

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

PIN #: 0547-09-2523

Parcel #:

Application #: SFD2411-0089

Subdivision:

Lot #:

Applicant Name: Eric Pappan

Address: 1087 Loop Rd (SR 1132)

Type of Facility Served by Well: 77'x62' SFD

Sewage System: 25% reduction

Permit Conditions: Well to be drilled in Well Area

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] REHS

Date 1-6-25

Expiration Date 1-6-30

Construction Authorization Expires within five years of issue

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 #: SFD2411-0089

Well Contractor: _____

Applicant Name: Eric Pappan

Address: 1087 Loop Rd (SR 1132)

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 _____

Water Zone (depth)

From _____ To _____

From _____ To _____

From _____ To _____

Casing

From _____ To _____

Diameter: _____ Material: _____ Thickness: _____

From _____ To _____

Diameter: _____ Material: _____ Thickness: _____

From _____ To _____

Diameter: _____ Material: _____ Thickness: _____

Grout

From _____ To _____

Material: _____ Method: _____

From _____ To _____

Material: _____ Method: _____

From _____ To _____

Material: _____ Method: _____

Inspector: _____ On Hold Date: _____ Release Date: _____

Remarks: _____

Well Head Information

Casing Height: 16 (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

[Signature] REHS

Date 5-27-25

See Attachment for completion sketch

Application #:

SFD2411-0089

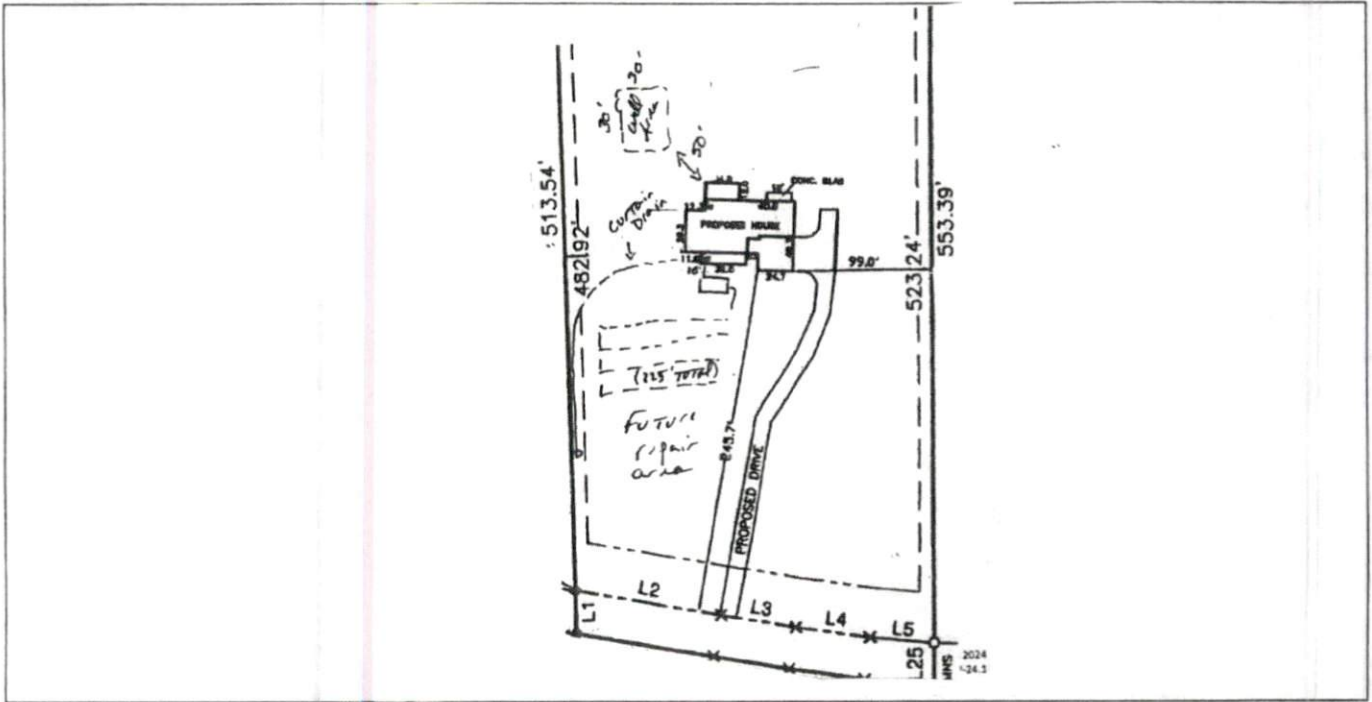
Applicant Name:

Eric Pappan

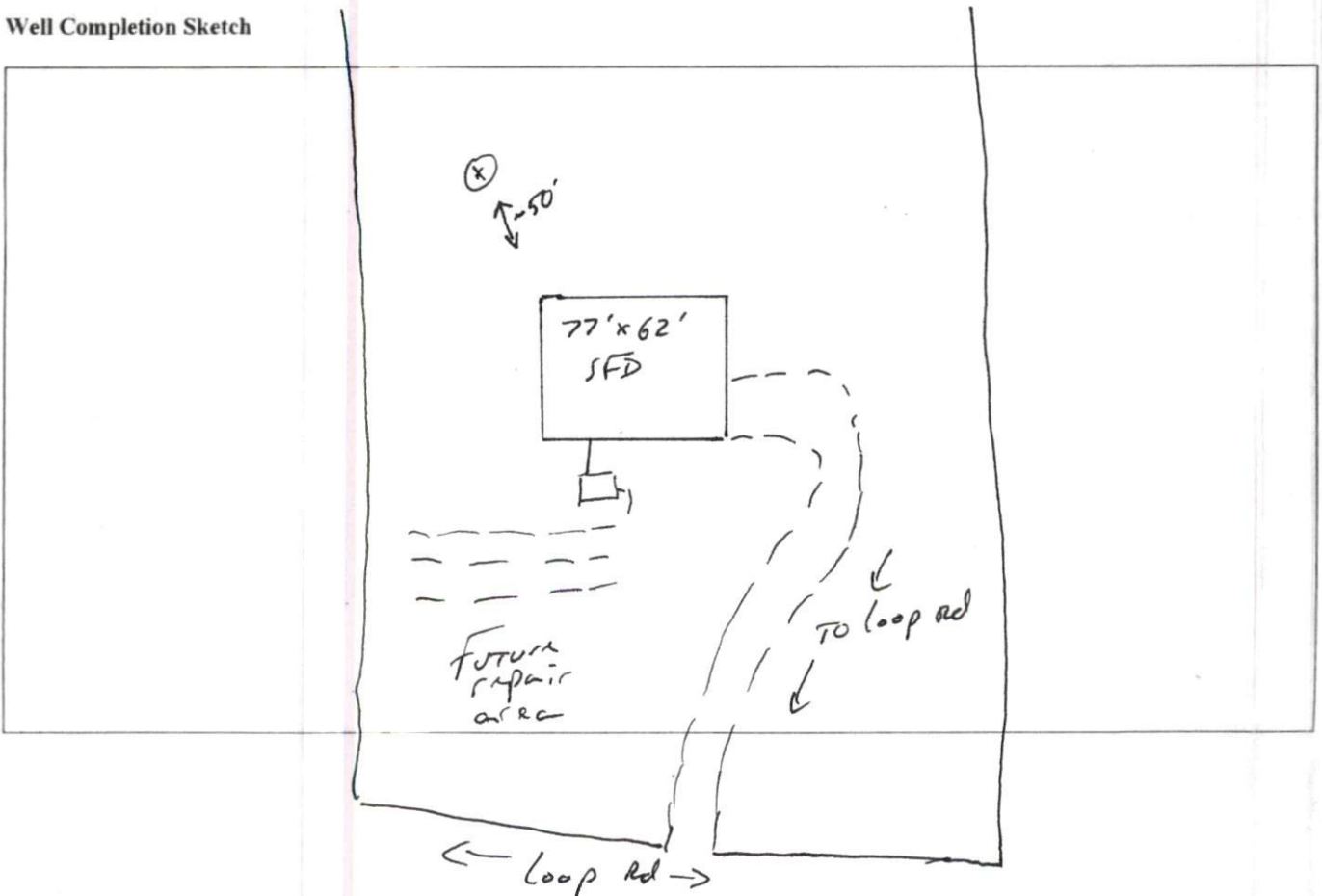
Subdivision:

Lot #:

Well Construction Sketch



Well Completion Sketch



-1087 loop Rel -

WELL CONSTRUCTION RECORD (GW-1)



NORTH CAROLINA
Environmental Quality

Form GW-1 Well Construction Electronic Form
North Carolina Department of Environmental Quality
Division of Water Resources
October 24, 2023

Submission ID#

GW1-2025-02639

Are you submitting a scanned form? *

- ☐ Yes
☒ No
(Preferred)

CONTACT INFORMATION

Contact Name *

Felton Jacobs

Email Address *

felton@upfrontwells.com

Is this a revision to the form you have previously submitted? *

- ☐ Yes ☒ No

WELL CONSTRUCTION INFORMATION

1. Who is installing these wells? *

- ☐ Owner ☒ Well Contractor

1. Well Contractor Information:

Certificate #	Cert Level	First Name	Last Name	Company Name
2765	A	FELTON	JACOBS	Upfront Well Company

2. Well Construction Permit #:

List all applicable well construction permits (i.e. Monitoring Wells, UIC- Underground Injection Control, CCPCUA-Central Coastal Plain Capacity Use Area, County, etc.)

What type of well is this? *

- ☐ Injection Well
☒ Water Supply Well (includes irrigation wells)
☐ Non-Water Supply Well

3. Water Supply Well *

- ☐ Geothermal (Heating/Cooling Supply)
☐ Irrigation
☒ Residential Water Supply (single)
☐ Industrial/Commercial
☐ Municipal/Public/Community
☐ Residential Water Supply (shared)

3.1 Is this well > 100,000 GPD *

- Yes ☒ No

4. Date well was completed and ID#

Date Well Completed *

Well ID#

Well Yield

4/26/2025

20

(gallons per minute)"

5. Well Location

Facility/Owner Name *

Selena Cardenas

(Required)

Facility ID#

(If applicable)

County *

Harnett

Parcel Identification No. (PIN)

Physical Address *

Street Address

1604 Young Road

Address Line 2

City

Angier

Postal / Zip Code

27501

State / Province / Region

NC

Country

US

Latitude * 35.4906119000

Decimal degrees

Longitude * 78.6673638000

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:

1

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

204

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

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

131

in feet

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

20

If water level is above casing, use "+"

11. Borehole diameter:

6

in inches

12. Well construction method:

☐ Auger

☐ Direct Push

☐ Other

☒ Air Rotary

☐ Mud Rotary

☐ Cable Tool

☐ Rotosonic

13. FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm)

20

If applicable

13a. Method of test:

Blow

13b. Disinfection type: *

HTH

13b. Amount: *

1 lb.

14. WATER BEARING/FRACTURE ZONES

From	To	Description
190	195	20 GPM
in feet	in feet	

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

From	To	Diameter	Thickness	Material
1.00	131.00	6.00	.188	Galvanized
in feet	in feet	in inches		

17. SCREEN

From	To	Diameter	Thickness	Material
in feet	in feet	in inches		

18. GROUT

From	To	Material	Emplacement Method & Amount
0.00	20.00	Hole Plug	Poured
in feet	in feet		

19. SAND/GRAVEL PACK (if applicable)

From	To	Material	Emplacement Method
in feet	in feet		

20. DRILLING LOG

From	To	Description (color, hardness, soil/rock type, grain size, etc.)
0.00	3.00	Top Soil
in feet	in feet	
3.00	20.00	Clay
in feet	in feet	
20.00	205.00	Granite
in feet	in feet	

21. Remarks

Used Steel Hardened Drive Shoe

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

FELTON JACOBS

Signature of Certified Well Contractor