

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

PIN #: 0546-75-6999.000 Parcel #: _____ Application #: 13-5-31330 Subdivision: _____ Lot #: _____

Applicant Name: McLean Chapel Partners
Address: P.O. Box 2611 Raleigh, NC 27602

Type of Facility Served by Well: SFD

Sewage System: Pump to 25% Reduction System

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 _____ Date _____

Grouting Inspection Witnessed _____ Date _____

Grouting self-certified by driller GW-1 provided? Yes No

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: 6/28/2013 Application #: 13-5-31330 Well Contractor: southern well drilling

Applicant Name: McLean Chapel Partners
Address: P.O. Box 2611 Raleigh, NC 27602
Directions to Site: 401 S to McLean Chapel lot on right

Use of Well: sfd Date Drilled: 6/19/13 Total Depth: 240 ft Replacement Well? Yes No
Static Water Level: 205 ft Top of Casing is 12 in. above surface. Yield: _____ gpm at _____ ft.
Disinfection: Type hth Amount _____

Water Zone (depth)

From _____ To 205
From _____ To _____
From _____ To _____

Casing

From 0 To 150
Diameter: 6 in Material: pvc Thickness: _____
From _____ To _____
Diameter: _____ Material: _____ Thickness: _____
From _____ To _____
Diameter: _____ Material: _____ Thickness: _____

Grout

From 0 To 20 ft
Material: portland Method: pour
From _____ To _____
Material: _____ Method: _____
From _____ To _____
Material: _____ Method: _____

Inspector: bm On Hold Date: _____ Release Date: 6/28/2013

Remarks: _____

Well Head Information

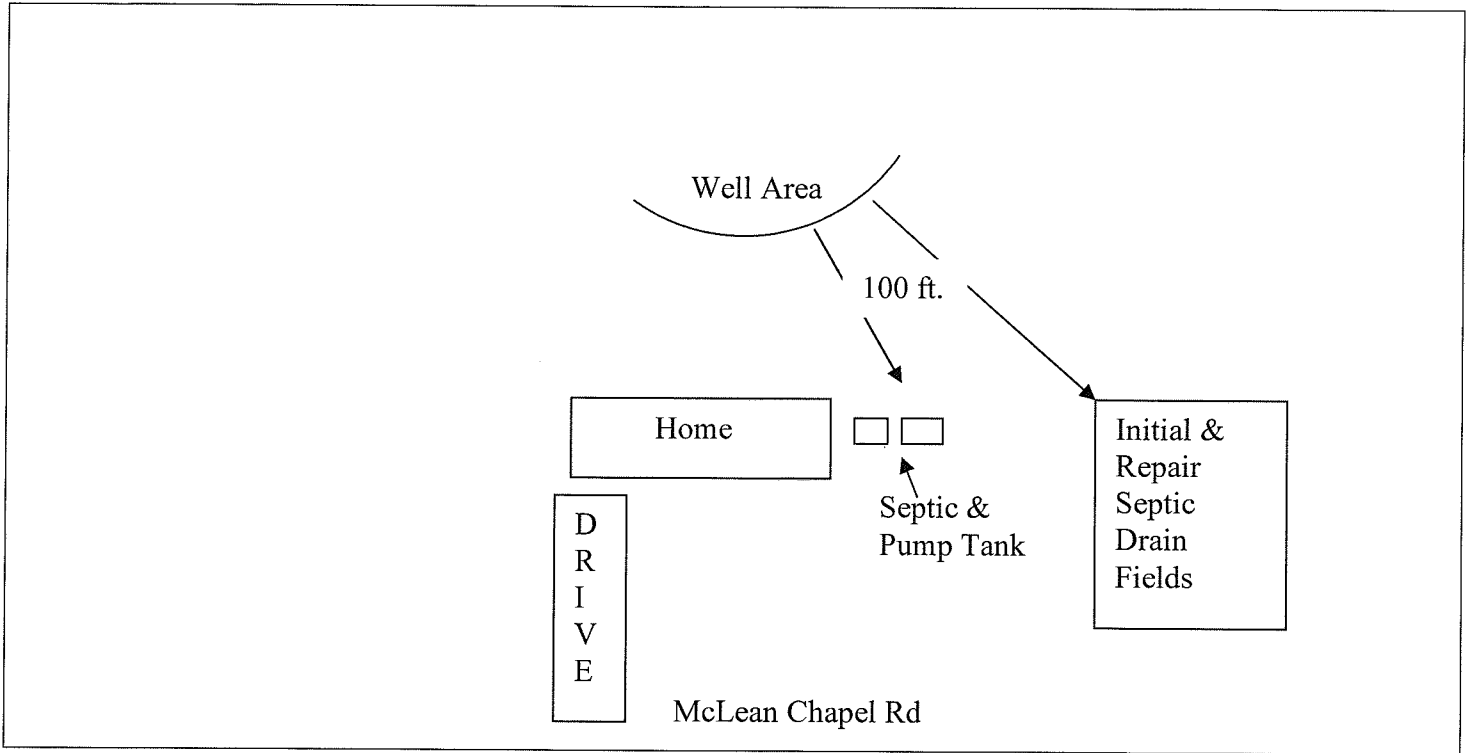
Casing Height: 12 in (above finished grade) Access Port: yes Vent Stack: yes
Well ID Tag: yes Pump ID Tag: yes Sampling Tap: yes Backflow Preventer: _____
Sample Taken? Yes No Well Head properly sealed: yes

Remarks: _____

Authorized State Agent Bryan McLean, R.E.H.S. Date 6/28/2013

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch

