NW

ICHD Environmental Health Division

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

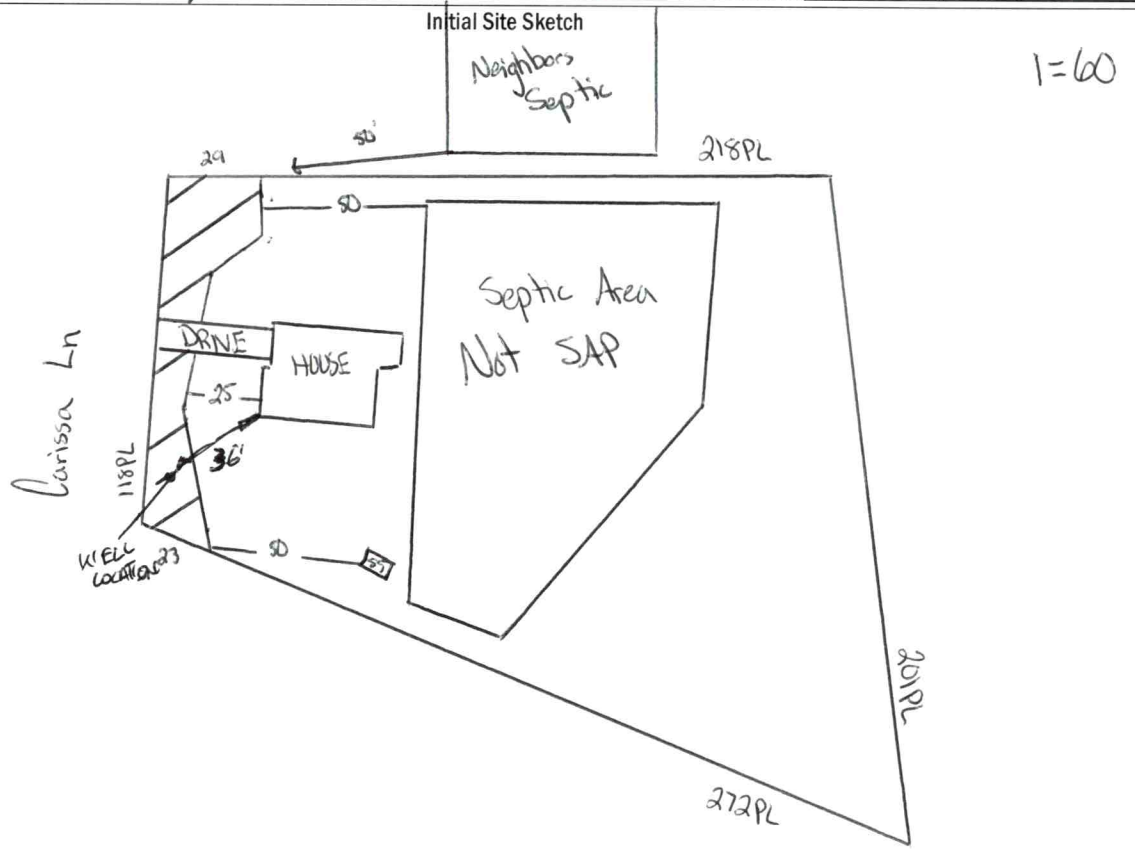
PRIVATE DRINKING WATER WELL PERMIT # 324890 **PIN #** 4740 - 40 - 0254 ✓ **Type of Permit (circle one):** [New] Repair Abandonment

APPLICANT/OWNER NAME: Helmsman Homes LLC ADDRESS: 116 Gasoline Alley, Suite 105 PHONE: 980-500-1251

DIRECTIONS TO SITE: Flower House - Clontz Hill - Ridge Creek - Wiltshire - E Panther Creek - Carrisa

SITE ADDRESS: 111 Carissa Ln, Troutman 28166 ✓ SUBDIVISION: Wiltshire Creek ✓ SECTION/LOT: 35

Initial Site Sketch



CALL 704-664-3703 for Grout or Well Head Inspections Between 8-9am

GROUTING RESULTS

Total Depth 165FT

Depth of Casing 72ft

Yield 30GPM

Notes: GROUTED 24FT W/ HOLEPLUG

Emailed 8/1/22

PERMIT CONDITIONS/COMMENTS: Follow all NC well drilling rules.

WELL PERMIT ISSUED BY: Cory Wilt DATE: 7/26/22 (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: B&K CONTRACTOR CERT #: 2670-A GROUT INSPECTION BY: Buford C. Watts DATE: 9-6-2022

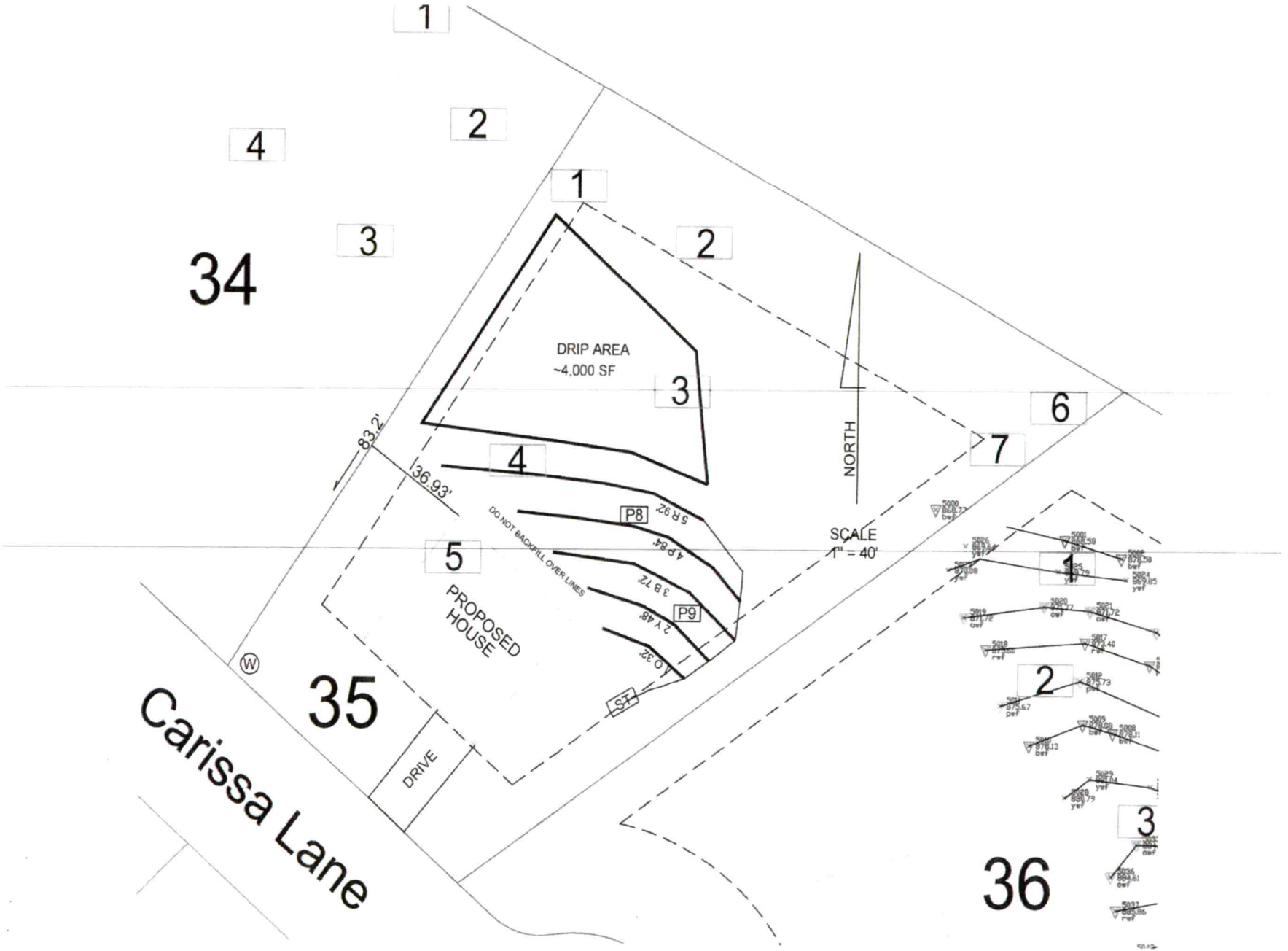
OR CERTIFICATION OF GROUT NOT WITNESSED BY DEPT: DATE: WELL HEAD INSPECTION BY: Sydney Holland DATE: 3/3/23

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: Sydney Holland DATE: 3/6/23 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


1
2
4
1
3
2
34
DRIP AREA
~4,000 SF
3
6
7
NORTH
63.2'
4
136.93'
P8
5 R 92'
4 P 84'
DO NOT BACKFILL OVER LINES
SCALE
1" = 40'
5
3 B 72'
P9
PROPOSED
HOUSE
2 Y 48'
1 O 32'
ST
1
2
35
DRIVE
Carissa Lane
3
36

WELL CONSTRUCTION RECORD (GW-1)

For Internal Use Only:

1. Well Contractor Information:
Alfred Kiesling Sr
Well Contractor Name
2670-A
NC Well Contractor Certification Number
B & K Well Drilling Inc
Company Name

2. Well Construction Permit #: 324890
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: 9/6/22 Well ID#

5a. Well Location:
Helmsman Home
Facility/Owner Name — Facility ID# (if applicable)
111 Carrara Ln Lot 35
Physical Address, City, and Zip
Fredell — 4740 48 0254
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: 165 (ft.)
For multiple wells list all depths if different (example- 3@200' and 2@100')

10. Static water level below top of casing: 40 (ft.)
If water level is above casing, use "+"

11. Borehole diameter: 6 1/8 (in.)

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

FOR WATER SUPPLY WELLS ONLY:
13a. Yield (gpm) 40 Method of test: Air Lift
13b. Disinfection type: Chlor. Tabs Amount: 1 1/2 Lbs

14. WATER ZONES

FROM	TO	DESCRIPTION
70 ft.	155 ft.	NO ZONES
155 ft.	165 ft.	LARGE ZONES

15. WATER CASING (for multi-cased wells, GO ON LINE #16 if applicable)

FROM	TO	DIAMETER	THICKNESS	MATERIAL
0 ft.	70 ft.	6 1/4 in.	SDR-21	PVC

16. LINER CASING OR TUBING (number of strings too)

FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	ft.	in.		
ft.	ft.	in.		

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	20 ft.	Bentonite	Pour
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.)
0 ft.	15 ft.	RED SOIL
15 ft.	35 ft.	YELLOW SANDY SOIL
55 ft.	55 ft.	MIXED BLACK SAND GRAVEL
55 ft.	70 ft.	MIXED GRANIT
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

22. Certification:
Signature of Certified Well Contractor — Date: 9-14-22

By signing this form, I hereby certify that the well(s) has (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