

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

PIN #: Parcel #: Application #: 15-5-35661R Subdivision: _____ Lot #:

Applicant Name: James Stahl
Address: 875 Mike Williams Rd

Type of Facility Served by Well: SFD

Sewage System: 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: 5/28/2015 Application #: 15-5-35661R Well Contractor: Jackson Well Co.

Applicant Name: James Stahl
Address: 808 Mike Williams Rd
Directions to Site: 210 South left on Mike Williams Rd

Use of Well: sfd Date Drilled: 5/15/2015 Total Depth: 320 ft Replacement Well? Yes No
Static Water Level: 100 ft Top of Casing is 12 in. above surface. Yield: 10 gpm at _____ ft.
Disinfection: Type hth Amount 16 oz

Water Zone (depth)

Casing

Grout

From 242 To 244
From _____ To _____
From _____ To _____

From 0 To 160 ft
Diameter: 6.185 Material: pvc Thickness: sr 21
From _____ To _____
Diameter: _____ Material: _____ Thickness: _____
From _____ To _____
Diameter: _____ Material: _____ Thickness: _____

From 0 To 20 ft
Material: sand cement Method: pour
From _____ To _____
Material: _____ Method: _____
From _____ To _____
Material: _____ Method: _____

Inspector: bm On Hold Date: _____ Release Date: 5/28/2015

Remarks: _____

Well Head Information

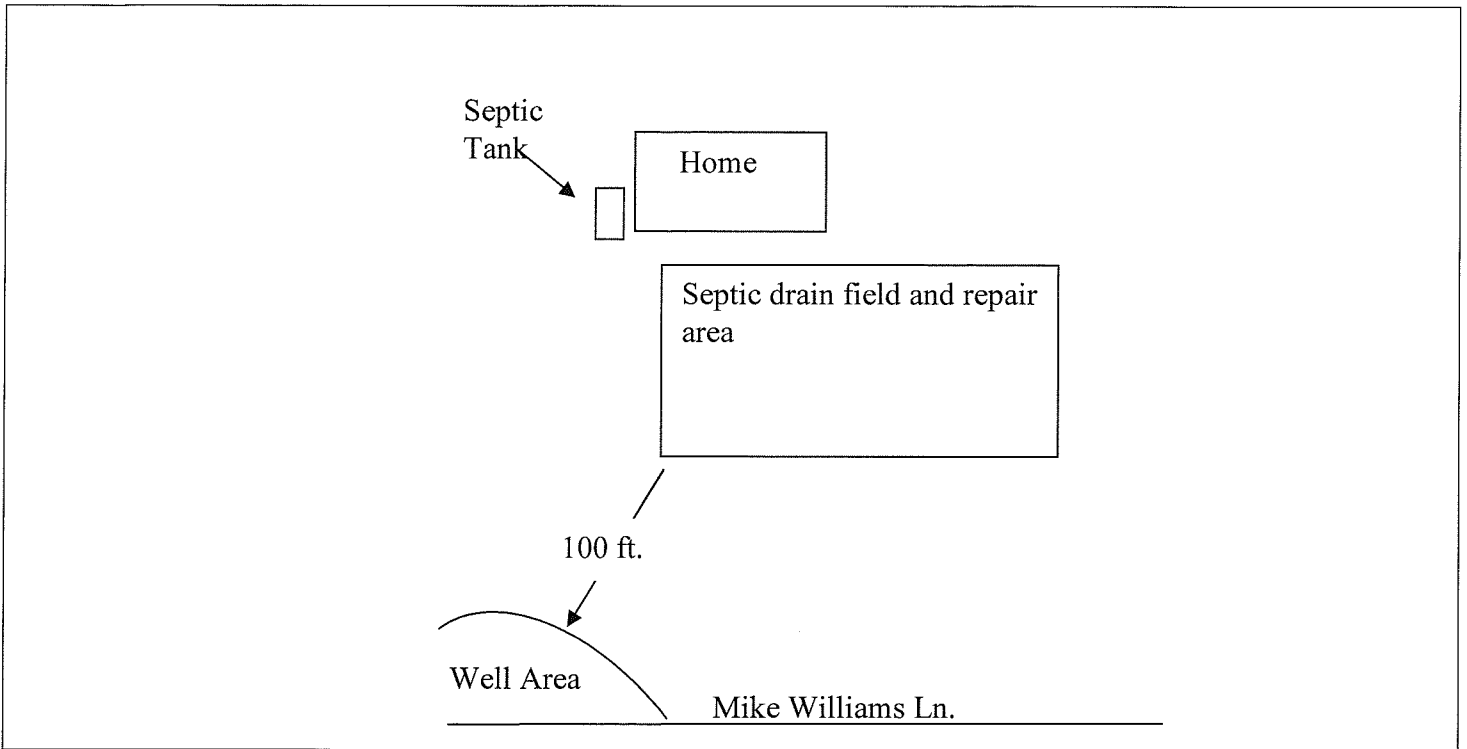
Casing Height: 12 in (above finished grade) Access Port: yes Vent Stack: yes
Well ID Tag: yes Pump ID Tag: yes Sampling Tap: yes Backflow Preventer: yes
Sample Taken? Yes No Well Head properly sealed: yes

Remarks: _____

Authorized State Agent [Signature] Date 5/28/2015

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch

