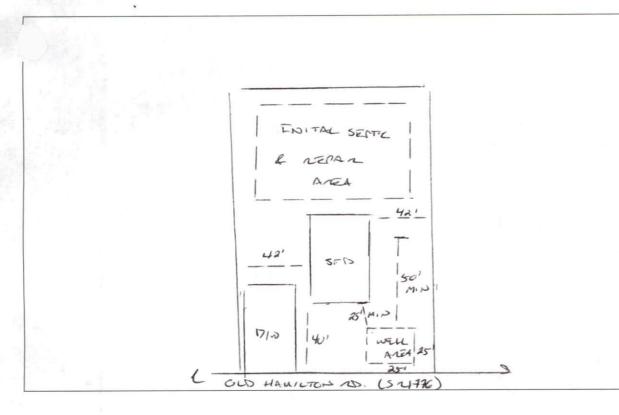
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #: 1506-47-1807.000 Parcel #: 061506 0067 05 Application #: SFD2203	-0068 Subdivision:	Lot #:
ress: 64 OLD HAMILTON RD DUNN, NC 28334		
Type of Facility Served by Well: <u>SFD</u>		
Sewage System: At- System		
Permit Conditions: 64 Old Hamilton Road (SR 1776)		
General Permit Conditions: • Drinking water supply well construction must meet 15A NCAC 02C.100 m • The permitted drinking water supply well shall be located in accordance w • ANY ALTERATION of the site of the site (including location of structur subject this Permit to revocation	with the SITE PLAN res and appurtenance) or modification	on in use of the well, r
Authorized State Agent Of Mile Cum, New Date	04/04/2032	
Grouting Inspection Witnessed Date ☐ Grouting self-certified by driller GW-1 provided? ✓ Yes ☐ No		
See attachment for construction sketch		
WELL CERTIFICATE OF CO	OMPLETION	
Date: Application #:SFD2203-0068 Well Contractor:		
licant Name: CUMBERLAND HOMES INC ress: 64 OLD HAMILTON RD DUNN, NC 28334 Directions to Site: 64 OLD HAMILTON RD (SR 1776) Use of Well: Date Drilled: Total Depth: Static Water Level: Top of Casing is in. above surface. Disinfection: Type Amount	Replacement Well? Yes Yield: gpm at ft.	No
Water Zone (depth) Casing From To From To From To Diameter: Material: Thickne From To Diameter: Material: Thickne	From To	Method:
From To	From To	
Diameter: Material: Thickne	ss: Material:	Method:
Inspector: On Hold Date: Release Date:		
Remarks:		
Well Head Information Casing Height: 10 ¹¹ (above finished grade) Access Port: Well ID Tag: Pump ID Tag: Sampling Tap: Sample Taken? Yes No Well Head properly sealed:	Vent Stack: Backflow Preventer:	1, 7
arks:		
Authorized State Agent Date Date	12-19-22	
See Attachment for completion sketch		

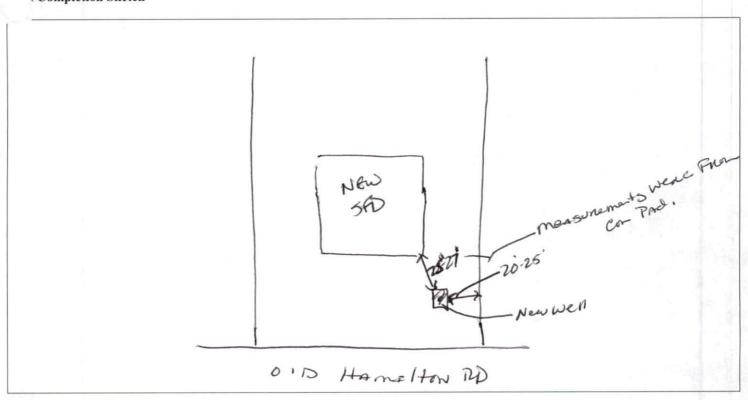
Subdivision:

Lot #: _

Well Construction Sketch



| Completion Sketch



SFD 2203- WX68

WELL CONSTRUCTION RECORD (GW-1)

Well ID#

Date Well Completed*



Form GW-1 Well Construction Electronic Form North Carolina Department of Environmental Qualit Division of Water Resources

								,	
								Si	ubmission ID#
			GW1-2	022-10271					
Are you submitting	g a scanned	form?*	Yes No						
CONTACT INF	ORMATIC	N							
Contact Name*				Email Addr	*				
Jonathan Kamionk	а			office@bills		.com			
Is this a revision t	to the form y	ou have previ	ously subm	nitted?"					
Yes No									
WELL CONST	RUCTION	INFORMA	TION						
1. Who is installing Owner Well	-	s?*							
1. Well Contractor	Information	:							
Certiticate #	Cert Level	First Name		Last Name		Company	y Name		
3465	Α	JONATHAN		KAMIONKA		BILLS W	ELL DRILLING	CO, INC.	
2. Well Constructi	on Permit #:								
SFD2203-0068									
List all applicable we etc.)	Il construction p	permits (i.e. Monit	oring Wells, U	IIC- Underground Inj	ection Contr	rol, CCPCU	A-Central Coastal	Plain Capacit	y Use Area, Coun
What type of well	is this?*	Injection W Water Supp		ludes irrigation we		Non-Wat	ter Supply Well		
3. Water Supply W	i Ir	Geothermal (He rigation Residential Wat Vells > 100,000	er Supply (s	0. 522.0	Mu		mmercial blic/Community Vater Supply (sh	ared)	
4. Date well was o	ompleted an	d ID#							

Well Yield

(gallons per minute)

	ocat	

Facility/Owner Name

Cumberland Homes

(Required)

County* Harnett

Physical Address*

Street Address

64 Old Hamilton Road

Address Line 2

City

Dunn Postal / Zip Code

28334-7148

Latitude * 35.3098420000

Decimal degrees

Facility ID#

(If applicable)

Parcel Identification No. (PIN)

061506006705

State / Province / Region

NC

Country

US

Longitude *-78.6510263000

Decimal degrees

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

7. Is this a repair to an existing well: *

Yes 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.

For multiple Geoprobe/DPT or Closed-Loop Geothermal Wells having the same construction, only 1 GW-1 is needed.

8a. Indicate TOTAL NUMBER of wells drilled:

9. Total well depth below land surface: (ft.)

For multiple wells list all depths if different (example- 3@200' and 2@100')

85

10. Static water level below top of casing: (ft.)

If water level is above casing, use "+"

9a. What is the depth of the casing from ground

surface? 148

in feet

11. Borehole diameter:

5.75

in inches

12. Well construction method:

Auger **Direct Push** Air Rotary Mud Rotary

Cable Tool Rotosonic

Other

13. FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm)

20

If applicable

13b. Disinfection type: *

HTH

13a. Method of test:

blow

13b. Amount: *

1 cup

14. WATER BEARING/FRACTURE ZONES

From

To

Description

260 in feet 280 in feet

15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)

From

To

Diameter

in inches

Thickness

Material

1.00 in feet 148.00 in feet 6.25

SDR21

PVC

17. SCREEN

From

To

Diameter

Thickness

Material

in feet

in feet

in inches

18. GROUT

From

To

Material

Emplacment Method & Amount

0.00 in feet 25.00 in feet bentonite

poured

19. SAND/GRAVEL PACK (if applicable)

From

To

Material

Clay

Emplacment Method

in feet

in feet

20. DRILLING LOG

F	r	C	I	1	1
_		^	_		

To

Description (color, hardness, soil/rock type, grain size, etc.)

0.00

7.00

in feet

in feet

7.00

III IOCI

in feet

9.00

111 101

- -

in feet 135.00

9.00

in feet

in feet

135.00 in feet

in feet

160.00 in feet

in feet

160.00 280.00

Mixed Clay

Green Rock

Dark Gray & Black Rock

Gravel & Sandstone

21. Remarks

22. Site diagram or additional well details:

You may upload additional well construction information here. pdf only

CERTIFICATION INFORMATION

* 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. Certification

Tonathan Kamionka

Signature of Certified Well Contractor