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

PIN #: 1527-72-7914000  Parcel #: 021527-0117  Application #: 08-5-20816RR  Subdivision: _____  Lot #: _____

Applicant Name: Salvador Royal
Address: P.O. Box 1634 Dunn, N.C. 28334

Type of Facility Served by Well: SFD

Sewage System: Pump ot 25% Reduction

Permit Conditions: Well casing to be a minium of 18 inches above ground surface and a 4 inch slab that slopes away and extends 3 ft. from casing

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

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## WELL CERTIFICATE OF COMPLETION

Date: 7/9/2009  Application #: 08-5-20816RR      Well Contractor: Larry Williford

Applicant Name: Salvador Royal
Address: P O Box 1634 Dunn, NC 28334
Directions to Site: 421 to Dunn turn left on 301 go to Lane Rd turn left go to Lee ln turn right go to end to road, house on left

Use of Well: sfd Date Drilled: 6/24/09      Total Depth: 33 ft      Replacement Well? ☐ Yes ☒ No
Static Water Level: 28 ft      Top of Casing is 12 in. above surface.      Yield: 7 gpm at _____ ft.
Disinfection: Type hth  Amount 2 cups

| **Water Zone (depth)** | **Casing** | **Grout** |
|---|---|---|
| From 28 To 33 | From 0 To 28 | From 0 To 20 |
| From _____ To _____ | Diameter: 2 in Material: pvc Thickness: _____ | Material: cement Method: pour |
| From _____ To _____ | From _____ To _____ | From _____ To _____ |
| | Diameter: _____ Material: _____ Thickness: _____ | Material: _____ Method: _____ |
| | From _____ To _____ | From _____ To _____ |
| | Diameter: _____ Material: _____ Thickness: _____ | Material: _____ Method: _____ |

Inspector: bm      On Hold Date: _____   Release Date: 7/9/2009

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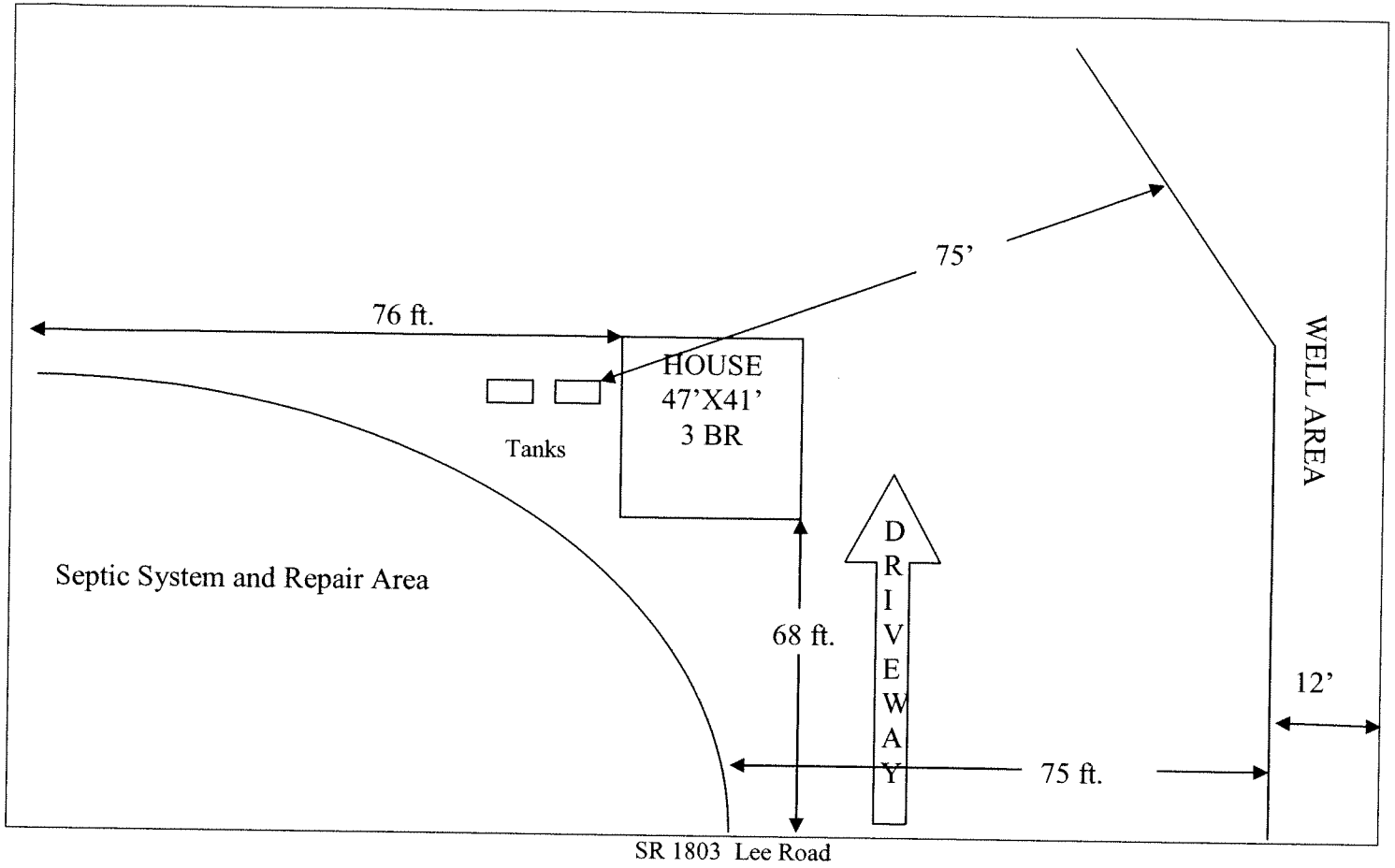
## Well Head Information
Casing Height: 12 in (above finished grade) Access Port: _____   Vent Stack: _____
Well ID Tag: yes Pump ID Tag: yes      Sampling Tap: yes      Backflow Preventer: yes
Sample Taken? ☐ Yes ☒ No      Well Head properly sealed: yes

Remarks: _____

**Authorized State Agent** _____ **Date** 7/9/2009

See Attachment for completion sketch

**Well Construction Sketch**



76 ft.

75'

HOUSE
47'X41'
3 BR

Tanks

Septic System and Repair Area

WELL AREA

68 ft.

D
R
I
V
E
W
A
Y

12'

75 ft.

SR 1803  Lee Road

**Well Completion Sketch**

75'

76 ft.

HOUSE
47'X41'
3 BR

Tanks

Septic System and Repair Area

68 ft.

DRIVEWAY

75 ft.

Well