

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

PIN #: Parcel #: Application #: Subdivision: \_\_\_\_\_ Lot #:

*Bres 2312-0011*

Applicant Name: *Jorge M. C. Serrano*  
Address: *W H Mclean Ln (SR 2026)*

Type of Facility Served by Well: SFD *28'x60' DWMH*

Sewage System: *25% reduction*

Permit Conditions: Well to be drilled in Well Area

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 *M. H. News* Date *1-4-24* Expiration Date *1-4-29*  
 \* Construction Authorization Expires within five years of issue

Grouting Inspection Witnessed \_\_\_\_\_ Date \_\_\_\_\_  
 Grouting self-certified by driller GW-1 provided?  Yes  No

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: *Bres 2312-0011* Application #: \_\_\_\_\_ Well Contractor: \_\_\_\_\_

Applicant Name: *Jorge M. C. Serrano*  
Address: *W H Mclean Ln (SR 2026)*  
Directions to Site: \_\_\_\_\_

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 \_\_\_\_\_

<u>Water Zone (depth)</u>	<u>Casing</u>	<u>Grout</u>
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: \_\_\_\_\_ (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: \_\_\_\_\_

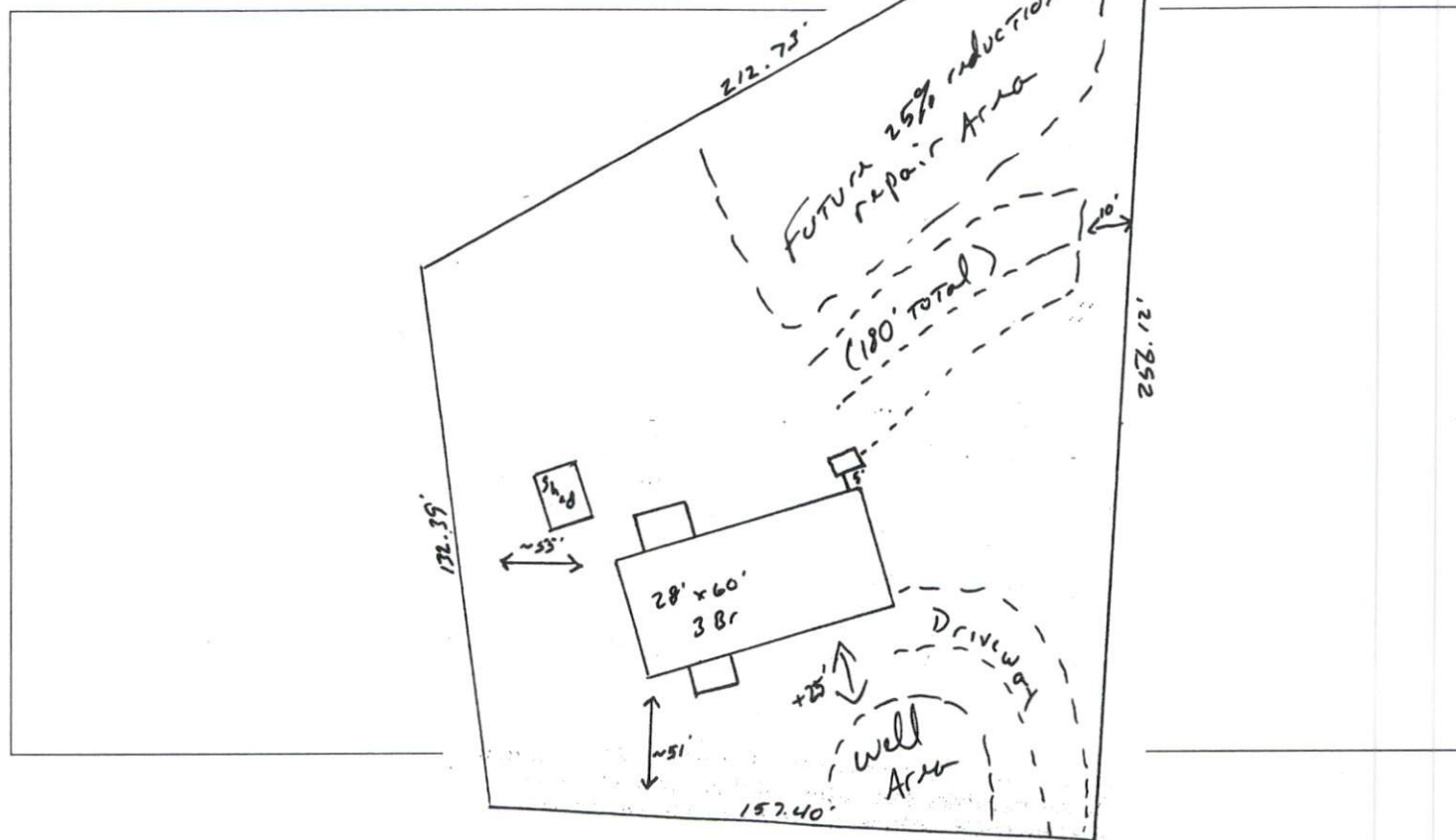
Remarks: \_\_\_\_\_

Authorized State Agent \_\_\_\_\_ Date \_\_\_\_\_

See Attachment for completion sketch

Application #: Applicant Name: Subdivision: Lot #:  
Bra 12312-0011 Jorge M.C. Serrano

### Well Construction Sketch



### Well Completion Sketch

