ICHD - ENVIRONMENTAL HEALTH DIVISION

INSPECTIONS (704) 664-3703 Statesville Office (704) 878-5305 x3456 Mooresville Office (704) 660-3625

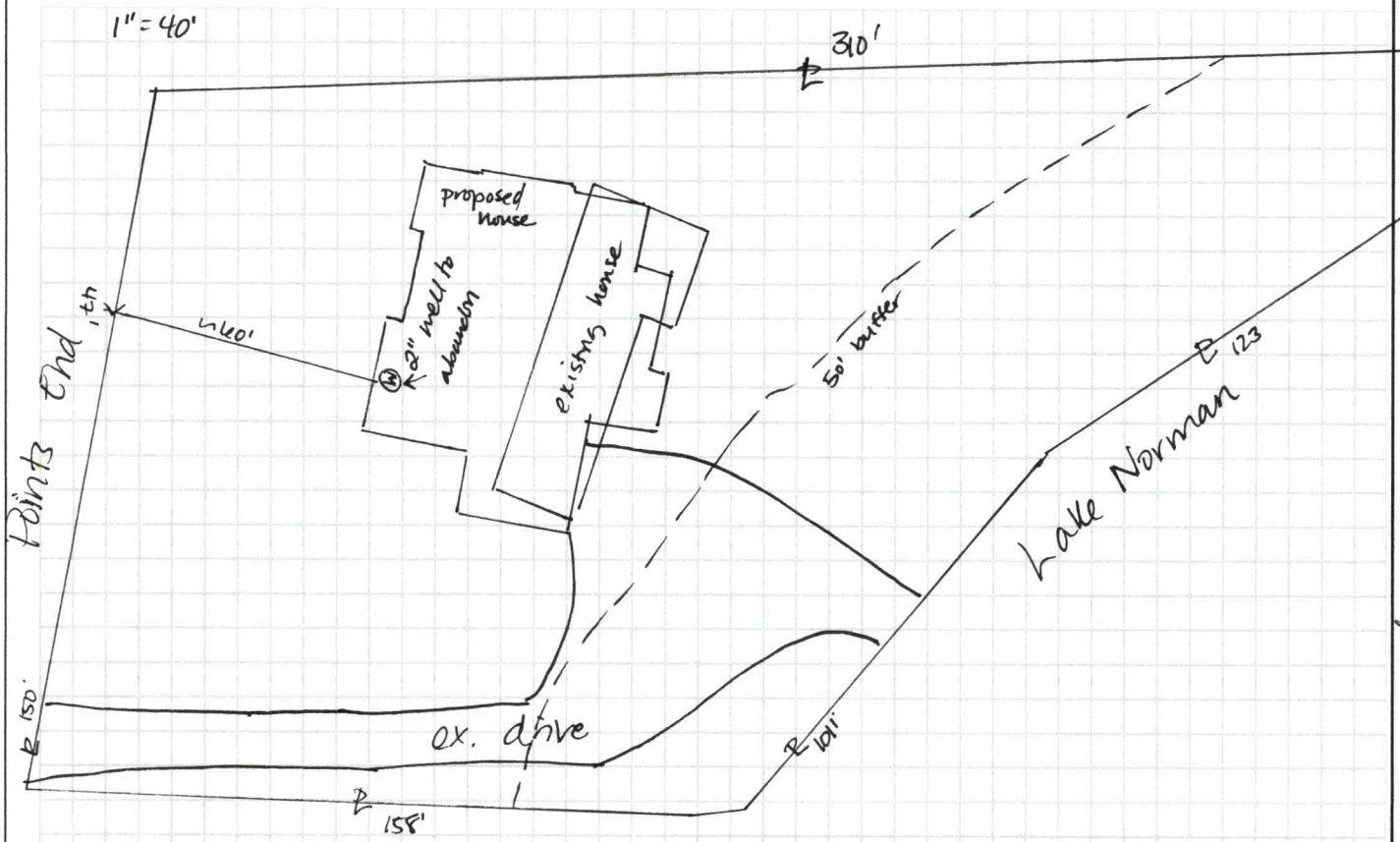
PRIVATE DRINKING WELL WATER PERMIT # OSWP-2023-15721 PIN # 4624-21-2971 ✓ Type of Permit: EH Private Drinking Water Well Abandonment

APPLICANT / OWNER NAME: JOHN DAYVAULT ADDRESS: 5310 MIAMI CHURCH ROAD, CONCORD, NC 28025 PHONE: 7047207885

DIRECTIONS TO SITE: W Brawley School -> continue to end of road -> lot on R

SITE ADDRESS: 152 POINTS END DR, MOORESVILLE, NC 28117 ✓ SUBDIVISION: CL&T ✓ SECTION/LOT: 6 / 436 ✓

INITIAL SITE SKETCH



GROUTING RESULTS

Total Depth _____

Depth of Casing _____

Yield _____

Notes:

2 bags Bentonite poured

see attached variance for equipment left in well.

Well GPS Latitude _____

Longitude _____

Permit Conditions / Comments: Follow all NCAC 2C rules Chlorinate before abandonment, All completely w/ approved grout

2/15/23 WELL PERMIT ISSUED BY: Danielle Wieberg DATE: (Permit is valid for 5 years from date issued. This permit may be revoked if it is determined there has been a material change in any fact or circumstance upon which the permit is issued. Actions of the employees of the Iredell County Health Department shall in no way be taken as a guarantee that this well will produce water of any particular quantity or quality or for any amount of time. Employees of the Iredell County Health Department assume no liability for any damages, either direct or consequential which may be caused by this well.)

Well Contractor: Homeowner - Dayvault CONTRACTOR CERT #: N/A GROUT INSPECTION BY: Ben Botkins DATE: 2/16/23

OR CERTIFICATION OF GROUT NOT WITNESSED BY DEPT: _____ DATE: _____ WELL HEAD INSPECTION BY: _____ DATE: _____

WELL HEAD INSPECTION (check when completed): GROUT TO GROUND SURFACE ☐ WELL CONTRACTOR ID PLATE ☐ PUMP INSTALLER ID PLATE ☐ SAMPLE PORT ☐

ACCESS PORT / VENT ☐ WELL SEAL ☐ WELL HEAD 12 INCHES / PITLESS ADAPTOR 8 INCHES ABOVE GRADE ☐

CERTIFICATE OF COMPLETION BY: D Wieber DATE: 2/23/23 WATER SAMPLES BY: _____ DATE: _____

Attachments: Form GW-1a (required except for abandonment) ☐ Form GW-30 ☒ Water Sample Results ☐ Plat ☐

CALL 704-664-3703 to schedule grout or well head inspections between 8-9am

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK T. BENTON • Assistant Secretary for Public Health
Division of Public Health

Onsite Water Protection Branch
February 20, 2023

John O. Dayvault III and Beverly A. Flinn
5310 Miami Church Rd
Concord, NC 28025

Re: Approval No. JMB2918

Private Well Not Free From Obstructions Prior to Abandonment [Rule 15A NCAC 2C .0113(b)(2)]

Property location:
152 Points End Drive
Mooresville, NC 28117

Dear Mr. Dayvault and Ms. Flinn:

On February 17, 2023, a variance request was submitted for the above referenced property from the Well Construction standards, Title 15A North Carolina Administrative Code Subchapter 2C .0100. The variance request is regarding abandonment of a water supply well at the above referenced property.

Specifically, the variance you request would grant you permission to abandon a drilled water supply well without it being clear of obstructions. Part of the pumping equipment has broken off and cannot be retrieved from the well.

Based upon information provided by the Iredell County Health Department and, it is my finding that you meet the conditions necessary for approval of a variance as specified by 15A NCAC 2C .0118 (a) (1) and (2). On that basis and provided that the well is to be abandoned as follows, the requested variance is approved:

1) The well shall be pumped full off a neat cement grout material from the obstruction to the land surface.
2) An abandonment permit shall be obtained from the Iredell County Health Department, and they shall be notified prior to the abandonment so that they will have the opportunity to inspect the abandonment procedure.

The approval of this variance does not affect any of the other requirements or limitations of the Well Construction Standards, or to your responsibility to comply with any other applicable Federal, State, or local laws or regulations. This variance is for this project only.

If you are dissatisfied with this decision, you may commence a contested case by filing a petition under G.S. 150B-23 within sixty (60) days of your receipt this decision. Should you have any questions, please call me at (828) 713-3335.

Sincerely,

John Brooks

John M. Brooks R.E.H.S, MS

WELL ABANDONMENT RECORD

For Internal Use ONLY:

1. Well Contractor Information:

JOHN O. DAYVAULT III

Well Contractor Name (or well owner personally abandoning well on his/her property)

NC Well Contractor Certification Number

Company Name

2. Well Construction Permit #: OSWP-2023-15721

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

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	
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 7g)

4. Date well(s) abandoned: 16 FEB 2023

5a. Well location:

JOHN O. DAYVAULT III

Facility/Owner Name

Facility ID# (if applicable)

152 POINTS END DRIVE MOORESVILLE, NC

Physical Address, City, and Zip

IREDELL

County

4624-21-2971

Parcel Identification No. (PIN)

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

35.498235* N -80.941022* W

CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED

*Attach well construction record(s) if available. For multiple injection or non-water supply wells **ONLY** with the same construction/abandonment, you can submit one form.*

6a. Well ID#:

6b. Total well depth: > 40' (ft.)

6c. Borehole diameter: 2 (in.)

6d. Water level below ground surface: <40' (ft.)

6e. Outer casing length (if known): (ft.)

6f. Inner casing/tubing length (if known): (ft.)

6g. Screen length (if known): (ft.)

WELL ABANDONMENT DETAILS

7a. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same well construction/depth, only 1 GW-30 is needed. Indicate TOTAL NUMBER of wells abandoned:

7b. Approximate volume of water remaining in well(s): 5 (gal.)

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: granular calcium hypochlorite 65%

7d. Amount of disinfectant used: 8 OZ

7e. Sealing materials used (check all that apply):

☐ Neat Cement Grout	■ Bentonite Chips or Pellets
☐ Sand Cement Grout	☐ Dry Clay
☐ Concrete Grout	☐ Drill Cuttings
☐ Specialty Grout	☐ Gravel
☐ Bentonite Slurry	☐ Other (explain under 7g)

7f. For each material selected above, provide amount of materials used:

100LBS

7g. Provide a brief description of the abandonment procedure:

15A NCAC 02C .0100

Disinfect and fill with Enviroplug medium

8. Certification:

John O. Dayvault III

Signature of Certified Well Contractor or Well Owner

19 FEB 2023

Date

By signing this form, I hereby certify that the well(s) was (were) abandoned in accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

9. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well abandonment details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

10a. For All Wells: Submit this form within 30 days of completion of well abandonment to the following:

**Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617**

10b. For Injection Wells: In addition to sending the form to the address in 10a above, also submit one copy of this form within 30 days of completion of well abandonment to the following:

**Division of Water Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636**

10c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well abandonment to the county health department of the county where abandoned.

Danielle Wieberg

From: Brooks, John M <john.brooks@dhhs.nc.gov>
Sent: Wednesday, February 22, 2023 3:35 PM
To: Danielle Wieberg
Subject: RE: [External] Fwd: well variance application

That should be fine.

John Brooks, REHS, MS
Environmental Health Regional Specialist
Division of Public Health, On-Site Water Protection Branch
N.C. Department of Health and Human Services
5605 Six Forks Road
1632 Mail Service Center
Raleigh, NC 27699-1632
Phone: 828-713-3335
John.Brooks@dhhs.nc.gov
http://ehs.ncpublichealth.com/oswp/

Email correspondence to and from this address is subject to the North Carolina Public Records Law and may be disclosed to third parties.

Twitter YouTube

Unauthorized disclosure of juvenile, health, legally privileged, or otherwise confidential information, including confidential information relating to an ongoing State procurement effort, is prohibited by law. If you have received this e-mail in error, please notify the sender immediately and delete all records of this e-mail.

From: Danielle Wieberg <danielle.wieberg@co.iredell.nc.us>
Sent: Tuesday, February 21, 2023 9:21 AM
To: Brooks, John M <john.brooks@dhhs.nc.gov>
Cc: Benjamin Botkins <benjamin.botkins@co.iredell.nc.us>; sourceeng@windstream.net
Subject: FW: [External] Fwd: well variance application

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to Report Spam.

John –
The homeowner at this location has already abandoned the well using Bentonite chips. Ben Botkins witnessed the abandonment and he poured slowly & it did not bridge off. Will this be sufficient? Thanks!

Danielle Wieberg
Environmental Health Specialist – OSWW
704-902-4482

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625

PERMIT # OSWP-2022-12157

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4624-21-2971

APPLICANT / OWNER: JOHN DAYVAULT | APPLICANT ADDRESS: 5310 MIAMI CHURCH ROAD, CONCORD, NC 28025

SITE ADDRESS: 152 POINTS END DR, MOORESVILLE, NC 28117 | PHONE: 7043054745 | ALT. PHONE: 7047207885

SITE DIRECTIONS: W on Brawley School -> end of Brawley veer right onto Points End -> lot on R

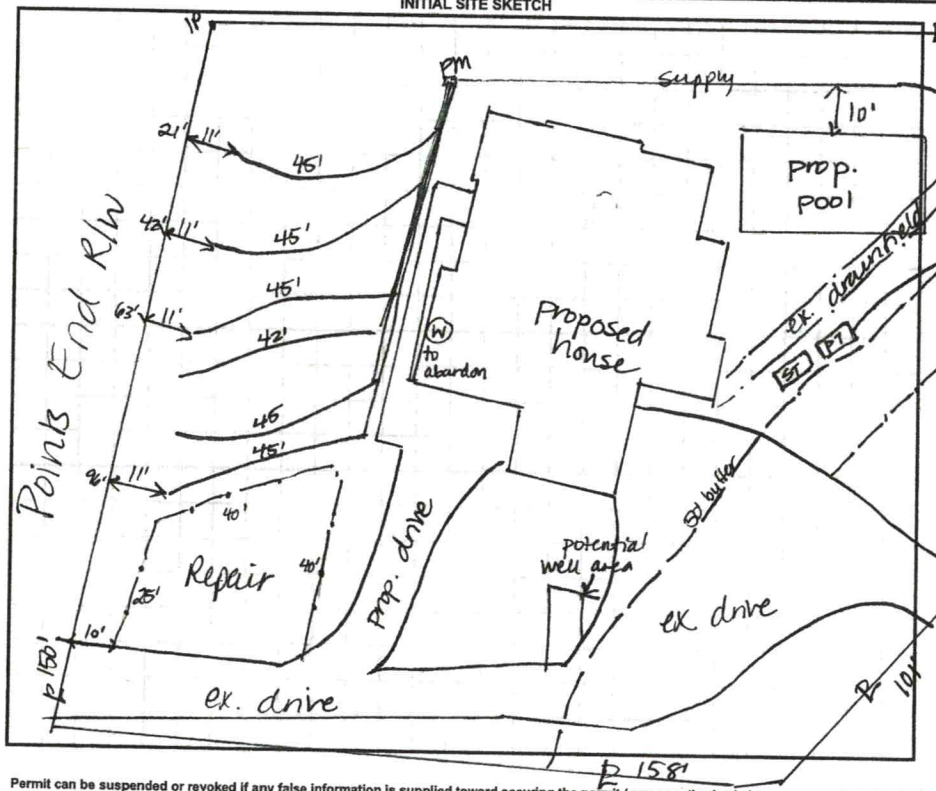
SUBDIVISION: CL&T | SECTION: 6 | LOT #: 436 | LOT AREA: 0.81 | SAP CONTROLLED: YES ☐ NO ☑ | DESIGN FLOW: 480 | L.T.A.R.: 0.3

Septic Tank: 1000 (gal)	STB:	Date:	☐ New System ☐ Repair ☑ Expansion	System Type: III	☑ Residence	No. Bedrooms: 4	Water Supply: New Well
Pump Tank: 1000 (gal)	PT:	Date:	System Description: VPPBPS - PM		☐ Business	No. Persons: 8	
Pump Make:	Model:	Serial #:	Repair System Description: LPVPPBPS		☐ Other	No. Employees: 0	
# Nitrification Fields: 1	# Lines: 6	Linear Ft.: 267	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☑ Crawl Space	
Trench Width: 24	Trench Bottom Depth (Low side): 30		Gravel Depth: 0	☐ GRAVITY ☑ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

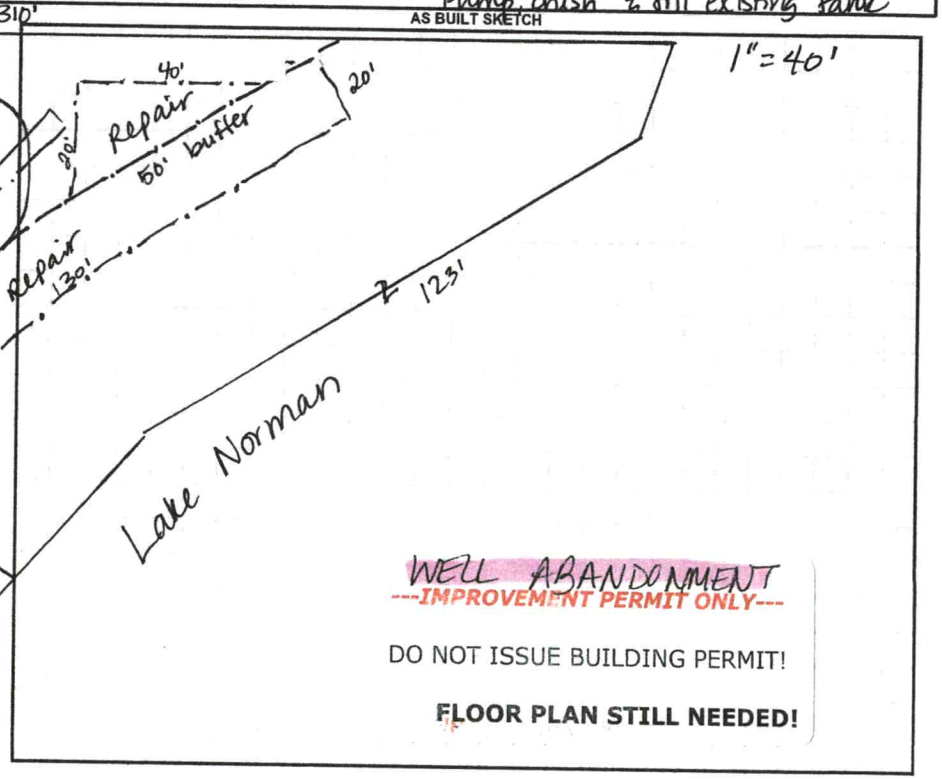
Comments / Conditions: Do not pave, grade, drive, park, or bury utilities in the drainfield. Install on contour, use pressure manifold for distribution. Keep supply line 10' from future pool area - pool must be staked at time of installation & inspection. Pressure manifold: 2" supply, 2' pressure head. Each line: 10 panels, 1/2" SCH 80 tap. Dose = 216g Flow = 32.88 gpm Runtime = 6.6 min Drawdown = 10.3"

Pump, crush & fill existing tank

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ IMPROVEMENT PERMIT with plat valid without expiration. ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date:

IMPROVEMENT PERMIT by: D. Wiebenz Date: 2/14/23

AUTHORIZATION TO CONSTRUCT by: Date:

Installed By:

OPERATION PERMIT by: Date:

Existing System Inspected By: Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.