



North Carolina State Laboratory of Public Health
Environmental Sciences
Microbiology
Certificate of Analysis

4312 District Drive
 MSC 1918
 Raleigh, NC 27699-1918

http://slph.ncpublichealth.com
 Phone: 919-733-7308
 Fax: 919-715-8611

FINAL REPORT

Report to: JAMES MANHART

Name of System:

HARNETT CO ENVIRONMENTAL HEALTH

Teresa Walton

307 CORNELIUS HARNETT BLVD

761 Popes Lake Rd

Lillington, NC 27546

Angier, NC 27501

EIN: 566000306EH

Delivery: NC Courier

Harnett County

StarLiMS ID: **ES231130-0059**

Date Collected: 11/29/2023

Time Collected: 10:30

By: James Manhart

Date Received: 11/30/2023

Time Received: 07:52

By: Julie Schiavone

Sample Source: Well water

Sampling Point: well head

Sample Type:

GPS No.

Treatment:

Well Permit No.

Comment:

Colilert Profile

Method: SM 9223B

Analyte	Test Result	Unit	Conclusion	Date Tested
Total Coliform	Absent			11/30/2023
E. coli	Absent			11/30/2023

Report Date: 12/01/2023

Reported By: KPLEMMONS

Explanations of Coliform Analysis:

If coliform bacteria are **Absent**, the water is considered safe for drinking purpose. If coliform bacteria are **Present**, the water is considered unsafe for drinking purpose. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

North Carolina Division of Public Health
Occupational and Environmental Epidemiology Branch, Epidemiology Section
BIOLOGICAL ANALYSIS REPORT

Private well water information and recommendations

County: HARNETT Name: TERESA WALTON Sample ID Number: _____
Location: 761 POPES LAKE RD ANGIER N.C. 27801 Reviewer JM/KP LEMMONS

Initial Sample Confirmation Sample _____

BIOLOGICAL ANALYSIS RESULTS AND RECOMMENDATIONS FOR USES OF YOUR PRIVATE WELL WATER (These recommendations are based on biological analysis only.)

No coliform bacteria were found in your well water. Your water can be used for all purposes including drinking, cooking, washing dishes, bathing and showering.

_____ Total coliform bacteria were detected in your water sample. Total Coliform are a group of related bacteria that are (with few exceptions) not harmful to humans. A variety of bacteria, parasites, and viruses, known as pathogens, can potentially cause health problems if humans ingest them. EPA considers total coliforms a useful indicator of other pathogens for drinking water. Total coliforms are used to determine the adequacy of water treatment and the integrity of the distribution system.

_____ Your well water needs to be re-tested to verify that the result is accurate.

_____ Fecal coliform bacteria were detected in the sample. **Do not use the water for drinking, cooking, washing dishes, bathing or showering.**

If the re-test shows contamination by bacteria contact your local health department for assistance. There may be a problem with the construction of the well, the groundwater source, or operation of the well. The well needs to be inspected by the local health department or a local well contractor to determine the problem with the well and to give guidance on how to correct the problem.

Your well water was tested for biological contaminants (total coliform and fecal coliform bacteria). The results were evaluated using the federal drinking water standards.

Drinking water may contain substances that can occur naturally in water or can be introduced into water from man-made sources. Total coliform bacteria are found in soil and fecal coliform bacteria are found in animal and human waste. Total coliform or fecal coliform bacteria in well water indicate that the well may have structural problems or that the well was not properly disinfected.

If you have been drinking the well water and are pregnant, nursing, have a child in the household under 5 years of age, or immunocompromised (such as an individual with AIDS, cancer, hepatitis, dialysis or surgical procedures) inform your physician of these results at your next visit.

If the contamination continues, you should investigate the possibility of drilling a new well or installing a point-of-entry disinfection unit, which can use chlorine, ultraviolet light, or ozone.

For further information, please contact your county health department or the Occupational and Environmental Epidemiology Branch at 919-707-5900.

EH2311-0008

Harnett County Health Department Water Sample Application

Most results are received within 7 business days.

*Some results may take 3 weeks or longer to be analyzed

ENVIRONMENTAL HEALTH SECTION
307 W. CORNELIUS HARNETT BLVD.
LILLINGTON, N.C. 27546
910-898-7547

NAME Teresa Walton AREA CODE & PHONE NUMBER 919 3318066 919 291 0324

MAILING ADDRESS 761 Pope Lake Rd Angier NC 27501

PROPERTY ADDRESS 761 Pope Lake Rd Angier NC 27501 STATE ROAD

SUBDIVISION NAME AND LOT NUMBER

PURPOSE OF SAMPLE Doctor Requested Loan closing Date of closing
 Personal Information Other retest

Types of Samples & Cost - Please make check payable to: Harnett County Health Department

\$50.00 - Bacteriological (coliform and fecal absent or present) \$100.00 - Petroleum \$100.00 - Inorganic
 \$100.00 - Pesticides \$100.00 - Other

Type of Well: Drilled Bored Driven
Electricity available? Yes No

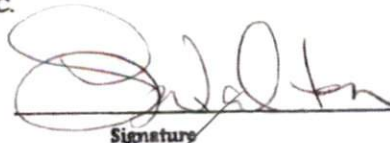
How many outside spigots? 1 Location of spigots next to well head

Please give complete directions from the Health Department to the location.

end of Pope Lake Rd Left onto gravel driveway
well is in front yard lakeside

In order for a sample to be taken the well should be made visible to the inspector. This may require the removal of lids over the well or lids and/or locks of pump houses. We also inspect your well, and if it is unapproved we will not take a sample, but advise you how to protect the well. Once the well has met state requirements, re-apply and we will sample your water at that time. If further visits are necessary there will be an additional charge of \$25.00. You will be notified by mail once the results have been received from the N. C. State Lab of Public Health, Raleigh, NC.

By signing this application I am confirming that the information given is correct.



14 Nov 23

Office Use Only.

Signature

Date

Visible well construction: Yes No Approved Unapproved Date of initial visit: 11-23-23 Return Visit

Date sample taken 11-23-23 Date re-sampled