

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

PIN #: 0588-61-1557.000 Parcel #: 070588 0137 Application #: SFD2008-0057 Subdivision: AC Snipes Lot #: TR2

Applicant Name: Charles Lewis Bayles Jr
Address: 3120 Old Stage Road Erwin, NC 28339

Type of Facility Served by Well: SFD

Sewage System: 25% Reduction System

Permit Conditions: Locaiton - Old Stage Rd. S. (SR 1769)

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 [Signature] Date 09/14/2020

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

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: 04/14/21 Application #: SFD2008-0057 Well Contractor: LENN WILLIFORD

Applicant Name: Charles Lewis Bayles Jr
Address: 3120 Old Stage Road Erwin, NC 28339
Directions to Site: Old Stage Rd. S. (SR 1769)

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 <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

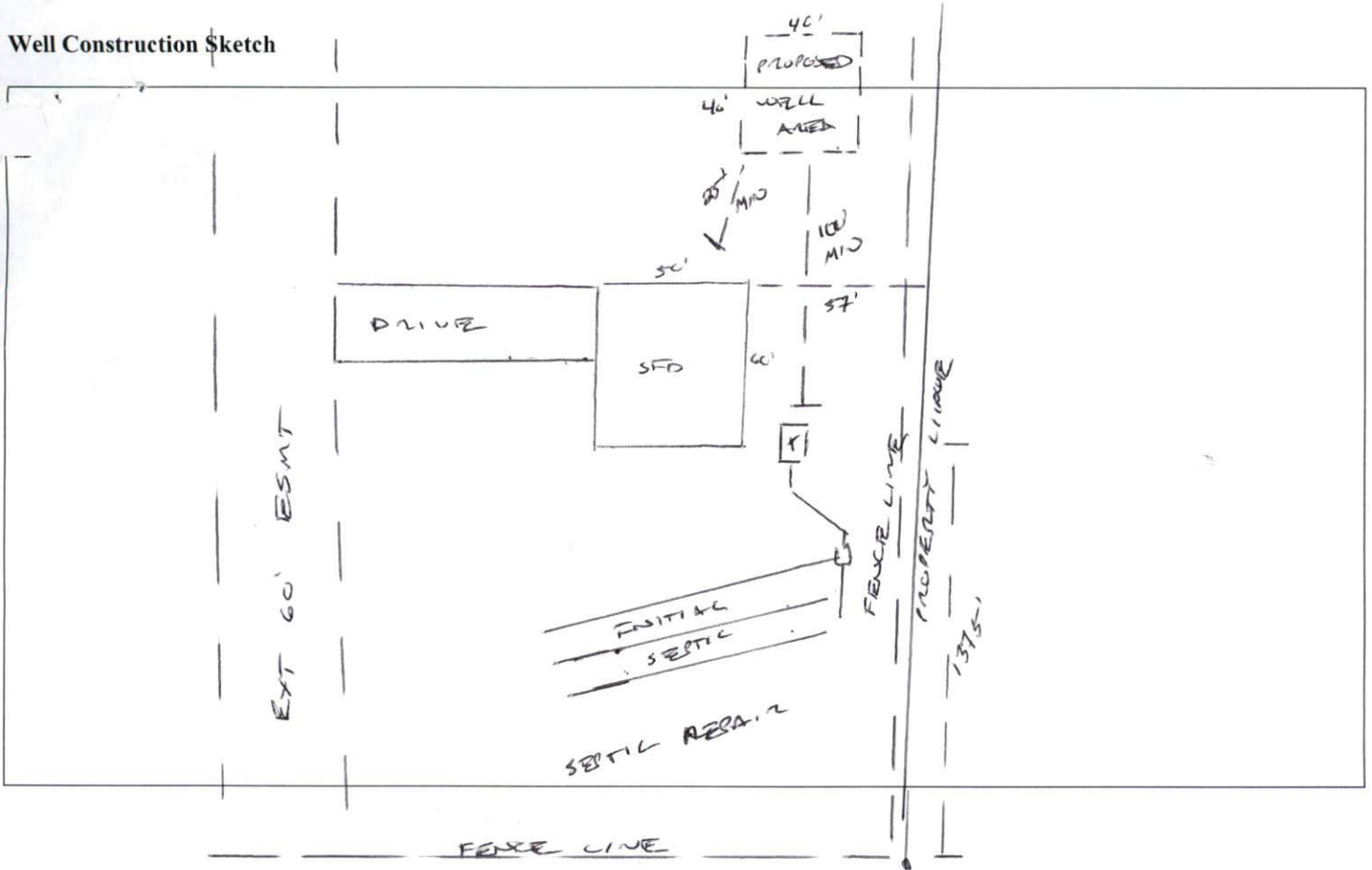
Casing Height: 16 in (above finished grade) Access Port: Vent Stack:
Well ID Tag: Pump ID Tag: Sampling Tap: Backflow Preventer:
Sample Taken? Yes No Well Head properly sealed:

Remarks: SAMPLE DEFERRED FOR SLOWER

Authorized State Agent [Signature] Date 04/14/2021

See Attachment for completion sketch

Well Construction Sketch



Completion Sketch



WELL CONSTRUCTION RECORD (GW-1)

1. Well Contractor Information:

Larry Williford Jr
 Well Contractor Name
2863 A
 NC Well Contractor Certification Number
Williford's Well Drilling
 Company Name

2. Well Construction Permit #: 0705880137
 List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.)

3. Well Use (check well use):

Water Supply Well:
 Agricultural Municipal/Public
 Geothermal (Heating/Cooling Supply) Residential Water Supply (single)
 Industrial/Commercial Residential Water Supply (shared)
 Irrigation Wells > 100,000 GPD

Non-Water Supply Well:
 Monitoring Recovery

Injection Well:
 Aquifer Recharge Groundwater Remediation
 Aquifer Storage and Recovery Salinity Barrier
 Aquifer Test Stormwater Drainage
 Experimental Technology Subsidence Control
 Geothermal (Closed Loop) Tracer
 Geothermal (Heating/Cooling Return) Other (explain under #21 Remarks)

4. Date Well(s) Completed: 4-9-21 Well ID# _____

5a. Well Location:
Charles Bayles Jr
 Facility/Owner Name Facility ID# (if applicable)
3120 Old Stage Rd Erwin NC 28339
 Physical Address, City, and Zip
Harnett 0588-61-1557.000
 County Parcel Identification No. (PIN)

5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees:
 (if well field, one lat/long is sufficient)
35.347415 N 78.712139 W

6. Is(are) the well(s): Permanent or Temporary

7. Is this a repair to an existing well: Yes or No
 If this is a repair, fill out known well construction information and explain the nature of the repair under #21 remarks section or on the back of this form.

8. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same construction, only 1 GW-1 is needed. Indicate TOTAL NUMBER of wells drilled: _____

9. Total well depth below land surface: 220 (ft.)
 For multiple wells list all depths if different (example - 3@200' and 2@100')

10. Static water level below top of casing: 85 (ft.)
 If water level is above casing, use "+"

11. Borehole diameter: 10 (in.)

12. Well construction method: Mud Rotary/Air Rotary
 (i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) 12 Method of test: Air develop

13b. Disinfection type: HTH Amount: 1cup

For Internal Use Only:

14. WATER ZONES		
FROM	TO	DESCRIPTION
210 ft.	213 ft.	gray rock
ft.	ft.	

15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)				
FROM	TO	DIAMETER	THICKNESS	MATERIAL
1 ft.	118 ft.	4 in.	SDR 21	PVC

16. INNER CASING OR TUBING (geothermal closed-loop)				
FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	ft.	in.		
ft.	ft.	in.		

17. SCREEN					
FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			

18. GROUT			
FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	20 ft.	Bentonite	12 - (50lb) bags
ft.	ft.		pour
ft.	ft.		

19. SAND/GRAVEL PACK (if applicable)			
FROM	TO	MATERIAL	EMPLACEMENT METHOD
ft.	ft.		
ft.	ft.		

20. DRILLING LOG (attach additional sheets if necessary)		
FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
0 ft.	1 ft.	topsoil
1 ft.	9 ft.	orange-red clay
9 ft.	21 ft.	orang-white clay
21 ft.	27 ft.	tan clay
27 ft.	32 ft.	sandy gravel
32 ft.	60 ft.	gray sandy clay
60 ft.	118 ft.	gray clay

21. REMARKS
118 ft to 220 gray rock

22. Certification:
Larry Williford Jr 4-9-21
 Signature of Certified Well Contractor Date

By signing this form, I hereby certify that the well(s) was (were) constructed in accordance with 15A NCAC 02C .0100 or 15A NCAC 02C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

23. Site diagram or additional well details:
 You may use the back of this page to provide additional well construction info (add 'See Over' in Remarks Box). You may also attach additional pages if necessary.

24. SUBMITTAL INSTRUCTIONS
 Submit this GW-1 within 30 days of well completion per the following:

24a. For All Wells: Original form to Division of Water Resources (DWR), Information Processing Unit, 1617 MSC, Raleigh, NC 27699-1617

24b. For Injection Wells: Copy to DWR, Underground Injection Control (IUC) Program, 1636 MSC, Raleigh, NC 27699-1636

24c. For Water Supply and Open-Loop Geothermal Return Wells: Copy to the county environmental health department of the county where installed

24d. For Water Wells producing over 100,000 GPD: Copy to DWR, CCPCUA Permit Program, 1611 MSC, Raleigh, NC 27699-1611