

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

PIN #: 0643-47-1169 Parcel #: 08-0643-0010-01 Application #: 13-5-30756r Subdivision: _____ Lot #: 2A

Applicant Name: Bill Swayney
Address: Deer Tail Lane F.V. N.C. 27526

Type of Facility Served by Well: SFD

Sewage System: 25%

Permit Conditions: _____

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 James E. Manhart Date 4-4-14

Grouting Inspection Witnessed _____ Date _____
 Grouting self-certified by driller GW-1 provided? Yes No

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: _____ Application #: _____ Well Contractor: _____

Applicant Name: _____
Address: _____
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

Grout

From _____ To _____
From _____ To _____
From _____ To _____

From _____ To _____
Diameter: _____ Material: _____ Thickness: _____
From _____ To _____
Diameter: _____ Material: _____ Thickness: _____
From _____ To _____
Diameter: _____ Material: _____ Thickness: _____

From 0 To _____
Material: _____ Method: _____
From _____ To _____
Material: _____ Method: _____
From _____ To _____
Material: _____ Method: _____

Inspector: _____ On Hold Date: _____ Release Date: _____

Remarks: _____

Well Head Information

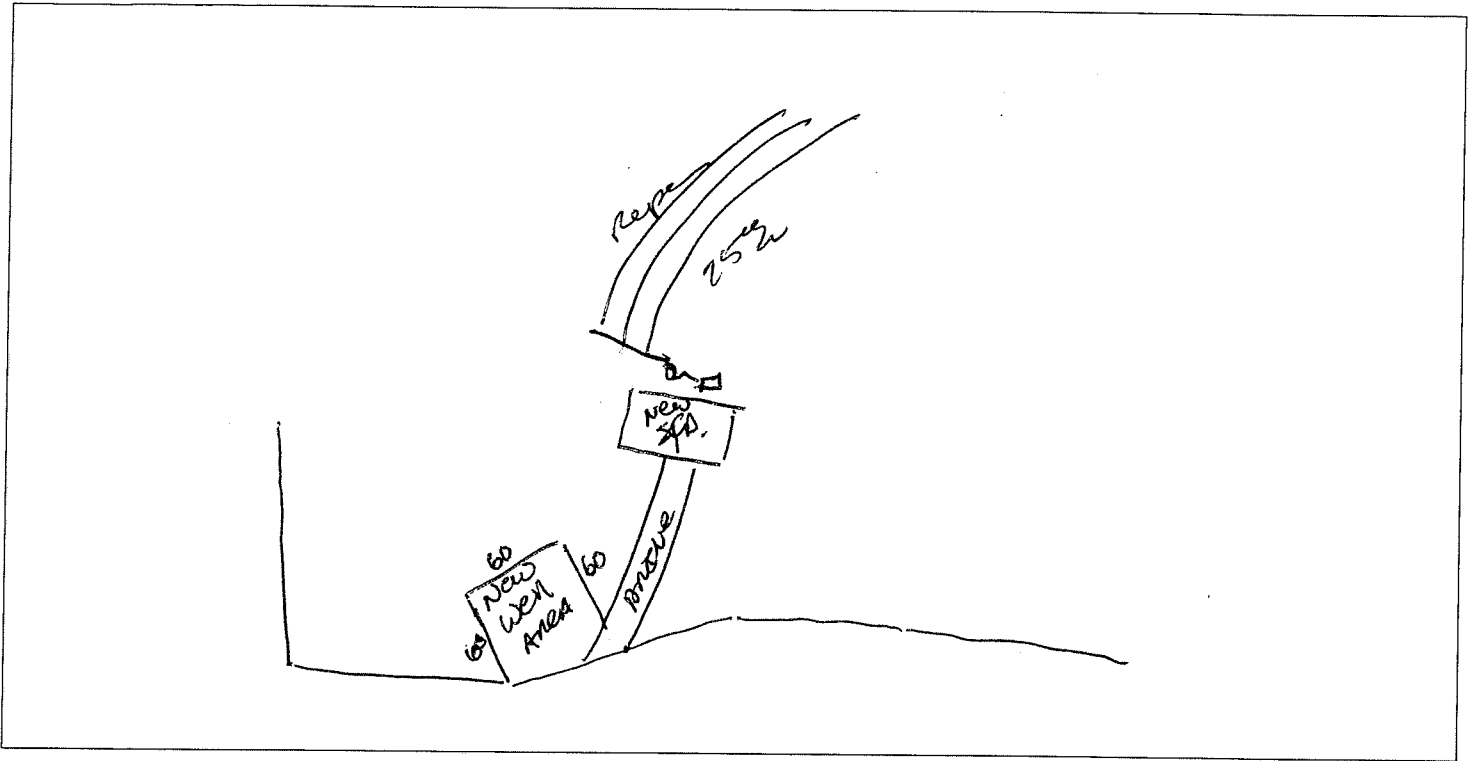
Casing Height: _____ (above finished grade) Access Port: _____ Vent Stack: _____
Well ID Tag: _____ Pump ID Tag: _____ Sampling Tap: _____ Backflow Preventer: _____
Sample Taken? Yes No Well Head properly sealed: _____

Remarks: _____

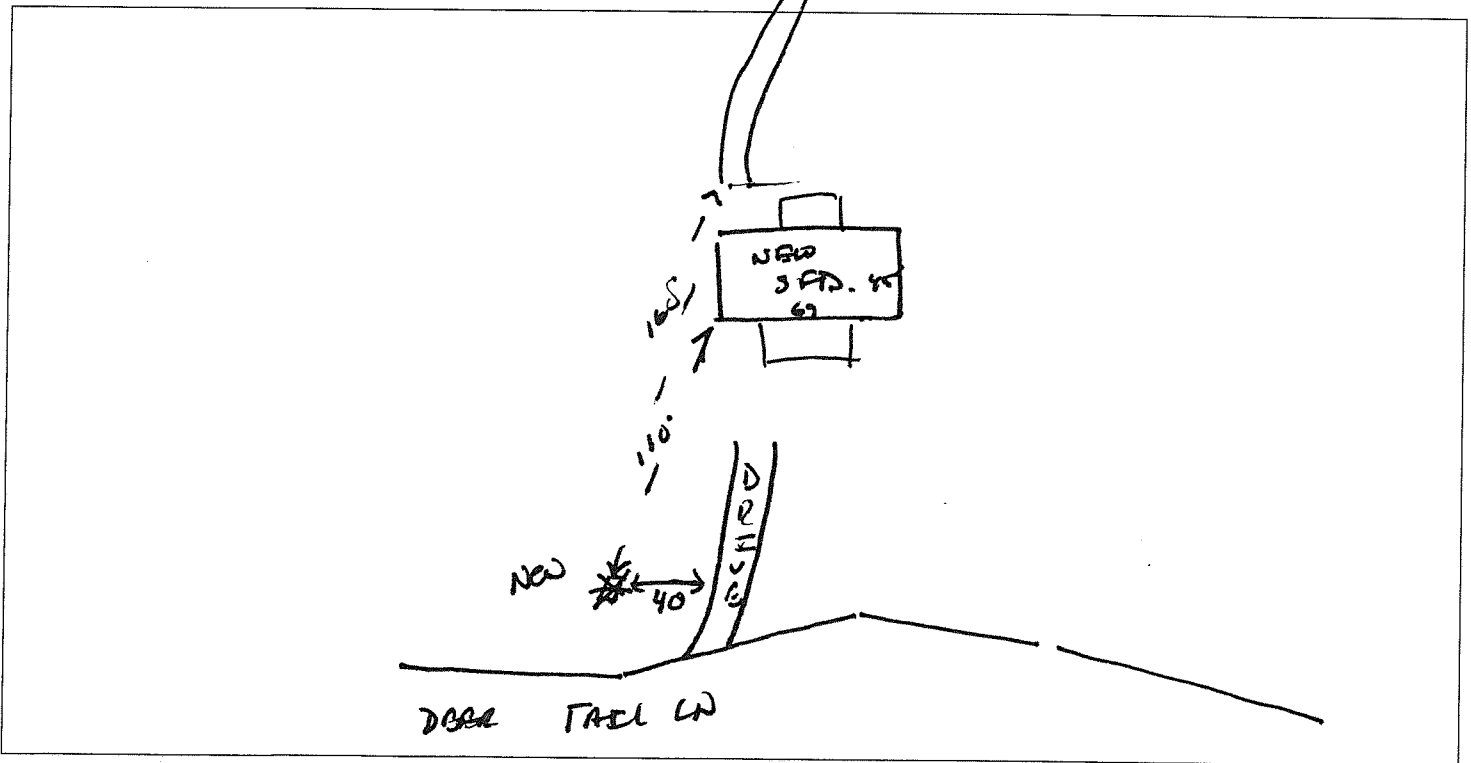
Authorized State Agent James E. Manhart Date 8-3-14

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch





Bill Swayney
(Applicant) *JM*

RESIDENTIAL WELL CONSTRUCTION RECORD 13-5-30756R

North Carolina Department of Environment and Natural Resources-Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 2179

1. WELL CONTRACTOR:
 Well Contractor (Individual) Name: Roger W. Jackson
 Well Contractor Company Name: Jackson Well Drilling
 STREET ADDRESS: 5660 McDOUGALD RD
Willington NC 27546
 City or Town State Zip Code
 (919)-499-3636
 Area code - Phone number

2. WELL INFORMATION:
 SITE WELL ID# (if applicable): _____
 STATE WELL PERMIT# (if applicable): _____
 DWQ or OTHER PERMIT # (if applicable): _____
 WELL USE: HOUSE
 DATE DRILLED: 6-25-14
 TIME COMPLETED: 3:00 pm

3. WELL LOCATION:
 CITY: Foggy Virginia County Hannett
505 DEER TAIL LN 27526
 (Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)
 TOPOGRAPHIC / LAND SETTING: _____
 LATITUDE: 35° 34' 94" May be in degrees, minutes, seconds or in a decimal format
 LONGITUDE: 78° 40' 68.5"
 Latitude / longitude source: GPS
 (location of well must be shown on a USGS topo map and attached to this form if not using GPS)

4. WELL OWNER:
 OWNER'S NAME: Dawson Construction
 STREET ADDRESS: 609 Cotton Rd
Foggy Virginia NC 27526
 City or Town State Zip Code
 (919)-201-3841
 Area code - Phone number

5. WELL DETAILS:
 a. TOTAL DEPTH: 280'
 b. DOES WELL REPLACE EXISTING WELL? No
 c. WATER LEVEL: 35 FT.
 (Use "+" if Above Top of Casing)
 d. TOP OF CASING IS 1 FT. Above Land Surface*
 *Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118.
 e. YIELD (gpm): 6 METHOD OF TEST: Air

f. DISINFECTION: Type HTH Amount 16oz

g. WATER ZONES (depth):
 From 226 To 228 From _____ To _____
 From _____ To _____ From _____ To _____
 From _____ To _____ From _____ To _____

6. CASING:

From	To	Depth	Diameter	Thickness/Weight	Material
0	46	Ft.	6"	SKAL	PVC
From	To	Ft.			
From	To	Ft.			

7. GROUT:

From	To	Depth	Material	Method
0	25	Ft.	Sand Cement	Rotary
From	To	Ft.		
From	To	Ft.		

8. SCREEN:

From	To	Depth	Diameter	Slot Size	Material
From	To	Ft.	in.	in.	
From	To	Ft.	in.	in.	
From	To	Ft.	in.	in.	

9. SAND/GRAVEL PACK:

From	To	Depth	Size	Material
From	To	Ft.		
From	To	Ft.		
From	To	Ft.		

10. DRILLING LOG

From	To	Formation Description
0	38-40	CLAY
38-40	280	SLATE

11. REMARKS:

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

Roger W. Jackson 7-25-14
 SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE
Roger W. Jackson
 PRINTED NAME OF PERSON CONSTRUCTING THE WELL