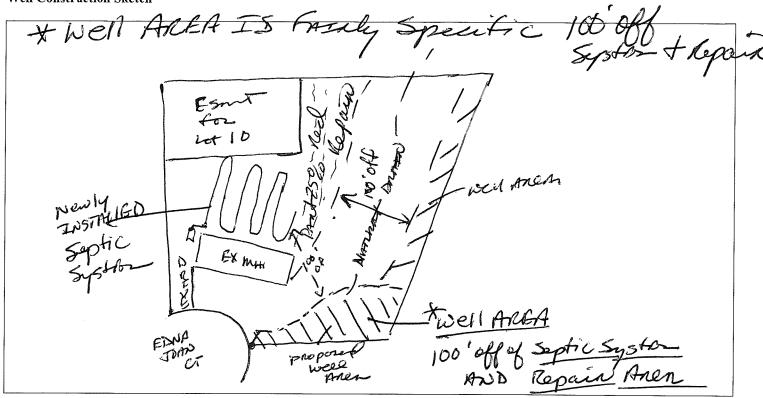
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #:	Parcel #:	Application #: <u>12-5-30028R</u>	Subdivision: Walts Crossing	Lot #: 11
	ie: <u>Roxanne Helen</u> dna John Ct Dunn N	•		
Type of Facility	y Served by Well:	<u>SFD</u>		
Sewage System	n: 25% Reduction			
Permit Condition	ons:			
The permANY AI subject the	g water supply well nitted drinking wate LTERATION of th his Permit to revoca	te site of the site (including location	accordance with the SITE PLAT ion of structures and appurtenance	N e) or modification in use of the well, may
Authorized Sta	ate Agent	es & Manhant	Date 12-4-12	
Grouting Inspe	ection Witnessed	er GW-1 provided?	Date	
See attachment	for construction sk	etch		
		WELL CERTIFIC	CATE OF COMPLETION	
Date:	Application #:			
Static Water Le	te:	Top of Casing is in. abov	Replacement Well? /e surface. Yield: gpm	☐ Yes ☐ No at ft.
Water Zone (d From T From T From T	o	Casing From To Material: From To Diameter: Material: From To Diameter: Material: Diameter: Material:	Thickness: M Thickness: M Thickness: M	Grout rom 0 To Iaterial: Method: rom To Iaterial: Method: rom To Iaterial: Method:
Inspector:	_ On Hole	Date: Release Date:		
Remarks:	_			
Well ID Tag: _	(above finis Pump II	hed grade) Access Port: D Tag: Sampling Tap Well Head properly sea	: Backflow I	Preventer:
Remarks:	_			
Authorized Sta	te Agent		Date	

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch					