ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # OSWP-2023-13375

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

PIN # 4765-01-9247

APPLICANT / OWNER: richard E linke | APPLICANT ADDRESS: 312 St Andrews RD, Statesville, NC 28625

SITE ADDRESS: 312 ST ANDREWS RD, STATESVILLE, NC 28625 | PHONE: (704) 798-9738 | ALT. PHONE:

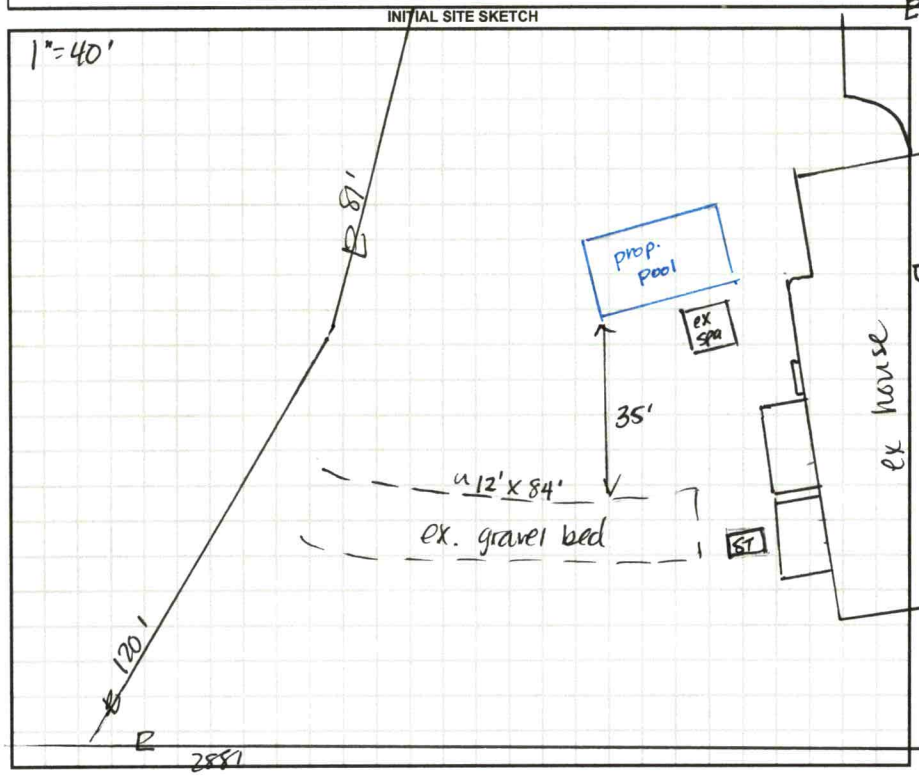
SITE DIRECTIONS: N 77 -> Exit 50 -> R Broad -> R St Andrews -> lot on R | SAP CONTROLLED: YES ☐ NO ☐

SUBDIVISION: Shannon Acres | SECTION: 1 | LOT #: 102 | LOT AREA: 0.93 | DESIGN FLOW: EXIST | L.T.A.R.: EXIST

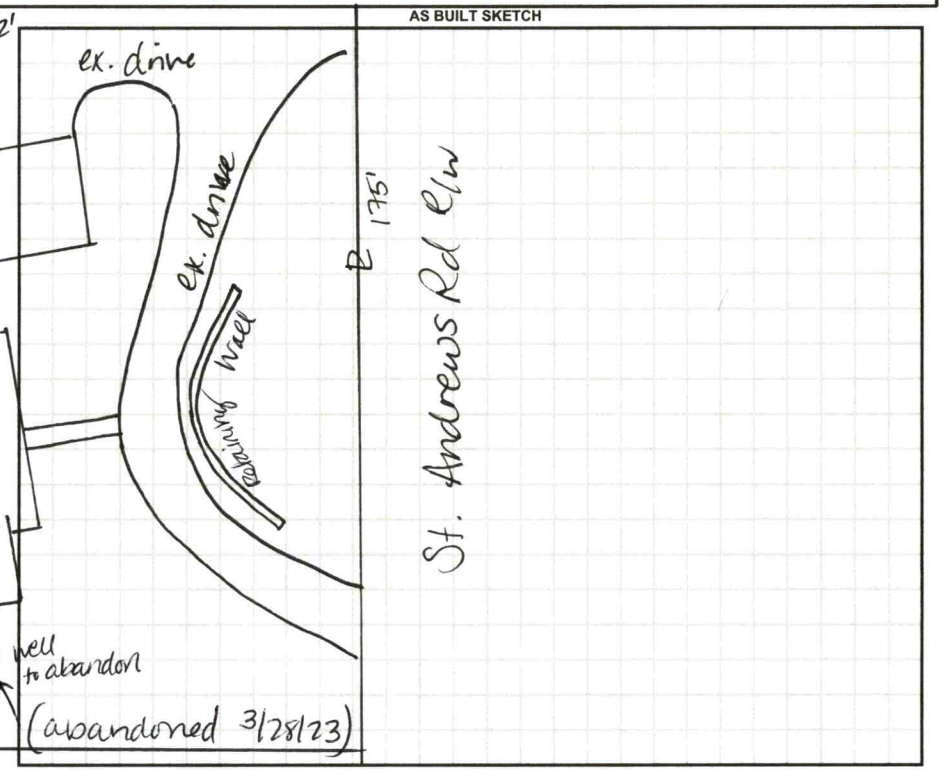
Septic Tank: (gal)	STB:	Date:	☐ New System ☐ Repair ☐ Expansion	System Type: II	☑ Residence	No. Bedrooms: ~~EX~~	Water Supply: Existing Well
Pump Tank: (gal)	PT:	Date:	System Description: Existing		☐ Business	No. Persons: EX	
Pump Make:	Model:	Serial #:	Repair System Description: Existing		☐ Other	No. Employees:	
# Nitrification Fields: 1	# Lines:	Linear Ft.:	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☐ Crawl Space	
Trench Width:	Trench Bottom Depth (Low side):		Gravel Depth:	☑ GRAVITY ☐ PRESSURE	☑ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions: Keep the water's edge of pool 15' from all parts of the septic system. Keep all traffic off of septic system.

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: _____ Date: _____ Installed By: Lackey Brothers in 1971

IMPROVEMENT PERMIT by: _____ Date: _____ OPERATION PERMIT by: _____ Date: _____

AUTHORIZATION TO CONSTRUCT by: _____ Date: _____ Existing System Inspected By: D Wilberg Date: 3/29/23

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

PERMIT SNAPSHOT REPORT OSWP-2023-13375 FOR IREDELL COUNTY

Permit Type: Environmental Health OSWP
Work Class: EH Existing Septic System
Status: Need to Draw
Valuation: $0.00

Project:
District: Statesville
Square Feet: 0.00
Assigned To: Wieberg, Danielle

App Date: 01/10/2023
Exp Date: NOT AVAILABLE
Completed: 02/02/2023
Approval Expire Date:

Description: locate laterals for pool --zoning was approved on POOL-2023-14603 by Xavier-he had emailed saying he didn't need to do it on this permit.

Parcel: 4765019247.000 Main
Address: 312 St Andrews Rd Main
Statesville, NC 28625
Zone: R-15(Urban Fringe Low Density Residenti

Property Owner
richard E linke
Mobile: (704) 798-9738

Applicant/Authorized Agent
richard E linke
312 St Andrews RD
Statesville, NC 28625
Mobile: (704) 798-9738

Permit Custom Fields

How is your site plan being submitted	Custom Site Plan	Does the site contain any jurisdictional wetlands	No	Non-domestic Sewage Generated	No
Other Public Agency	No	All proposed structure dimensions	14x 28 swimming pool	What are the proposed structures	Swimming Pool
If other Addition/Structure, please explain		Maximum Number of Bedrooms	3	Number of Occupants	2
Foundation Type	Basement with Plumbing	Residential/Business/Other	Residential	Water Supply	Existing Well
Desired Septic System Type	Conventional (most common)	If existing, Year existing system installed	1971	# of Nitrification Fields	1
Septic System Type	II	System Description	Existing	Repair System Description	Existing
Maintenance Agreement Required	No	Gravity/Pressure	Gravity	Comments/Conditions	Keep the water's edge of pool 15' from all parts of the septic system. Keep all traffic off of septic system.
Permit type(s)	Authorization to Construct, Improvement Permit with Site Plan	Lot Acreage	0.93	Is the structure or development in the floodplain	No
Is the property located downtown?	No	Is the property in a local historic district?	No	Additional Unique Setbacks Apply	No
Zoning Notes/Addendums		Site Directions	N 77 -> Exit 50 -> R Broad -> R St Andrews -> lot on R	Subdivision	Shannon Acres
Parcel Lot	102	Parcel Section	1	Septic Installer	Lackey Brothers in 1971

Attachment File Name	Added On	Added By	Attachment Group	Notes
Signature_richard_E_1/10/2023.jpg	01/10/2023 14:56	E linke, richard		Uploaded via CSS
312 ST ANDREWS RD SEPTIC PERMIT 1971.pdf	01/12/2023 16:20	COMEAUX, DEBRA	Available Online	SEPTIC PERMIT 1971
New Pool Yard Layout_v1.pdf	01/12/2023 16:21	COMEAUX, DEBRA	Available Online	Site Plan
312 st andrews authorization.pdf	01/26/2023 9:43	Horton, Amanda		
13375 site plan.docx	01/26/2023 9:53	Horton, Amanda		
13375 site plan 2.pdf	01/26/2023 9:55	Horton, Amanda		
13375 survey site plan.pdf	01/26/2023 12:48	Horton, Amanda		
13375 email from Xavier.pdf	03/01/2023 12:28	Horton, Amanda		

Inspection Number	Status	Inspection Type	Request Date	Scheduled Start Date	Scheduled End Date	Actual Start Date	Actual End Date

PERMIT SNAPSHOT REPORT (OSWP-2023-13375)

2023-70123	Passed - Permit	Existing System Inspection	03/10/2023	03/10/2023 7:11	03/10/2023 7:11

Inspectors: Bracken, Sarah (Primary)

2023-72237	Partial Pass	OSWP Septic/Well Preliminary Site Visit	03/15/2023	03/16/2023 13:22	03/16/2023 13:22

Inspectors: Wieberg, Danielle (Primary)

Checklist Item	Description	Passed	Comments
General Comments	Checklist item used to track general comments, not specific to any other checklist item	No	

Note	Created By	Date and Time Created
1. Pool not marked, is supposed to call/text whenever ready. Informed applicant of option of waiver - applicant said that he would proceed with existing system permit.	Sarah Bracken	03/08/2023 9:55

Invoice No.	Fee	Fee Amount	Amount Paid
INV-00009972	Existing System Inspection	$250.00	$250.00
	Total for Invoice INV-00009972	**$250.00**	**$250.00**
	Grand Total for Permit	**$250.00**	**$250.00**

Workflow Step / Action Name	Action Type	Start Date	End Date
Application Completeness Check v.1		01/26/2023 9:55	01/26/2023 9:55
Confirm application complete v.1	Generic Action		01/26/2023 9:55
~~**Zoning Review v.1**~~		01/26/2023 12:51	03/07/2023 8:47
~~Fees Paid v.1~~	Generic Action		03/07/2023 8:47
~~Issue Invoice v.1~~	Generic Action		03/07/2023 8:47
Statesville Zoning Approval v.1	Task	01/26/2023 12:51	
Fees v.1		03/07/2023 8:48	03/07/2023 8:48
Fees Paid v.1	Generic Action		03/07/2023 8:48
Issue Invoice v.1	Generic Action		01/26/2023 14:41
Lot Readiness Verification v.1		03/10/2023 7:11	
Existing System Inspection v.1	Inspection	03/10/2023 7:11	03/10/2023 7:12
OSWP Septic Preliminary Site Visit v.1	Inspection	03/16/2023 13:22	03/16/2023 13:22
OSWP Septic Preliminary Site Visit v.2	Inspection	03/16/2023 0:00	
Environmental Health Review v.1			
Environmental Health Approved For Building Permit v.1	Generic Action		
EH Inspections v.1			
OSWP Alarm Checked v.1	Inspection		
OSWP Drain Lines Checked v.1	Inspection		
OSWP Electrical Checked v.1	Inspection		
OSWP Floats Checked v.1	Inspection		
OSWP Maintenance Contract v.1	Inspection		
OSWP Pressure Head Checked v.1	Inspection		
OSWP Pressure Manifold Checked v.1	Inspection		
Permit Completion Process v.1			
Issue Permit/Complete v.1	Generic Action		

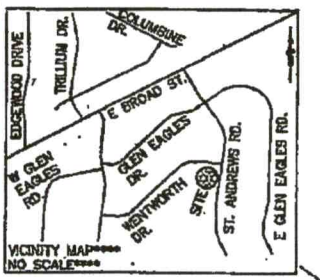
DAS

DON ALLEN & ASSOCIATES, P.A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 684, page 388, and/or plat book 6, page 43, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C. my hand and seal on the 19, day of MARCH A.D. 20 21

WILLIAM M. ALLEN

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN



PB.6 PG.43

LOT 97
DWIGHT & CAROL WINDSOR IRREVOCABLE TRUST
2662/1688

LOT 99
CYNTHIA A. & DAVID M. TUCKER
1826/2470

LOT 100
VANG IA & TENG YANG HEIRS
2199/893

LOT 102
(0.93 AC.)

LOT 103
KNUT O. KVERNELAND
2229/1453

LOT 101
JOAN FRICKHOEFFER REVOC. LIV. TRUST,
1958/599

N46°14'05"E 120.26'
N29°54'08"E 80.66'
287.83'
N79°01'39"W
S79°10'00"E (BASE BEARING)
191.87'
100.2'
30' REAR
30' FRONT
10' SIDE
10' SIDE
29.3'
41.2'
55.5'
S10°51'22"W 174.96'
S80°18'46"W 49.89' (TIE ONLY)
PK NAIL
EIP
R/W
COVERED GRAVEL PAD
WOOD DECK
BRICK WALLS
CONC WALK
1 STORY BRICK COMP ROOF
BRICK PORCH
CONC WALK
PAVED DRIVE
PAVED DRIVE
BRICK WALL
OVERHEAD POWER
ST ANDREWS RD.
(60' R/W)

LEGEND
P.P. = POWER POLE
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
W = WELL

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) OVERHEAD POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) SETBACKS SHOWN PER ZONING ZONED STATESVILLE R-15

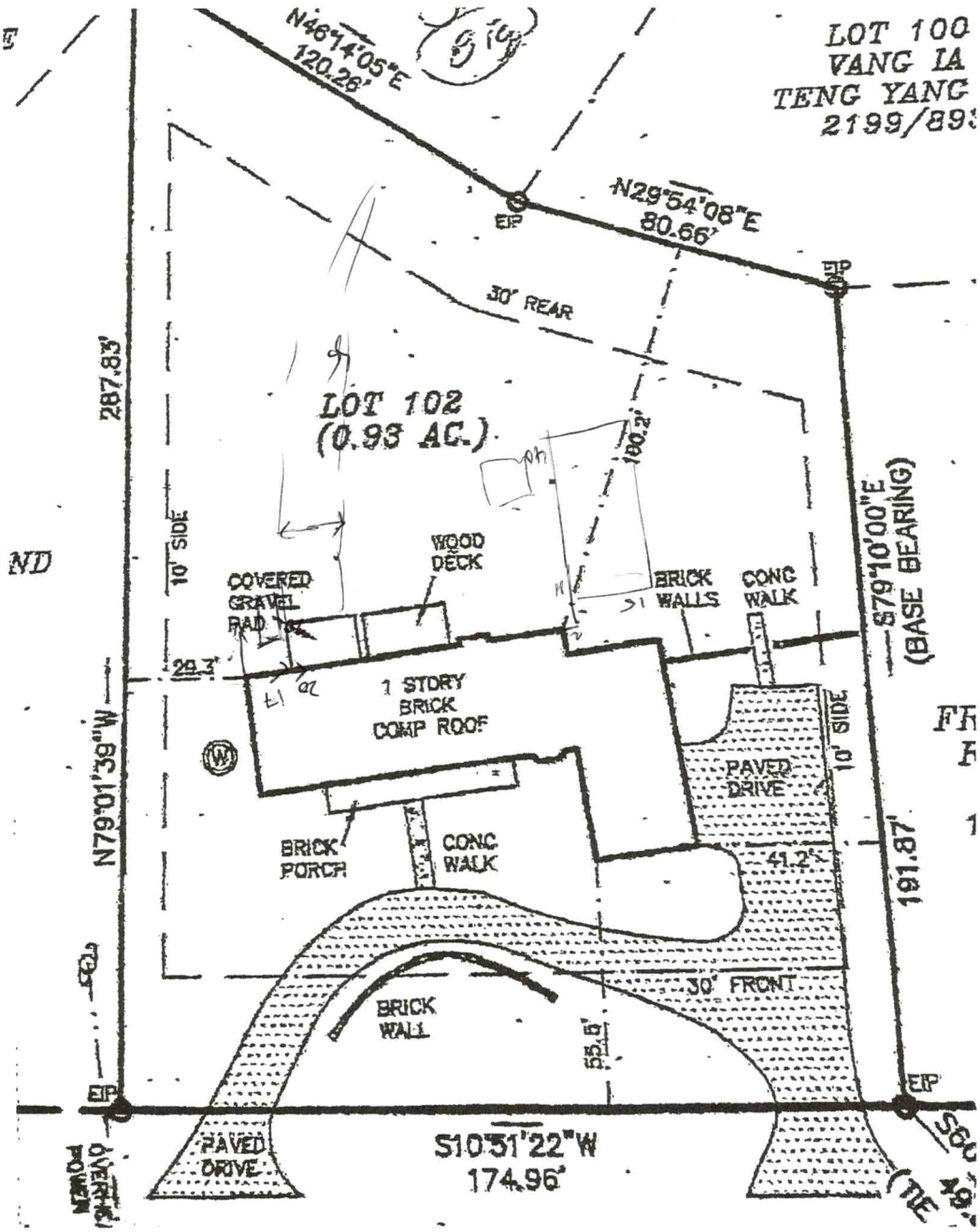
0' 25' 50' 100'
SCALE IN FEET

PHYSICAL SURVEY

OF
312 ST. ANDREWS RD
LOT 102 SHANNON ACRES MAP 1

SCALE 1" = 50'
CHAMBERSBURG TWP., IREDELL CO., N.C.
ACQUIRED BY: RICHARD E. LINKE & VIRGINIA M. RUDOLPH-LINKE

FIELD BOOK: 502M
FILE: SHANNON ACRES 102 M1.DWG
DC FILE:
TAX MAP NO: 4765018247


N46°14'05"E
120.28'
LOT 100
VANG IA
TENG YANG
2199/89
N29°54'08"E
80.66'
EIP
30' REAR
LOT 102
(0.93 AC.)
287.83'
10' SIDE
WOOD DECK
COVERED GRAVEL PAD
BRICK WALLS
CONC WALK
29.3'
1 STORY BRICK COMP ROOF
PAVED DRIVE
10' SIDE
S79°10'00"E
(BASE BEARING)
191.87'
N79°01'39"W
BRICK PORCH
CONC WALK
41.2'
30' FRONT
BRICK WALL
55.6'
PAVED DRIVE
S10°51'22"W
174.96'



Tax Map Information

• PIN	4765019247.000
• Address	312 ST ANDREWS RD
• Account #	Acct 80081573
• Tax Owner	LINKE RICHARD E
• Mailing Address	312 SAINT ANDREWS RD
•	STATESVILLE, NC 28625
• GIS Owner	LINKE RICHARD E+VIRGINIA M RUDOLPH LINKE
• Deed Info	2808 / 809 - WD - 20210429
• Tax Acres	0 LT
• Lot #	102
• Description	SHANNON ACRES M1 BLKE PB6-43-43A
• Zoning	r-15
• Old Parcel #	1305S04000E015
• Bldg Value	$300,560
• OBXF Value	$4,760
• Land Value	$55,000
• Total Value	$360,320
• Defer Value	$0
• Tax Districts	STATESVILLE-- -

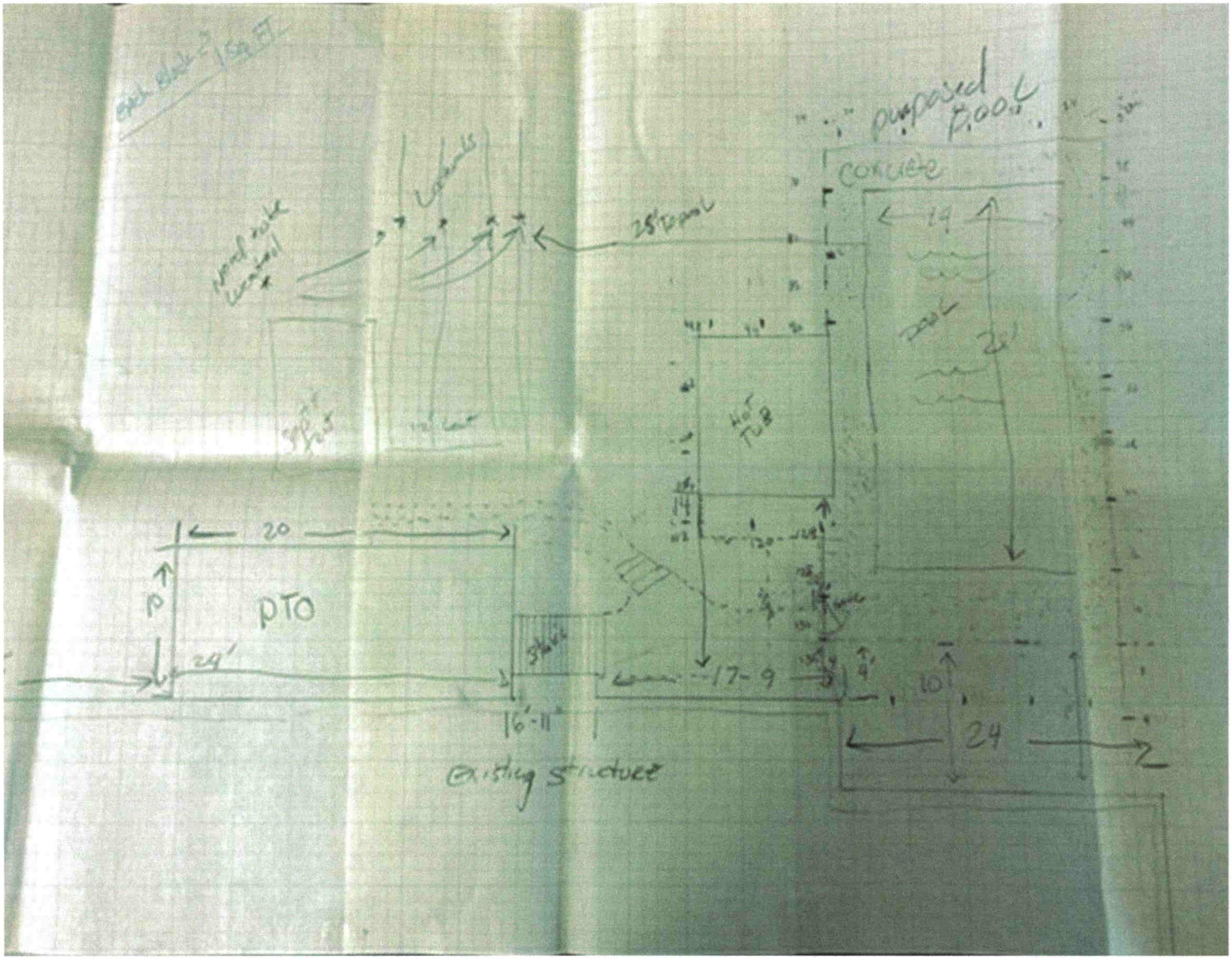
IREDELL COUNTY NC

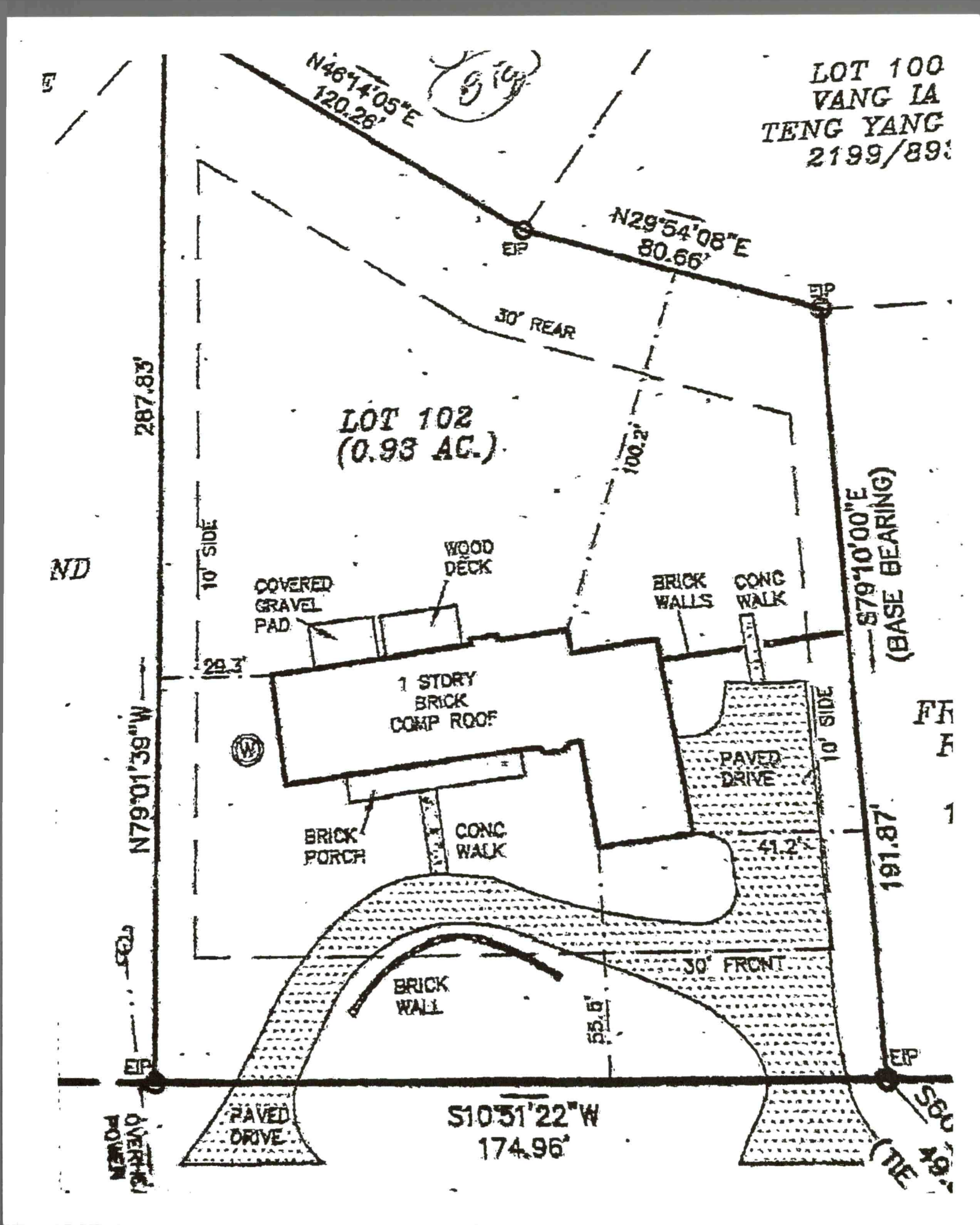
MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT

Iredell County, North Carolina makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

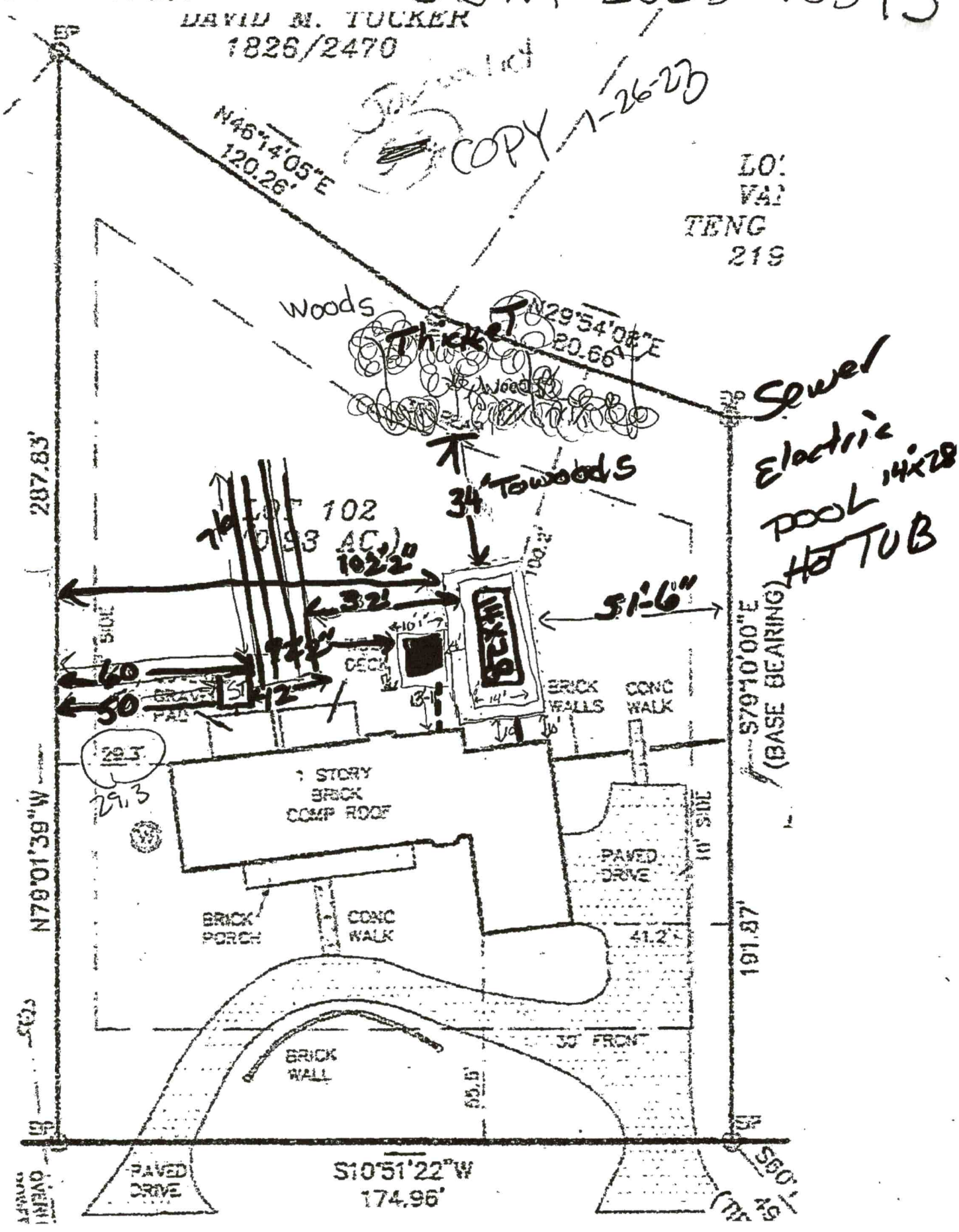
Geometry updated 02/24/2023
Data updated 02/24/2023

Print map scale is approximate. Critical layout or measurement activities should not be done using this resource.


proposed roof
concrete
19
25'
Hot Tub
20
PTO
24'
17-9
16'-11"
existing structure
24


N46°14'05"E
120.26'
LOT 100
VANG IA
TENG YANG
2199/89
N29°54'08"E
80.66'
EIP
EIP
30' REAR
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(0.93 AC.)
287.83'
100.2'
10' SIDE
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GRAVEL
PAD
BRICK
WALLS
CONC
WALK
S79°10'00"E
(BASE BEARING)
29.3'
1 STORY
BRICK
COMP ROOF
PAVED
DRIVE
10' SIDE
N79°01'39"W
BRICK
PORCH
CONC
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41.2'
191.87'
30' FRONT
BRICK
WALL
55.6'
EIP
EIP
PAVED
DRIVE
S10°51'22"W
174.96'

Iredell OSWP-2023-13375



Permit No. _____ Permit Date 9-30 19__

Owner J.V. Johnson Bldrs. Address Statesville, N.C.

Installed By Lackey Bros. Address Stony Point, N.C.

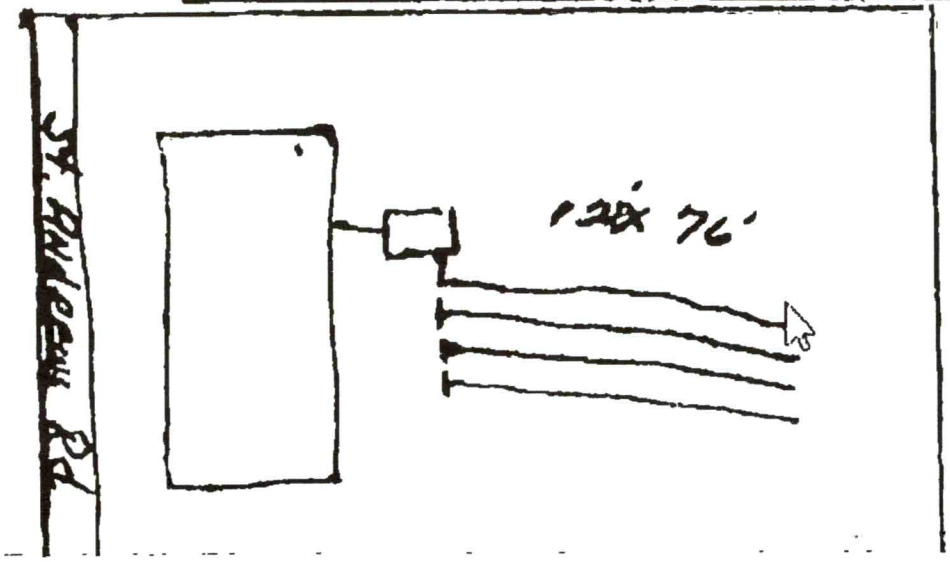
Location of Property Statesville Country Club section — St. Andrews Rd. on Rt.

Tank		Capacity		Length of Lines		Fixtures	
Block	( )	1000	( )	225'	( )	No. of Baths	(3½)
Precast	(✓)	1250	(✓)	250'	( )	Dishwasher	( )
		1500	( )	Other 300		Garbage Grdr.	( )
		Other _____		600 sq ft.		Other _____	

NOTIFY HEALTH DEPARTMENT AT LEAST EIGHT HOURS BEFORE TANK IS TO BE INSPECTED.

Final Inspection 9-30 1971 Approved (✓) Disapproved ( )

Remarks _____



No Perc Test Run - on Lot Owners Responsibility

WELL ABANDONMENT RECORD

For Internal Use ONLY:

1. Well Contractor Information:

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

NC Well Contractor Certification Number

Company Name

2. Well Construction Permit #: 2023-19357
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: March 28, 2023

5a. Well location:

Richard Linke
Facility/Owner Name

Facility ID# (if applicable)

312 St. Andrews Rd
Physical Address, City, and Zip

4765-01-9247
Sect 1 Lot 102
Parcel Identification No. (PIN)

Iredell
County

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

— N — 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#: Unknown

6b. Total well depth: IDT (ft.)

6c. Borehole diameter: 6" (in.)

6d. Water level below ground surface: 35 Feet (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: 1

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

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: Calcium Hypochlorite

7d. Amount of disinfectant used: 4 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:

598 lbs Bentonite

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

fill bore with Bentonite until Full, filled with water, and probed

8. Certification:

Signature of Certified Well Contractor or Well Owner

3-28-2023
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.

ICHD - ENVIRONMENTAL HEALTH DIVISION

Public Health — Prevent. Promote. Protect. — Iredell County Health Department

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

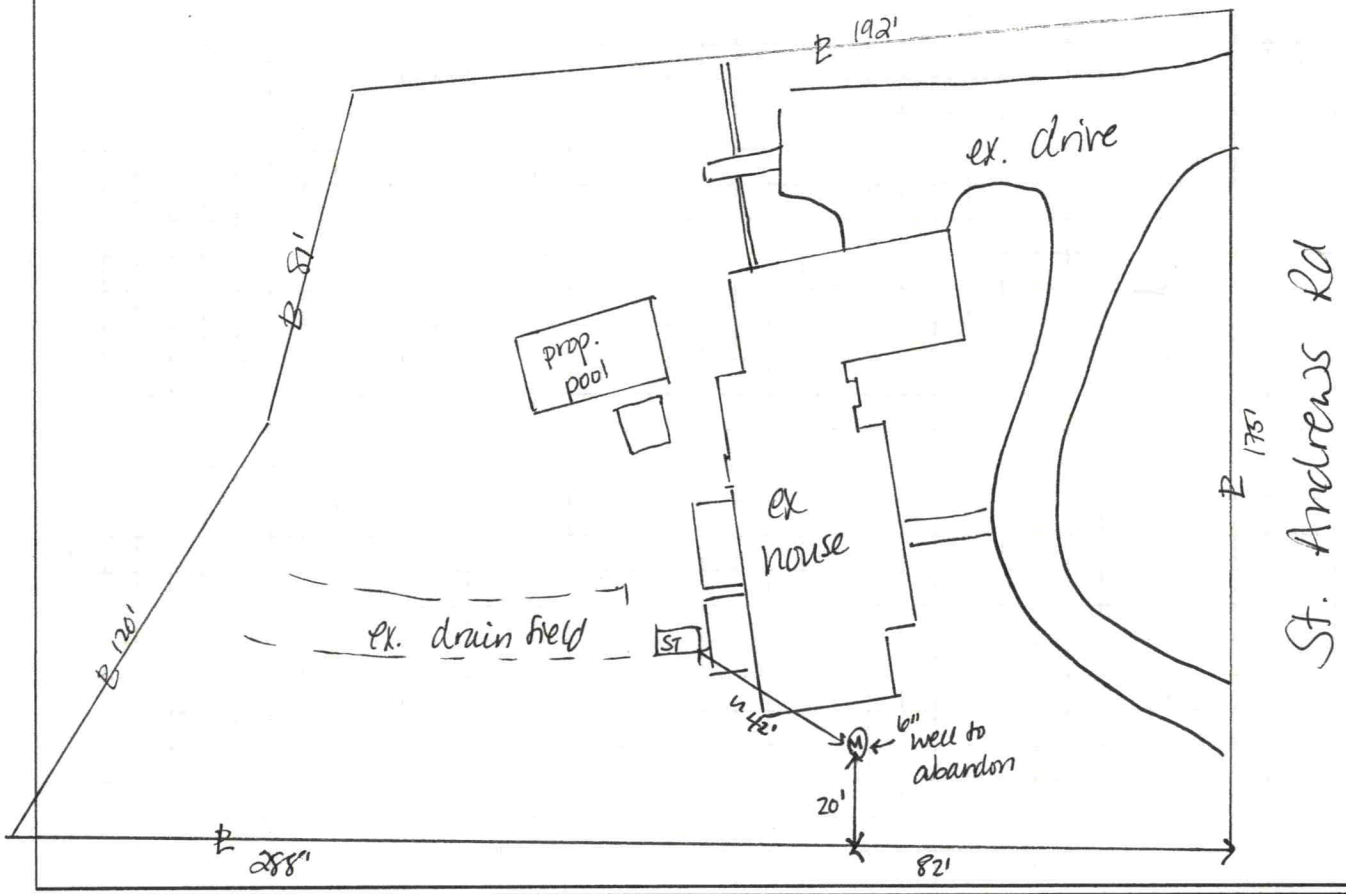
PRIVATE DRINKING WELL WATER PERMIT # OSWP-2023-19357 PIN # 4765-01-9247 ✓ **Type of Permit: EH Private Drinking Water Well Abandonment** *

APPLICANT / OWNER NAME: Richard Linke **ADDRESS:** 312 St Andrews RD, Statesville, NC 28625 **PHONE:**

DIRECTIONS TO SITE: N77 -> Exit 50 -> R Broad -> R St Andrews -> lot on R

SITE ADDRESS: 312 ST ANDREWS RD, STATESVILLE, NC 28625 ✓ **SUBDIVISION:** Shannon Acres ✓ **SECTION/LOT:** 1 / 102 ✓

INITIAL SITE SKETCH



GROUTING RESULTS

Total Depth _____

Depth of Casing _____

Yield _____

Notes:

12 bags

Well GPS Latitude _____

Longitude _____

Permit Conditions / Comments: Follow all NCAC 2C Well rules - pull pump & all other equipment from well, chlorinate with granular chlorine, fill completely with approved grout.

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: Richard Linke (Homeowner) **CONTRACTOR CERT #:** — **GROUT INSPECTION BY:** Sarah Bracken **DATE:** 3/28/2023

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: [signature] **DATE:** 3/29/2023 **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

WELL ABANDONMENT RECORD

For Internal Use ONLY: Shannon Acres Lot 102

1. Well Contractor Information:

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

NC Well Contractor Certification Number

Company Name

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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: March 28, 2023

5a. Well location:

Richard Linke
Facility/Owner Name

Facility ID# (if applicable)

312 St. Andrews Rd Statesville
Physical Address, City, and Zip

4765-01-9247
Sect 1 Lot 102
Parcel Identification No. (PIN)

Iredell
County

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

— N — 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#: Unknown

6b. Total well depth: 187 (ft.)

6c. Borehole diameter: 6" (in.)

6d. Water level below ground surface: 35 Feet (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: 1

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

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: Calcium Hypochlorite

7d. Amount of disinfectant used: 4 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:

598 lbs Bentonite

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

fill bore with Bentonite until Fully filled with water, and probed

8. Certification:

Signature of Certified Well Contractor or Well Owner — Date: 3-28-2023

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.