

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

PIN #: _____ Parcel #: _____ Application #: SFD2201-0045 R Subdivision: _____ Lot #: _____

Applicant Name: Dave Gietz
Address: 2780 Norrington Rd (SR 1130)

*Well layout has been revised
to meet LBS septic permit layout*

Type of Facility Served by Well: 30' x 40' SFD

Sewage System: onsite septic system

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 *Mel A. RETT* Date 10-13-22

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

See attachment for construction sketch

WELL CERTIFICATE OF COMPLETION

Date: _____ Application #: SFD2201-0045 Well Contractor: _____

Applicant Name: Dave Gietz
Address: 2780 Norrington Rd (SR 1130)
Directions to Site: _____

Use of Well: Private 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 0 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

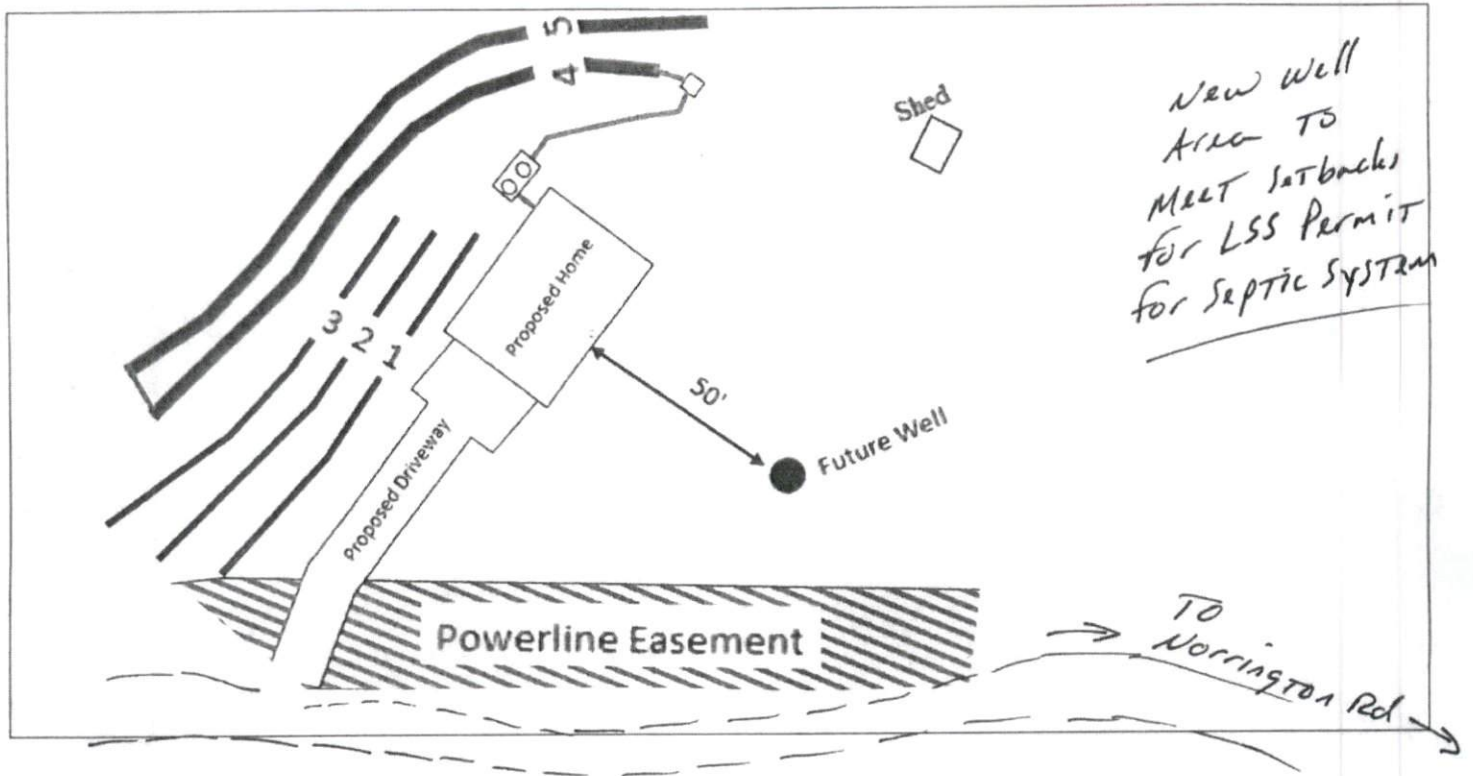
Casing Height: 13 (above finished grade) Access Port: Vent Stack:
Well ID Tag: Pump ID Tag: Sampling Tap: Backflow Preventer:
Sample Taken? Yes No Well Head properly sealed:

Remarks: _____

Authorized State Agent *Mel A. RETT* Date 4-1-24

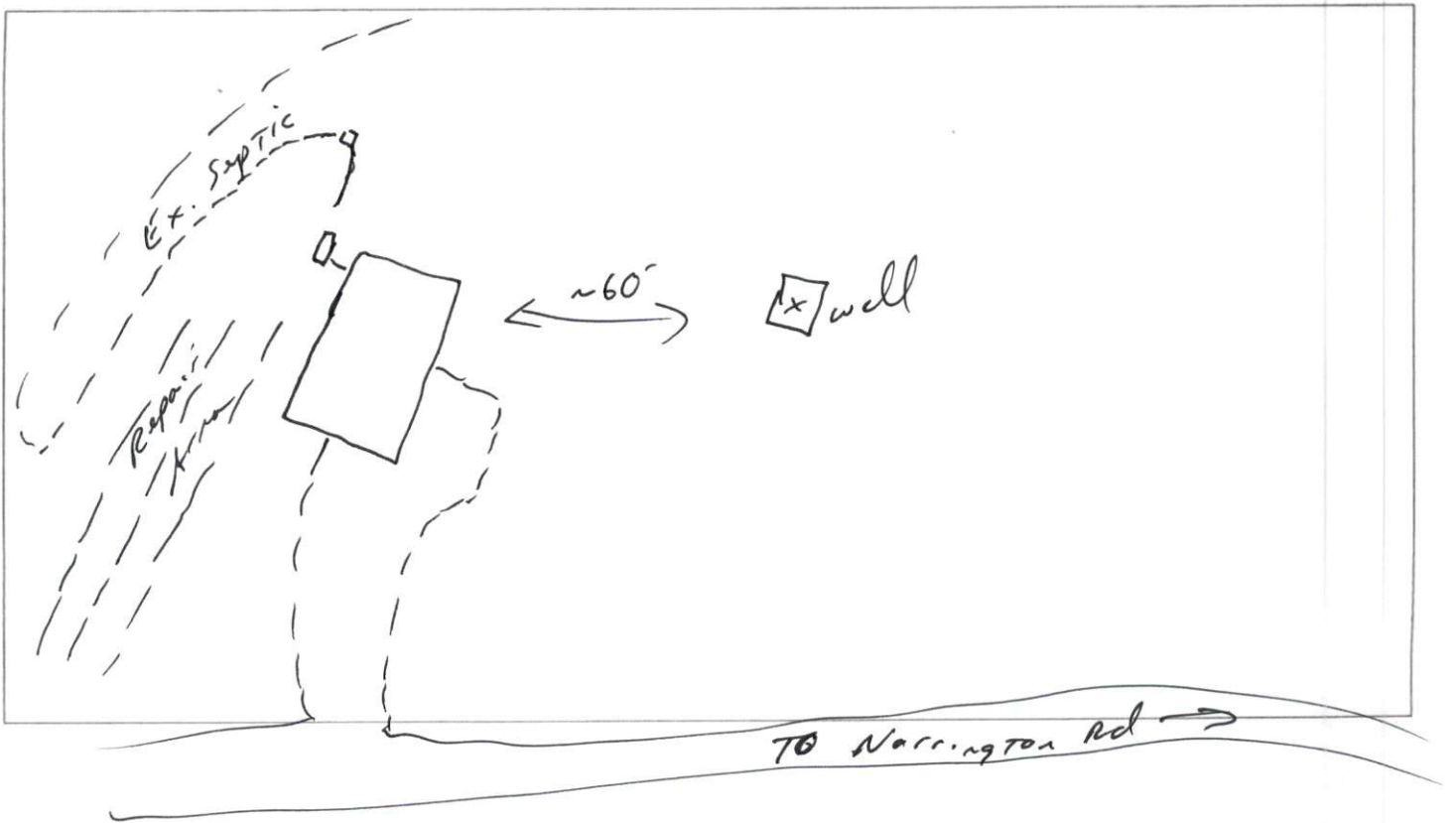
See Attachment for completion sketch

Well Construction Sketch



New Well Area TO MEET setbacks FOR LSS Permit FOR SEPTIC SYSTEM

Well 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 #: SFA2201-0045

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: 1-3-23 Well ID#

5a. Well Location:

Dave Gietz

Facility/Owner Name

Facility ID# (if applicable)

2780 Norington Rd.

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)

N 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: 265' (ft). For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 25' (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): 14 Method of test: flow

13b. Disinfection type: HTH Amount: 16 oz.

For Internal Use Only:

14. WATER ZONES table with columns FROM, TO, DESCRIPTION. Entry: 230 ft. to 231 ft.

15. OUTER CASING (for multi-cased wells) OR LINER (if applicable) table with columns FROM, TO, DIAMETER, THICKNESS, MATERIAL.

16. INNER CASING OR TUBING (synothermal closed-loop) table with columns FROM, TO, DIAMETER, THICKNESS, MATERIAL. Entries: +1.5 ft. to 103 ft. (6.25 in. SDR21 PVC), 103 ft. to 108 ft. (6.25 in. 188 Galv. steel)

17. SCREEN table with columns FROM, TO, DIAMETER, SLOT SIZE, THICKNESS, MATERIAL.

18. GROUT table with columns FROM, TO, MATERIAL, EMPLACEMENT METHOD & AMOUNT. Entry: 0 ft. to 25 ft. bentonite pumped

19. SAND/GRAVEL PACK (if applicable) table with columns FROM, TO, MATERIAL, EMPLACEMENT METHOD.

20. DRILLING LOG (attach additional sheets if necessary) table with columns FROM, TO, DESCRIPTION. Entries: 0 ft. to 30 ft. Clay, 30 ft. to 80 ft. Sapprolite, 80 ft. to 265 ft. granite

21. REMARKS

22. Certification: John H. Boyette 1-30-23

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 (UIC) 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