

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

0613-54-7978.000    0613-54-7978.000    SFD2106-0010  
 PIN #: \_\_\_\_\_ Parcel #: \_\_\_\_\_ Application #: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Lot #: 1

Applicant Name: Thomas L Bradley III  
 Address: \_\_\_\_\_

Type of Facility Served by Well: SFD + DET GARAGE

Sewage System: 2590 IBS

Permit Conditions: \_\_\_\_\_

**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 James E. Manhart <sup>for RBS</sup> Date 7-28-21

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

See attachment for construction sketch

**WELL CERTIFICATE OF COMPLETION**

Date: 2-24-22    Application #: SFD2106-0010    Well Contractor: Boyethe well + septic  
Thomas Bradley  
 Applicant Name: Thomas Bradley    GW-1  
 Address: 240 Pond Branch ST P.V. N.C.  
 Directions to Site: \_\_\_\_\_

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**

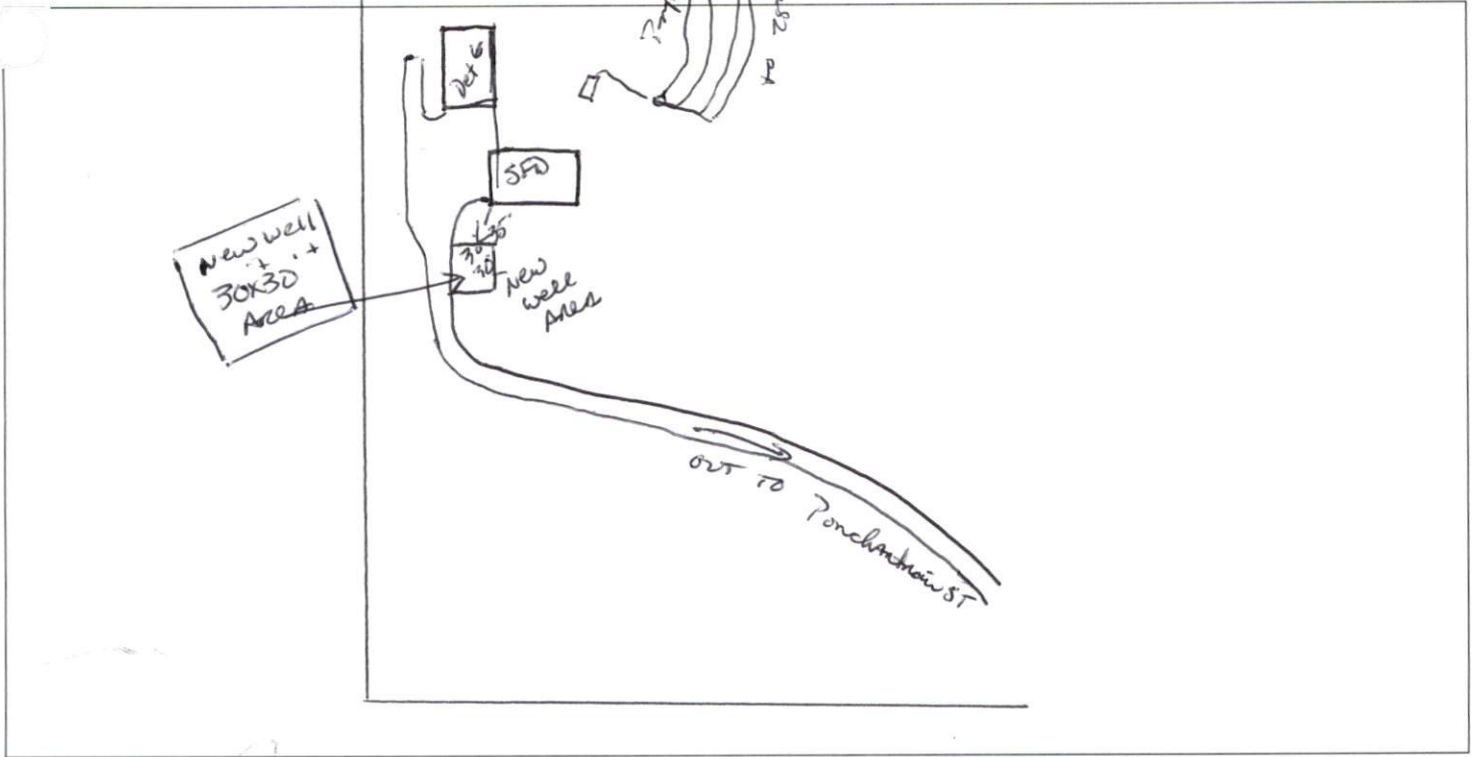
Casing Height: 18' (above finished grade)    Access Port: \_\_\_\_\_ Vent Stack: \_\_\_\_\_  
 Well ID Tag: \_\_\_\_\_ Pump ID Tag: \_\_\_\_\_ Sampling Tap: \_\_\_\_\_ Backflow Preventer: \_\_\_\_\_  
 Sample Taken?  Yes  No    Well Head properly sealed: \_\_\_\_\_

Remarks: \_\_\_\_\_

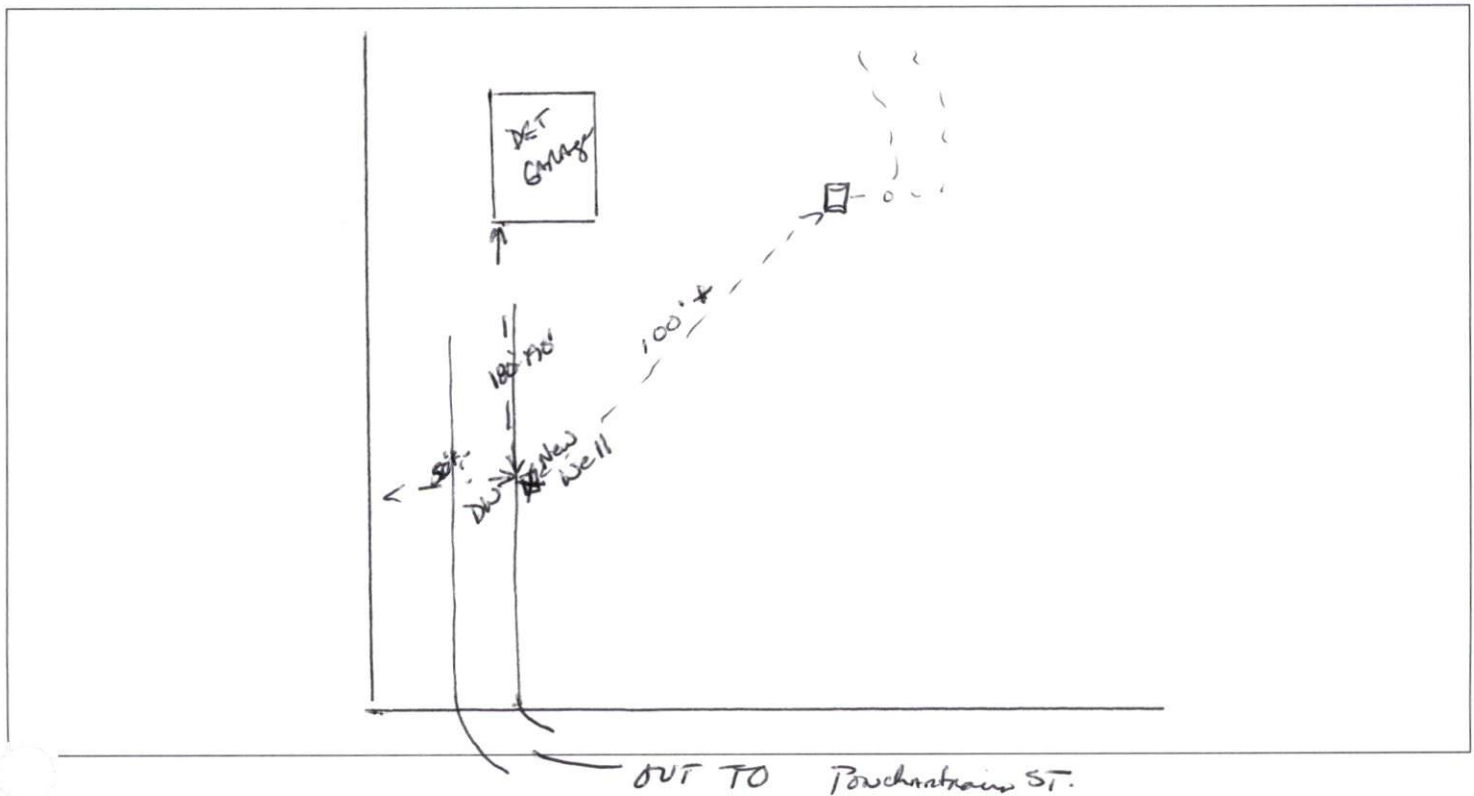
Authorized State Agent James E. Manhart <sup>for RBS</sup> Date 2-23-22

See Attachment for completion sketch

Well Construction Sketch



1 Completion Sketch



# WELL CONSTRUCTION RECORD (GW-1)

## 1. Well Contractor Information:

John H. Boyette Jr.

Well Contractor Name

2505

NC Well Contractor Certification Number

Boyette Well & Septic Inc.

Company Name

## 2. Well Construction Permit #:

List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.)

## 3. Well Use (check well use):

<b>Water Supply Well:</b>	
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Municipal/Public
<input type="checkbox"/> Geothermal (Heating/Cooling Supply)	<input checked="" type="checkbox"/> Residential Water Supply (single)
<input type="checkbox"/> Industrial/Commercial	<input type="checkbox"/> Residential Water Supply (shared)
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Wells > 100,000 GPD
<b>Non-Water Supply Well:</b>	
<input type="checkbox"/> Monitoring	<input type="checkbox"/> Recovery
<b>Injection Well:</b>	
<input type="checkbox"/> Aquifer Recharge	<input type="checkbox"/> Groundwater Remediation
<input type="checkbox"/> Aquifer Storage and Recovery	<input type="checkbox"/> Salinity Barrier
<input type="checkbox"/> Aquifer Test	<input type="checkbox"/> Stormwater Drainage
<input type="checkbox"/> Experimental Technology	<input type="checkbox"/> Subsidence Control
<input type="checkbox"/> Geothermal (Closed Loop)	<input type="checkbox"/> Tracer
<input type="checkbox"/> Geothermal (Heating/Cooling Return)	<input type="checkbox"/> Other (explain under #21 Remarks)

4. Date Well(s) Completed: 10-21-21 Well ID# \_\_\_\_\_

### 5a. Well Location:

Thomas Bradley  
Facility/Owner Name Facility ID# (if applicable)

240 Ponchartrain St., Fuquay Varin  
Physical Address, City, and Zip

Harnett  
County Parcel Identification No. (PIN)

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

35.496594 N -78.943310 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: 1

9. Total well depth below land surface: 625 (ft.)  
For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 20 (ft.)  
If water level is above casing, use "+"

11. Borehole diameter: 6.25 (in.)

12. Well construction method: air rotary  
(i.e. auger, rotary, cable, direct push, etc.)

### FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) \_\_\_\_\_ Method of test: flow  
13b. Disinfection type: HTH Amount: 16 oz.

For Internal Use Only:

14. WATER ZONES					
FROM	TO	DESCRIPTION			
<u>575</u> ft.	<u>578</u> ft.				
ft.	ft.				
15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	
ft.	ft.	in.	in.		
16. INNER CASING OR TUBING (geothermal closed-loop)					
FROM	TO	DIAMETER	THICKNESS	MATERIAL	
<u>+1.5</u> ft.	<u>54</u> ft.	<u>6.25</u> in.	<u>SDR21</u>	<u>PVC</u>	
<u>54</u> ft.	<u>59</u> ft.	<u>6.25</u> in.	<u>.188</u>	<u>Galv. steel</u>	
17. SCREEN					
FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			
18. GROUT					
FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT		
<u>0</u> ft.	<u>25</u> ft.	<u>bentonite</u>	<u>pumped</u>		
ft.	ft.				
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.)			
<u>0</u> ft.	<u>20</u> ft.	<u>clay</u>			
<u>20</u> ft.	<u>625</u> ft.	<u>shell</u>			
ft.	ft.				
ft.	ft.				
ft.	ft.				
ft.	ft.				
ft.	ft.				
21. REMARKS					

## 22. Certification:

John Boyette 11-2-21  
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