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

PIN #: 0528-26-3669.000 Parcel #: 130518012202   Application #: 08-5-20181   Subdivision: _____   Lot #: 2

Applicant Name: David Gillette
Address: 975 Tim Currin Rd. Lillington, N.C. 27546

Type of Facility Served by Well: SFD

Sewage System: Conventional

Permit Conditions: Well to be a minium of 100 ft. from setic system and repair area and 25 ft. from house

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 _Bryan Mc*in R.S._   **Date** 11/18/2008

Grouting Inspection Witnessed _Bryan Mc*in R.S._   **Date** 11/20/2008
☐ Grouting self-certified by driller   GW-1 provided? ☒ Yes ☐ No

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: 11/25/2008   Application #: 08-5-20181   Well Contractor: Jackson Well Drilling

Applicant Name: David Gillette
Address: 975 Tim Currin Rd. Lillington, N.C. 27546
Directions to Site: 27 West to Tim Currin Rd. turn right go 1.5 miles turn left at 975 mailbox

Use of Well: SFD   Date Drilled: 11/20/2008 Total Depth: 180 ft.   Replacement Well? ☐ Yes ☒ No
Static Water Level: 22 ft   Top of Casing is 16 in. above surface.   Yield: 30 gpm at 160 ft.
Disinfection: Type HTH Amount 12 oz.

Water Zone (depth)	**Casing**	**Grout**
From 140 To 142	From 0 To 74	From 0 To 21
From 161 To 163	Diameter: 6 in Material: PVC Thickness: SR 21	Material: sand Method: pouring
From 170 To 172	From 74 To 95	From _____ To _____
	Diameter: 6 in Material: galv. Thickness: .188	Material: _____ Method: _____
	From _____ To _____	From _____ To _____
	Diameter: _____ Material: _____ Thickness: _____	Material: _____ Method: _____

Inspector: BM   On Hold Date: _____   Release Date: 11/25/2008

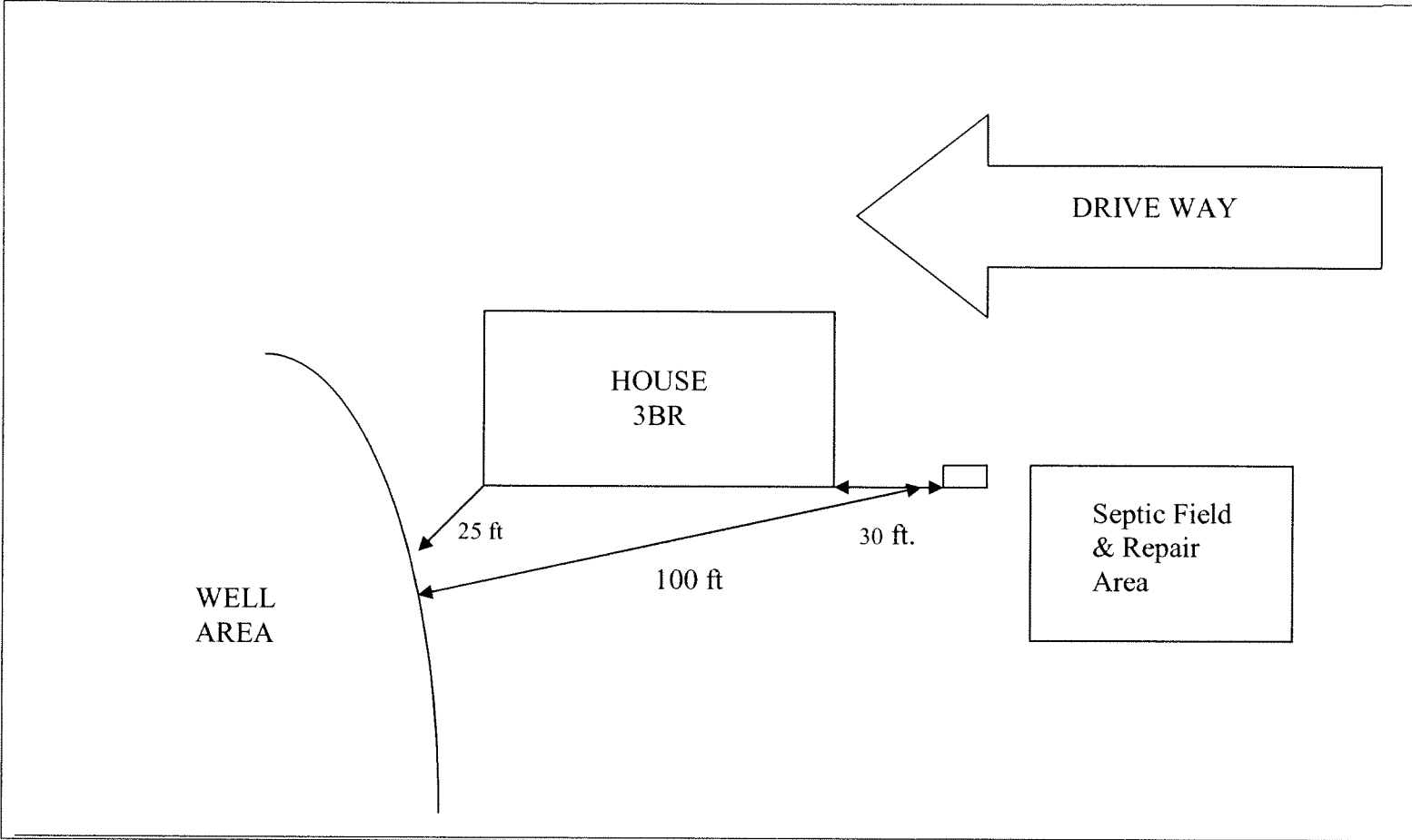Remarks: _____

Well Head Information
Casing Height: 16 in (above finished grade) Access Port: _____   Vent Stack: yes
Well ID Tag: yes Pump ID Tag: yes   Sampling Tap: yes   Backflow Preventer: yes
Sample Taken? ☐ Yes ☒ No   Well Head properly sealed: yes

Remarks: _____

Authorized State Agent _Bryan Mc*in, R.S._   Date 11/25/2008

See Attachment for completion sketch

Well Construction Sketch

DRIVE WAY

HOUSE
3BR

25 ft

30 ft.

100 ft

WELL
AREA

Septic Field
& Repair
Area

Well Completion Sketch

DRIVE WAY

HOUSE
3BR

25 ft

30 ft.

100 ft

WELL
LOCATION

Septic Field
& Repair
Area