	1 6	in.	1//	7_	Ca	alv	
Company Name			CASING OR	TUBING (ge	otherm	al closed	I-loop)	MATI	ERIAL	
2. Well Construction Permit #: BLE List oil applicable well construction permits (i.e.	UIC, County, State, Variance, etc.)	FROM ft.	TO ft	-	in.	THE	11600			
3. Well Use (check well use):		ft.	fe		in.					
Water Supply Well:		17. SCREE	N TO	DIAMETER	SLOT	TSIZE	ТНІСК	NESS	MATERIAL	
DAgricultural	□Municipal/Public	ft.	ft.	in.						
DGeothermal (Heating/Cooling Supply)	Residential Water Supply (single)	ft.	ft.	in.						
DIndustrial/Commercial	Residential Water Supply (shared)	18. GROUT								
Dirrigation	□Wells > 100,000 GPD	FROM	TO	MATERIA	-			T METE	IOD & AMOUNT	
Non-Water Supply Well:		O 11.	20 "	Schren	ite	P	bur			
Injection Wells	□Recovery	ft.	ft.			1				
Injection Well: □Aquifer Recharge	☐Groundwater Remediation	ft.	ft.							
☐ Aquifer Storage and Recovery	Salinity Barrier	19. SAND/O	RAVEL PAC	K (if applical			EMPLAC	EMENT	METHOD	
□ Aquifer Test	□Stormwater Drainage	ft.	ft.							
□Experimental Technology	□Subsidence Control	ft.	ft.							
Geothermal (Closed Loop)	□Tracer		NG LOG (att	ach additiona	sheets	if neces	sary)			
Geothermal (Heating/Cooling Return)	Other (explain under #21 Remarks)	FROM ft.	70 > ft.		TON (co	lor, harde	ess, soil/r	ock type,	grain size, etc.)	
			_	100	110					
4. Date Well(s) Completed: 5-11-23	Well ID#	2 ft.	30	10	4					
5a. Well Location:		50 n.	165 11.	-	ite					
Danela White		ft.	ft.							
acility/Owner Name	Facility ID# (if applicable)	ft.	ft.							
7118 M / 5	rwin nc 28339	ft.	ft,							
Physical Address, City, and Zip	recin rit = c · · ·	ft.	ft.							
16.4		21. REMAR	KS							
County	Parcel Identification No. (PIN)		U	sed harden	ed ste	el driv	e shoe.			
b. Latitude and longitude in degrees/mir	autes/seconds or decimal degrees:									
f well field, one lat/long is sufficient)		22. Certific	ition:							
35 35113 , 78	3.68481 "	1	and.	-				_		
70.70.10 N		1			_	-		5-1	11-23	
Is(are) the well(s): DPermanent or	□'l'emporary	Signature of Certified Well Contractor Date By signing this form, I hereby certify that the well(s) was (were) constructed in accordance is								
Is this a repair to an existing well:	Yes or DNo		C .0100 or 15	A NCAC 02C	.0200 1	Vell Con			n accordance was and that a co	
air under #21 remarks section or on the back of this form.		23. Site diagram or additional well details:								
For Geoprobe/DPT or Closed-Loop Geo instruction, only 1 GW-1 is needed. Indica	othermal Wells having the same ate TOTAL NUMBER of wells	You may use the back of this page to provide additional well construction into (add 'See Over' in Remarks Box). You may also attach additional pages if necessary								
illed: 1		24. SUBMITTAL INSTRUCTIONS								
Total well depth below land surface: r multiple wells list all depths if different (examp	16.5 (ft.)	Submit this GW-1 within 30 days of well completion per the following:								
Static water level below top of easing:	2 .	24a. For All Wells: Original form to Division of Water Resources (DWf Information Processing Unit, 1617 MSC, Raleigh, NC 27699-1617								
Borchole diameter: 6	_(in.)	24b. For Injection Wells: Copy to DWR, Underground Injection Control (IUI-Program, 1636 MSC, Raleigh, NC 27699-1636								
. Well construction method: Rotary auger, rotary, cable, direct push, etc.)		24c. For Water Supply and Open-Loop Geothermal Return Wells: Copy to it county environmental health department of the county where installed								
OR WATER SUPPLY WELLS ONLY:	BLOW	24d. For Water Wells producing over 100,000 GPD: Copy to DWR, CCPCU Permit Program, 1611 MSC, Raleigh, NC 27699-1611								
Sa. Yield (gpm) ZO Me Sb. Disinfection type: HTH	Amount: BLOW 1 lb.						esti T			
no. Manuection type:	Amount:									