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

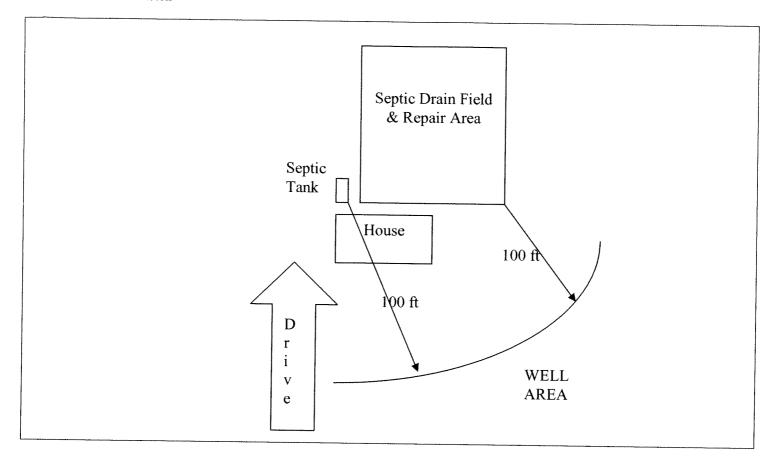
PIN #: <u>1610-02-3196.000</u> Parcel #: <u>07-1600-0255-05</u>	Application #: 09-5-220:	Subdivision:	Lot #:
Applicant Name: <u>Alisa G. Reid</u> Address: <u>80 Robbie Street Coats, NC 27521</u>			
Type of Facility Served by Well: <u>SFD</u>			
Sewage System: 25% Reduction System			
Permit Conditions: Well to be 100 ft min from septic system	<u>m</u>		
 General Permit Conditions: Drinking water supply well construction must meet 1 The permitted drinking water supply well shall be loc ANY ALTERATION of the site of the site (includin subject this Permit to revocation 	cated in accordance with the	SITE PLAN ppurtenance) or modification in	n use of the well, ma
Authorized State Agent	Date	A STATE OF THE STA	
Grouting Inspection Witnessed Grouting self-certified by driller GW-1 provided	Date		
See attachment for construction sketch			
WELL CEI	RTIFICATE OF COMPLE	TION	
Date: 7/1/2009 Application #:09-5-22053 Well C	Contractor: Barefoot's Well I	Prilling	
Applicant Name: Alisa Reid Address: Skeet Range Rd Coats, Nc 27521 Directions to Site: 27 east thru Coats toward Benson turn rig	ght on Skeet Range Rd		
Use of Well: sfd Date Drilled: 6/29/2009 Total Depth: 15 Static Water Level: 38 ft Top of Casing is 12 in. al Disinfection: Type chlorine Amount 1 lb	51 ft Replacement Wel bove surface. Yield: <u>1</u>	1? Yes No No gpm at ft.	
From To	: <u>pvc</u> Thickness: <u>40</u>	From To	nod:
Inspector: <u>bm</u> On Hold Date: Release	Date: 7/9/2009		
Remarks:			
Well Head Information Casing Height: 12 in (above finished grade) Access Port: yes Well ID Tag: yesPump ID Tag: yes Sampling Tap: yes Sample Taken? ☐ Yes ☒ No Well Head proper	<u>ves</u> Backflow	Preventer: <u>yes</u>	
Remarks:		i	
Authorized State Agent Suy Music C	Date	2009	

See Attachment for completion sketch

Applicant Name: Alisa G. Reid

Subdivision: ____ Lot #: ____

Well Construction Sketch



Well Completion Sketch

