

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

PIN #: 0693-51-5024.000 Parcel #: 040693 0097 02 Application #: EH2202-0006 Subdivision: Joseph E. Langley Lot #: Par. B

Applicant Name: Joseph & Suzanne Langley
Address: 282 Kirk Adams Rd. Angier, NC 27501


Type of Facility Served by Well: Multi- SFD

Sewage System: Ext. Conventional Sys.

Permit Conditions: 282 Kirk Adams Road (SR 1574)

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 02/15/2022

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 #: EH2202-0006 Well Contractor: _____

Applicant Name: & Suzanne Langley
Address: 282 Kirk Adams Rd. Angier, NC 27501
Directions to Site: 282 Kirk Adams Road (SR 1574)

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 _____

<u>Water Zone (depth)</u>	<u>Casing</u>	<u>Grout</u>
From _____ To _____	From _____ To _____	From <u>0</u> To _____
From _____ To _____	Diameter: _____ Material: _____ Thickness: _____	Material: _____ Method: _____
From _____ To _____	From _____ To _____	From _____ To _____
	Diameter: _____ Material: _____ Thickness: _____	Material: _____ Method: _____
	From _____ To _____	From _____ To _____
	Diameter: _____ Material: _____ Thickness: _____	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 _____ Date _____

See Attachment for completion sketch

Harnett GIS

NOT FOR LEGAL USE

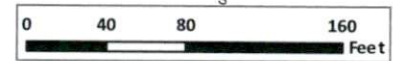
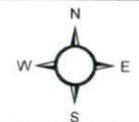


Harnett County GIS, Harnett County Public Utilities



GIS/E-911 Addressing
February 15, 2022

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|-------------------------------|--------------------|---------------------|
| Surrounding County Boundaries | Major Roads | Mile_Markers |
| City Limits | Interstate | Mile_Markers |
| Address Numbers | NC | Railroad |
| Airport | US | Parcels |
| | Roads | CapeFearRiver |



1 inch = 94 feet