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

PIN # · 0614-79-5289.000

Parcel #:

Application #: BRES2507-0094

Subdivision:

Lot #: Applicant Name: WHITE JEFFERY EUGENE & WHITE ANGELA KAYE Address: 428 CLARKS CORNER RD HOLLY SPRINGS, NC 27540 Type of Facility Served by Well: DW 32' x 66' Sewage System: Septic 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

* Construction Authorization Expires within five years of issue

Expiration Date 8-29-30

* Construction Authorization Expires within five years of issue **Grouting Inspection Witnessed** GW-1 provided? Yes No Grouting self-certified by driller See attachment for construction sketch WELL CERTIFICATE OF COMPLETION Date: Application #: BRES2507-0094 Well Contractor: Applicant Name: WHITE JEFFERY EUGENE & WHITE ANGELA KAYE Address: 428 CLARKS CORNER RD HOLLY SPRINGS, NC 27540 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 Water Zone (depth) Casing From ____ To _ From ____ To ___ From ____ To ____ Diameter: ____ Material: ____ Thickness: ____ From ____ To Material: ____ Method: ___ From ____ To ___ From To From ____ To ____ Diameter: ____ Material: ____ Thickness: ____ Material: ____ Method: ___ From To From To Diameter: ____ Material: ____ Thickness: ____ Material: ____ Method: On Hold Date: ____ Release Date: ____ Inspector: Remarks: Well Head Information

 Well Head Information

 Casing Height: _____ (above finished grade)
 Access Port: _____ Vent Stack: ____

 Well ID Tag: _____ Pump ID Tag: _____ Sampling Tap: _____ Backf

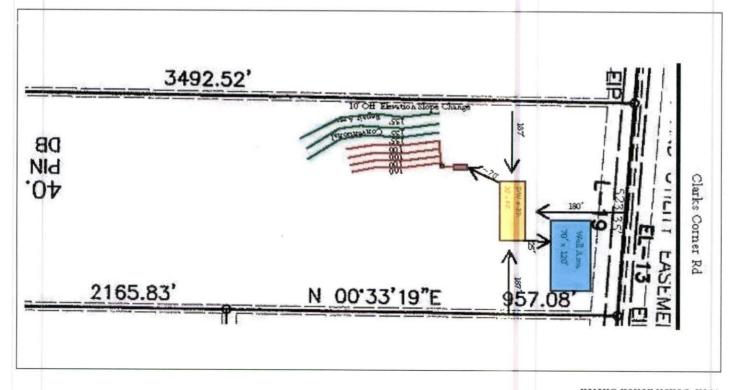
 Backflow Preventer: Sample Taken? Yes No Well Head properly sealed: Remarks: Authorized State Agent

See Attachment for completion sketch

WHITE JEFFE

BRES2507-006

Well Construction Sketch



Well Completion Sketch

