

8320 BLAIR RD

13901104

1/10/2008

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

CHARLOTTE
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 8/1/2006 04:50 PM

LABORATORY SERVICES DIVISION

LOCATION: G-838
LOC ID: G-NEW
SAMPLE DATE-TIME: 7/27/2006 9:40
SAMPLE DESCRIPTION: Grab

CHAIN OF CUSTODY #: 06070585

	Parameter	Result	Units	RL	Method	Start Date/ Time	Analyst
AB80947	**E. COLI-PA**	**absent**	**P/A**		SM 9223B	7/27/2006 13:20	KEK
AB80947	**Total Coliform**	**absent**	**P/A**		SM 9223B	7/27/2006 13:20	KEK

Comment:

Laboratory Supervisor: _____

Laboratory Certifications: McAlpine NC DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8320 Blair Rd., Charlotte, NC 28227
LAB CODE:	REAL PRIV (NEW) TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#: 06670585
Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform
G-838 A680947	DH	7-27-06 9:40 am	N/A N/A	N	NA	1.8				X	100 ml		1						X		X

Instructions:
Complete all yellow shaded sections
For each parameter requested circle the X to verify your request.
Nutrients include: Ammonia, TKN, Total Phosphorus, Nitrate/Nitrite
Metals: Itemize the individual metals requested here -
For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.
Blue is for lab use only
Comments: **3-DAY TAT REQUESTED**

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell		7/27/06	1147
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

CHARLOTTE.
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 8/4/2006 04:59 PM

LABORATORY SERVICES DIVISION

LOCATION: G-838
LOC ID: G-NEW
SAMPLE DATE-TIME: 7/27/2006 9:40
SAMPLE DESCRIPTION: Grab

CHAIN OF CUSTODY #: 06070584

	Parameter	Result	Units	RL	Method	Start Date/ Time	Analyst
AB80946	**NITRATE**	**0.52**	**mg/L**	0.05	EPA 353.2	8/3/2006 11:57	EWN
AB80946	**NITRITE**	**<0.05**	**mg/L**	0.05	EPA 353.2	7/28/2006 14:47	EWN

Comment:

Laboratory Supervisor: _____

Laboratory Certifications: McAlpine N.C. DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8320 Blair Rd., Charlotte, NC 28227
LAB CODE:	REAL PRIV (NEW) TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#: 06070584

Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Nitrate	Analyses Requested: Nitrite
G-838	DH	7-27-06 9:40am	N/A N/A	N	18.3°C	1.5°				X	500 ml		1			X					X	
G-838	DH	7-27-06 9:40am	N/A N/A	N	19.1°C	1.8°				X	125 ml		1	X								X

A880946

Instructions:

Complete all yellow shaded sections

For each parameter requested circle the X to verify your request.

Nutrients include:

Metals: Itemize the individual metals requested here -

For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.

Blue is for lab use only

Comments: ****Nitrate and Nitrate Analysis Requested****

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell		7/27/06	1146
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

CHARLOTTE
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 8/1/2006 04:50 PM

LABORATORY SERVICES DIVISION

LOCATION: G-838
LOC ID: G-NEW
SAMPLE DATE-TIME: 7/27/2006 9:40
SAMPLE DESCRIPTION: Grab

CHAIN OF CUSTODY #: 06070585

	Parameter	Result	Units	RL	Method	Start Date/ Time	Analyst
AB80947	**E. COLI-PA**	**absent**	**P/A**		SM 9223B	7/27/2006 13:20	KEK
AB80947	**Total Coliform**	**absent**	**P/A**		SM 9223B	7/27/2006 13:20	KEK

Comment:

Laboratory Supervisor: _____

Laboratory Certifications: McAlpine NC DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8320 Blair Rd., Charlotte, NC 28227
LAB CODE:	REAL PRIV (NEW) TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#: 06070585

Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform
G-838 A88094 7	DH	7-27-06 9:40 am	N/A N/A	N	NA	1.8				X	100 ml		1						X		X

Instructions:
Complete all yellow shaded sections
For each parameter requested circle the X to verify your request.
Nutrients include: Ammonia, TKN, Total Phosphorus, Nitrate/Nitrite
Metals: Itemize the individual metals requested here -
For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.
Blue is for lab use only.

Comments: **3-DAY TAT REQUESTED**

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell		7/27/06	1147
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

for David

6521B

RESIDENTIAL WELL CONSTRUCTION RECORD

North Carolina Department of Environment and Natural Resources - Division of Water Quality

WELL CONTRACTOR CERTIFICATION #: 2038

1. WELL CONTRACTOR:
John M Mullis
Well Contractor (Individual) Name
DL Mullis Well Drilling
Well Contractor Company Name
STREET ADDRESS: 9200 Surface Hill Rd
Charlotte NC 28227
City or Town State Zip Code
(704) 5455694
Area code - Phone number

2. WELL INFORMATION:
SITE WELL ID (if applicable)
STATE WELL PERMIT# (if applicable)
DWQ or OTHER PERMIT # (if applicable)
WELL USE (Check Applicable Box): Residential Water Supply [✓]
DATE DRILLED: 5-19-06
TIME COMPLETED: 3:30 AM [ ] PM [✓]

3. WELL LOCATION:
CITY: Mint Hill COUNTY: Meck
8320 Blair Rd
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)
TOPOGRAPHIC / LAND SETTING:
[ ] Slope [ ] Valley [ ] Flat [ ] Ridge [ ] Other:
(check appropriate box)
LATITUDE: 35 11.076 N
LONGITUDE: 80 38.624 W
May be in degrees, minutes, seconds or in a decimal format
Latitude/longitude source: [ ] GPS [ ] Topographic map
(location of well must be shown on a USGS topo map and attached to this form if not using GPS)

4. WELL OWNER:
OWNER'S NAME: Blanche Dulin Whitley
STREET ADDRESS: 8320 Blair Rd
Charlotte NC 28227
City or Town State Zip Code
( ) _____
Area code - Phone number

5. WELL DETAILS:
a. TOTAL DEPTH: 165'
b. DOES WELL REPLACE EXISTING WELL? YES [✓] NO [ ]
c. WATER LEVEL Below Top of Casing: 25 FT.
(Use "+" if Above Top of Casing)
d. TOP OF CASING IS 1 FT. Above Land Surface*
*Top of casing terminated after below land surface may require a variance in accordance with 15A NCAC 2C .0118.
e. YIELD (gpm): 18 METHOD OF TEST: AIR

f. DISINFECTION: Type: HTH Amount: 1 QT
g. WATER ZONES (depth):
From 85 To 95, From ____ To ____
From 120 To 125, From ____ To ____
From 150 To 155, From ____ To ____

6. CASING:

Depth From	Depth To	Diameter (in.)	Thickness/Weight	Material
0	58	6"	SCH 40	PVC

7. GROUT:

Depth From	Depth To	Material	Method
0	20	Cement	poured

8. SCREEN:

Depth From	Depth To	Diameter	Slot Size	Material
		in.	in.	
		in.	in.	
		in.	in.	

9. SAND/GRAVEL PACK:

Depth From	Depth To	Size	Material

10. DRILLING LOG:

From	To	Formation Description
0	30	Red Clay
30	58'	Brown Sand Stone
58	90'	Gray Slate
90	126'	Blue Granite
126	165'	Blue Granite

11. REMARKS:

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

John M. Mullis 5-19-06
SIGNATURE OF CERTIFIED WELL CONTRACTOR DATE

John M. Mullis
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt., 1617 Mail Service Center – Raleigh, NC 27699-1617 Phone No. (919) 733-7015 ext 568.

Form GW-1a
Rev. 7/05

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8320 Blair Rd., Charlotte, NC 28227
LAB CODE:	REAL PRIV NEW TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#:

Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform
G-838	DH	7-27-06 9:40 am	N/A N/A	N	NA					X	100 ml		1						X		X

Instructions:

Complete all yellow shaded sections

For each parameter requested circle the X to verify your request.

Nutrients include: Ammonia, TKN, Total Phosphorus, Nitrate/Nitrite

Metals: Itemize the individual metals requested here -

For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.

Blue is for lab use only

Comments: **3-DAY TAT REQUESTED**

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell			
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

Mecklenburg County Health Department
Groundwater & Wastewater Services
700 N. Tryon St, Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

PERMIT TO CONSTRUCT A WATER SUPPLY WELL

Permit #: 10000838 **File #:** 6521B **Tax Parcel #:** 139-011-04
Property Owner: BLANCHE DULIN WHITLEY
Job Location Address: 8320 BLAIR RD
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/19/2006
Use of Well:
Type of Facility Served by Well: Other Residential
Sewage System Type: None

Area of Regulated Groundwater Usage Restrictions Apply: YES

Replacement for Existing Well: If Yes, see requirements in Other Conditions of This Permit.

General Conditions of This Permit:

- Water Supply Well construction must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A North Carolina Certified Well Contractor must perform the well construction activities.
- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Specific Conditions of This Permit (Check all that apply):

☐ Grout must be placed the full extent of the casing. ☐ Casing to bedrock

☐ Initial water sample to be taken and analyzed for (check all that apply):

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds ☐ Metals (Specify in Other Conditions)
☐ Pesticides ☐ Herbicides ☐ Other (See Below)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

No additional conditions as long as well installed in NE corner of property outside of 1,500' from MPL# 1108.

David Cornelius
Authorized Agent: Print Name
Signature:

Allison Price
Owner/Legal Agent: Print Name
Signature: Allison Price / DL Mullis

Mecklenburg County Health Department
Groundwater & Wastewater Services
700 N. Tryon St, Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

PERMIT TO CONSTRUCT A WATER SUPPLY WELL

Permit #: 10000838 **File #:** 6521B **Tax Parcel #:** 139-011-04
Property Owner: BLANCHE DULIN WHITLEY
Job Location Address: 8320 BLAIR RD
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/19/2006
Use of Well:
Type of Facility Served by Well: Other Residential
Sewage System Type: None

Area of Regulated Groundwater Usage Restrictions Apply: YES

Replacement for Existing Well: If Yes, see requirements in Other Conditions of This Permit.

General Conditions of This Permit:

- Water Supply Well construction must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A North Carolina Certified Well Contractor must perform the well construction activities.
- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Specific Conditions of This Permit (Check all that apply):

☐ Grout must be placed the full extent of the casing. ☐ Casing to bedrock

☐ Initial water sample to be taken and analyzed for (check all that apply):

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds ☐ Metals (Specify in Other Conditions)

☐ Pesticides ☐ Herbicides ☐ Other (See Below)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

No additional conditions as long as well installed in NE corner of property outside of 1,500' from MPL# 1108.

DAVID CORNELIUS
Authorized Agent: Print Name

Signature:

Owner/Legal Agent: Print Name

Signature:

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

PAGE 1 OF 1

CLIENT:	**Mecklenburg County, LUESA - Groundwater & Wastewater Services**
FACILITY:	Groundwater **(Potable Water)**
ADDRESS:	8320 Blair Rd., Charlotte, NC 28227
LAB CODE:	REAL PRIV NEW TNC MPL PME AMB LM OTHER

Send Report To:
Debra Howell
700 N. Tryon St., Suite 211
Charlotte, NC 28202

COC#:

Sampled By (Print Name)
Debra Howell

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System: Y or N	Sample Temperature: Collection Temp °C	Sample Temperature: Receipt Temp °C	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	Chemical Preservative: HNO3	Chemical Preservative: H2SO4	Chemical Preservative: NaOH	Chemical Preservative: HCl	Chemical Preservative: Na2S2O3	Chemical Preservative: pH Correct	Analyses Requested: Nitrate	Analyses Requested: Nitrite
G-838	DH	7-27-06 9:40am	N/A N/A	N	16.3°C					X	500 ml		1			X					X	
G-838	DH	7-27-06 9:40am	N/A N/A	N	19.4°C					X	125 ml		1	X								X

Instructions:

Complete all yellow shaded sections

For each parameter requested circle the X to verify your request.

Nutrients include:

Metals: Itemize the individual metals requested here -

For Composite samples record the autosampler Begin date/time and End date/time, for Grab samples record the collect time as the Begin date/time only.

Blue is for lab use only

Comments: ****Nitrate and Nitrate Analysis Requested****

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Debra Howell			
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 07; effective 02/16/2006

Lab Codes: REAL=Real Estate, PRIV=Private Well, NEW=New Permitted Well, TNC=Transient Non-Community, AMB=Ambient, LM=Landfill

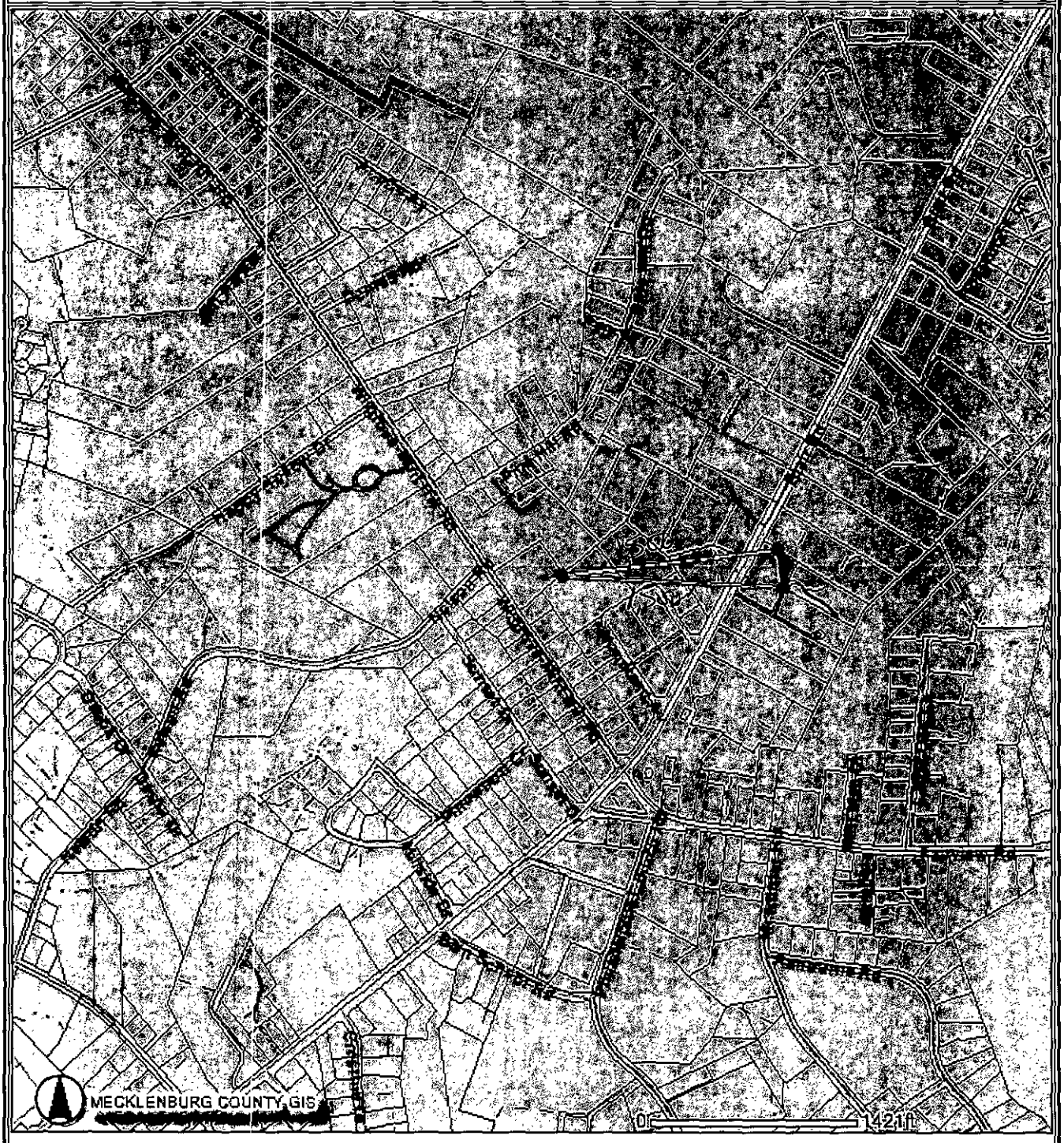
Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Fri May 19 07:33:40 EDT 2006

1,500' radius from MPL#1108



Total Measure Line Length: 4497.9 Feet **Total Measure Acreage:** 0.03 Acres

This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aformentioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Mecklenburg County Health Department
Groundwater & Wastewater Services
700 N. Tryon St, Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-6894

PERMIT TO CONSTRUCT A WATER SUPPLY WELL

Permit #: 10000838 **File #:** 6521B **Tax Parcel #:** 139-011-04
Property Owner: BLANCHE DULIN WHITLEY
Job Location Address: 8320 BLAIR RD
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/19/2006
Use of Well:
Type of Facility Served by Well: Other Residential
Sewage System Type: None

Area of Regulated Groundwater Usage Restrictions Apply: YES

Replacement for Existing Well: If Yes, see requirements in Other Conditions of This Permit.

General Conditions of This Permit:

- Water Supply Well construction must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A North Carolina Certified Well Contractor must perform the well construction activities.
- The permitted Water Supply Well shall be located in accordance with the attached SITE PLAN.
- Any alteration of the site (including location of structures and appurtenances) or modification in use of the well, may subject this Permit to revocation.
- The Department will collect an initial sample of water from the Water Supply Well and analyze the sample for total coliform bacteria, nitrate, and nitrite. A review of the analysis by the Department must find the sample to meet the groundwater quality standards specified in Chapter 5 of the Mecklenburg County Groundwater Well Regulations before the Water Supply Well can be placed in service.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Specific Conditions of This Permit (Check all that apply):

☐ Grout must be placed the full extent of the casing. ☐ Casing to bedrock

☐ Initial water sample to be taken and analyzed for (check all that apply):

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds ☐ Metals (Specify in Other Conditions)

☐ Pesticides ☐ Herbicides ☐ Other (See Below)

The analysis must be submitted to the Department for review and approval prior to the Water Supply well being placed in service.

Other Conditions of This Permit:

No additional conditions as long as well installed in NE corner of property outside of 1,500' from MPL# 1108.

DAVID CORNELIUS
Authorized Agent: Print Name

Signature:

Owner/Legal Agent: Print Name

Signature:

#838 filed

GWS – RES. APP 12/04

400.00 5/17/06 JKA

[redacted]

PERMIT APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION FOR ON-SITE WASTEWATER SYSTEM NEW WELL INSTALLATION OR REPAIR OF EXISTING WELL MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

[redacted]

FILE # 6521B

SEPTIC / TYPE APPLICATION: ☒ NONE ☐ NEW SYSTEM EXISTING SYSTEM: ☐ EXPANSION/ALTERATION ☐ REPAIR

WELL / TYPE APPLICATION: ☐ NONE ☑ NEW WELL ☐ MAJOR REPAIR ☐ ABANDONMENT

JOB LOCATION INFORMATION:

TAX/PARCEL #: 13901104

STREET ADDRESS: 8320 Blair Rd

CITY: Charlotte

STATE: NC ZIP: 28227

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT #:

TOWNSHIP:

☐ 0-MECKLENBURG ☐ 4-PINEVILLE

☐ 1-CHARLOTTE ☐ 5-MATTHEWS

☐ 2-DAVIDSON ☐ 6-HUNTERSVILLE

☐ 3-CORNELIUS ☒ 7-MINT HILL

BUILDING INFORMATION:

TYPE OF BUILDING:

☐ SINGLE MOBILE HOME (S) ☐ MODULAR HOME (M)

☐ DOUBLE WIDE (D) ☐ MULTIPLE FAMILY (U)

☒ HOUSE (H) ☐ OTHER

HEATED SQUARE FOOTAGE: 1600

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 1

FOUNDATION FOR RESIDENCE:

☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING

☐ CRAWLSPACE ☒ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE:

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE? ☐ YES ☒ NO TYPE:

WATER SUPPLY:

☐ MUNICIPAL (M) ☐ PUBLIC (C) ☒ PRIVATE WELL (P) ☐ SHARED WELL (S) ☐ OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: ☐ N/A ☐ IRRIGATION ☒ POTABLE ☐ GEOTHERMAL ☐ OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	☐ YES ☒ NO	WELLS, SPRINGS, OR WATER LINES	☐ YES ☒ NO
EXISTING WASTEWATER SYSTEMS	☒ YES ☐ NO	DESIGNATED WETLANDS	☐ YES ☒ NO
EASEMENTS OR RIGHT-OF-WAYS	☐ YES ☒ NO	GRADING/SOIL REMOVAL PERFORMED	☐ YES ☒ NO

PROPERTY OWNER:

NAME: Blanche Dulin Whitley

ADDRESS: 8320 Blair Rd

CITY: Charlotte

STATE: NC ZIP: 28227

HOME PHONE: WORK PHONE:

MOBILE PHONE: FAX:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: DL Mullis Well Drilling

ADDRESS: 9200 Surface Hill Rd P.O. Box 691446

CITY: Charlotte

STATE: NC ZIP: 28227

HOME PHONE: WORK PHONE: 7045455694

MOBILE PHONE: FAX: 7045457449

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?

WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?

*An Improvement Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Owner's/Agent's Signature Date

NORTH CAROLINA DEPARTMENT OF ENVIRONMENT & NATURAL RESOURCES DIVISION OF ENVIRONMENTAL HEALTH ON-SITE

*A Well Permit is subject to suspension or revocation if site plans or the intended use change or if information submitted in this application is falsified or changed. The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

D.L. Mullis 5/16/06

Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202

* Call for Credit Card #

6521B

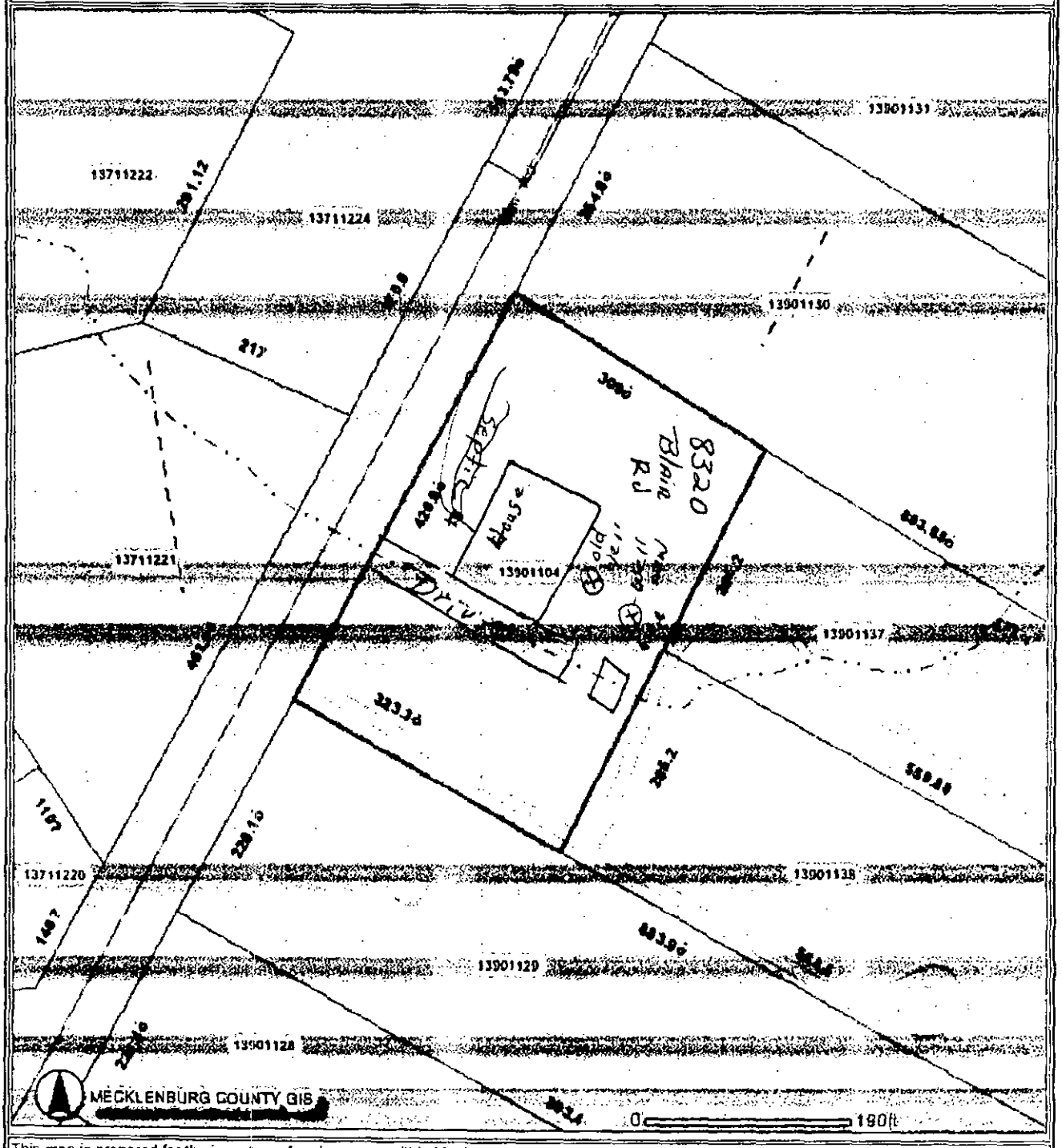
Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Tue May 16 08:01:18 PDT 2006

139-01-104



This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.

Hydrogeologist Permit Application Review

Application #: 838

Permit File #: 6521B

Permit Type: New Well (Residential)

ARGU Review Completed: (•) Yes ( ) No

Permit Denial?: ( ) Yes (•) No

Additional Conditions:

☐ Full Grouting ☐ Casing to Bedrock ☐ Sampling

☐ Volatile Organic Compounds (VOC's) ☐ Semi-volatile Compounds ☐ Metals (Specify in Other Conditions)

☐ Pesticides ☐ Herbicides ☐ Other

Comments/Other Sample Types:

No additional conditions as long as well installed in NE corner of property outside of 1,500' from MPL# 1108.

EHS Review | Update

The application has been forwarded to David Cornelius for review.

ACTIVITY REPORT

LOG NUMBER: 2006-00283 **ACTIVITY DATE:**05/19/2006
TYPE OF ACTIVITY:
FILE DESCRIPTOR: GW-WA-CI-

SITE INFO

SITE: FORMER INDUSTRIAL SITE **PARCEL ID:**13711206
ADDRESS: 4614 WILGROVE-MINT HILL ROAD
MINT HILL 28227- -

CONTACT:
BUSINESS PHONE NO: ( ) -

ACTIVITY

EPIC Rept. for ARGU Review
8320 Blair Rd., Mint Hill, NC 28227
PID# 139-011-04
File # 6521B

Public water supplied by CMUD is currently available at this site.

5/18/06 (Thurs.) - Received request for ARGU review for new WSW located at 8320 Blair Rd., Mint Hill, PID #139-011-04. According to the WIS, there are no existing wells at this property, but the permit indicates that this is a replacement WSW.

5/19/06 (Fri.) - Conducted ARGU Review. Identified 1 MPL site within 1,500' of the subject parcel:

MPL# 1108 Former Industrial Facility
4614 Wilgrove-Mint Hill Rd., Mint Hill, NC 28227
PID# 137-112=06
No NCDENR Inc. No.
Potential Source- former textile facility

File Review of MPL# 1108:

No NCDENR or Meck. Co. MPL investigation files were identified for this site.

Comments in the EPIC file indicate: This site operated as a textile mill as far back as 1949. No sanitary sewer was available during plant operations. Waste would have been disposed via septic tank and drain field. Large water tower on site suggests high usage of water.

Most of the subject site inside the 1,500' ARGU buffer from the Former Industrial Facility.

Looking at the 2000' buffer generated by the Well Information System around the subject site, most of the subject site appeared to be within 1,500' of the Former Industrial Facility MPL property. After reviewing a 1,500' radius in Polaris, a portion of the northeastern corner of the subject site is outside the 1,500' radius, so the permit for new well installation at PID# 139-011-04, 8320 Blair Rd., Mint Hill, is approved outside of the 1,500' foot radius from the Former Industrial Facility with installation according to Mecklenburg County Groundwater Well Regulations for construction of private water supply wells effective Jan. 1, 2005 and no specific conditions. If the well is installed on the subject site within the 1,500 buffer, the installation must also include specific conditions for wells constructed in an ARGU of grouting the full extent of casing and initial sampling for volatiles.

VIOLATIONS

VIOLATION COMMENTS:

VIOLATION # DESCRIPTION

ACTIVITY REPORT

SAMPLES

SUMMARY

STATUS: CLOSED
DATE CLOSED: 07/06/2006
MISC EXPENSES: 0.00

TIME ON SITE: :
TRAVEL TIME: :
ADMIN TIME: 2:00
MILEAGE:

STATE REPORT FORM:
SUMMARY:

SIGNATURES

ENVIRONMENTALIST: _____ **DATE** 05/19/2006
Shawna Caldwell

REVIEWED BY: _____ **DATE** 06/20/2006
Jack L. Stutts

App. #: 838

Septic Fee: 0.00

Date: CRT[ ]

PERMIT APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT FOR ONSITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

FILE # 6521B

Well Fee: 400.00

Date: 5/17/2006

CRT[ ]

SEPTIC / TYPE APPLICATION: (•) NONE ( ) NEW SYSTEM ( ) ALTERATION ( ) REPAIR ( ) MODIFIED PLOT PLAN

WELL / TYPE APPLICATION: ( ) NONE (•) NEW WELL ( ) MAJOR REPAIR ( ) ABANDONMENT

JOB LOCATION INFORMATION:

TAX / PARCEL #: 139-011-04 [ ] PO

STREET ADDRESS: 8320 BLAIR RD

CITY: CHARLOTTE

STATE: NC ZIP: 28227

SUBDIVISION OR MOBILE HOME PARK NAME:

LOT #: 0

TOWNSHIP: MINT HILL

General Comments:

BUILDING INFORMATION:

TYPE OF BUILDING:

( ) SINGLE MOBILE HOME (S) ( ) MODULAR HOME (M)

( ) DOUBLE WIDE (D) ( ) MULTIPLE FAMILY (U)

( ) HOUSE (H) (•) OTHER

HEATED SQUARE FOOTAGE: 1600

NUMBER OF BEDROOMS: 3

NUMBER OF OCCUPANTS: 1

FOUNDATION FOR RESIDENCE:

[ ] CONCRETE SLAB [ ] BASEMENT WITH PLUMBING

[ ] CRAWL SPACE [ ] BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND / ALTER THE EXISTING SYSTEM INDICATE THE FOLLOWING CHANGES:

NUMBER OF BEDROOMS TO BE ADDED: 0

NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: 0

WILL THERE BE A HOME BUSINESS IN THE RESIDENCE?: ( ) Yes (•) No

TYPE:

WATER SUPPLY:

[ ] MUNICIPAL (M) [ ] PUBLIC (C) [✓] PRIVATE WELL (P) [ ] SHARED WELL (S) [ ] OTHER 'SPRINGS' (O)

PROPOSED USE OF WELL: (•) N/A ( ) IRRIGATION ( ) POTABLE ( ) GEOTHERMAL ( ) OTHER

ARE ANY OF THE FOLLOWING LOCATED ON THE PROPERTY? IF SO, PLEASE SHOW LOCATION ON SITE PLAN/PLAT.

BURIED CABLES, LANDFILLS, STUMPHOLES	( ) Yes (•) No	WELLS, SPRINGS, OR WATER LINES	( ) Yes (•) No
EXISTING WASTEWATER SYSTEMS	(•) Yes ( ) No	DESIGNATED WETLANDS	( ) Yes (•) No
EASEMENTS OR RIGHT-OF-WAYS	( ) Yes (•) No	GRADING/SOIL REMOVAL PERFORMED	( ) Yes (•) No

PROPERTY OWNER:

NAME: BLANCHE DULIN WHITLEY

ADDRESS: 8320 BLAIR RD

CITY: CHARLOTTE

STATE: NORTH CAROLINA ZIP: 28227

HOME PHONE: WORK:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

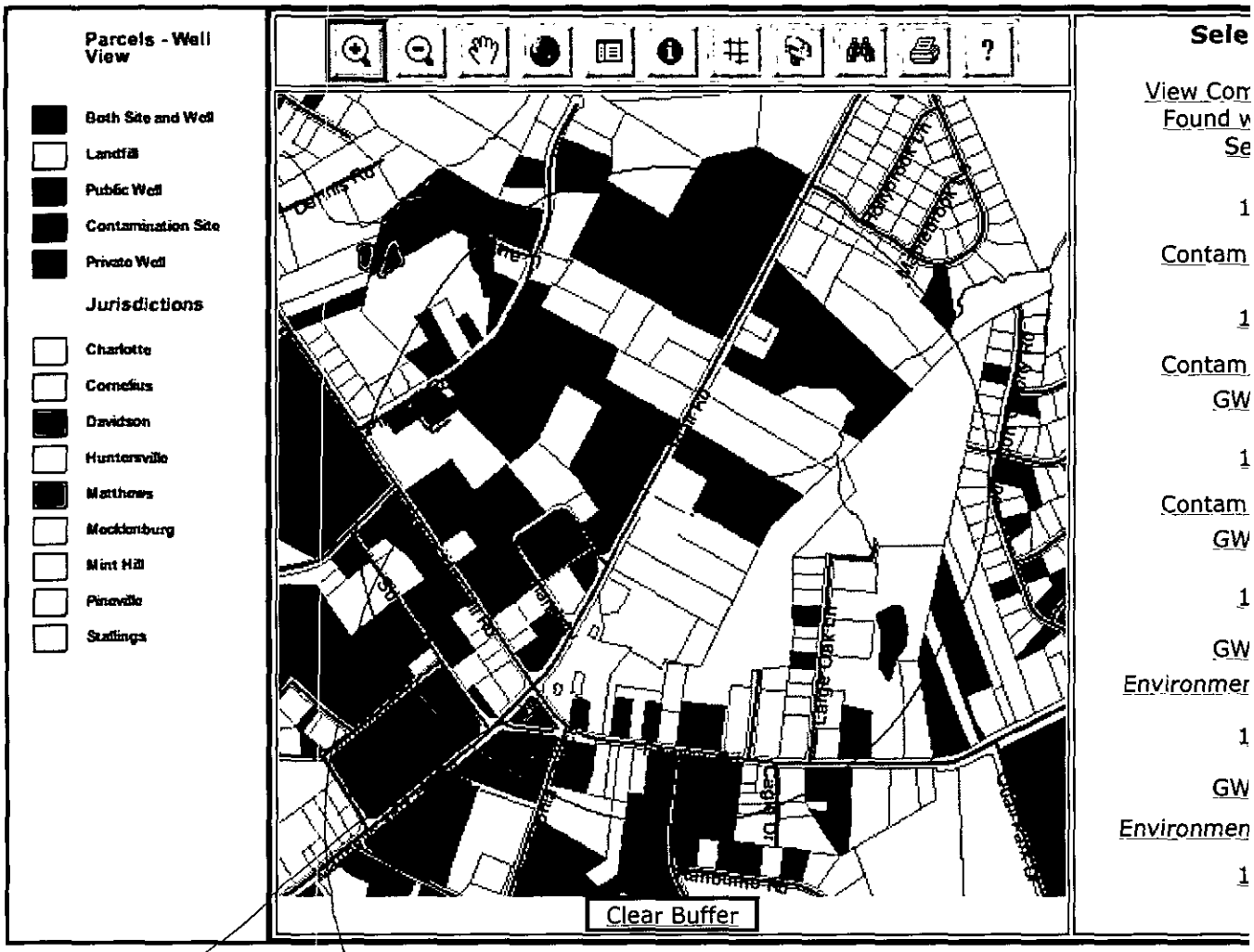
NAME: DL MULLIS WELL DRILLING

ADDRESS: 9200 SURFACE HILL RD

CITY: CHARLOTTE

STATE: NORTH CAROLINA ZIP: 28227

HOME PHONE: WORK: 704-545-5694



Earp's Grocery and Service Station
NCDENR UST Inc. #12656
4215 Wilgrove - Mint Hill Rd
PID# 197-036-07
MPL#591

MPL # 1108
PID# 137-112-06
4614 Wilgrove - Mint Hill Rd
Mint Hill
no NCDENR incident on MPL list because of potential for soil and GW cont. based on past history as textile plant w/ high water usage and septic sys.

Date: 5/19/06
Reviewed By: SWC

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Groundwater & Wastewater Services

ARGU Review Worksheet

Job Location Information

Tax Parcel ID #: 139-011-04 File # 6521B

Street Address: 8320 Blair Rd., Charlotte, NC 28227

Contamination Site Information

(If more than one contamination site is within 2000 feet of the job location, fill out a separate review worksheet for each contamination site)

Tax Parcel ID #: 137-112-06 MPL # 1108

Street Address: 4614 Wilgrove-Mint Hill Rd., Mint Hill, NC

DENR Incident #: _____

Current Status: Not listed as NCDENR incident Why? This site operated as a textile mill as far back as 1949. No sanitary sewer was available during plant operations. Waste would have been disposed via septic tank and drain field. Large water tower on site suggests high usage of water, so listed as MPL because of potential for soil or GW contamination.

Responsible Party: _____

Responsible Party Contact Info: _____

File Review

Attach the most recent extent of contamination map for each constituent above either 2L groundwater standard or Maximum Soil Contaminant Concentration (MSCC).

Attach copies of groundwater flow maps. (Watch of seasonal change)

Attach a copy of the most recent summary table for soil/groundwater laboratory analysis
Is the source area identified in either the report text or on a site map? Attach map or if text only, indicated the location on an extent of contamination map.
Based on this information, answer the following questions:

Has the extent of contamination been defined or partially defined for all constituents-of-concern? No

If Yes	ARGU is a 1500-foot buffer around the maximum extent of contamination

If No, is the source area defined?

If Yes	ARGU is a 1500-foot buffer around the source area	No
If No	ARGU is a 1500-foot buffer around the contamination site property boundary.	

Is a public water supply (other than transient or non-transient supply wells) available to the proposed job location? Yes

If No	Well allowed, but construction requirements apply. Sampling requirements may apply pending hydrogeologic review.	
If Yes	Is the well within the first 1000 feet of the ARGU?	No
If No	Well allowed, but construction requirements apply. Sampling requirements may apply pending hydrogeologic review.	
If Yes	Permit denied.	

Reviewer Comments: Looking at the 2000' buffer generated by the Well Information System around the subject site, most of the subject site appeared to be within 1,500' of the Former Industrial Facility MPL property. After reviewing a 1,500' radius in Polaris, a portion of the northeastern corner of the subject site is outside the 1,500' radius, so the permit for new well installation at PID# 139-011-04, 8320 Blair Rd., Mint Hill, is approved outside of the 1,500' foot radius from the Former Industrial Facility with installation

according to Mecklenburg County Groundwater Well Regulations for construction of private water supply wells effective Jan. 1, 2005 and no specific conditions. If the well is installed within the 1,500 buffer, the installation must also include specific conditions for wells constructed in an ARGU of grouting the full extent of casing and initial sampling for volatiles.

EPIC Rept. for ARGU Review
8320 Blair Rd., Mint Hill, NC 28227
PID# 139-011-04
File # 6521B

Public water supplied by CMUD is currently available at this site.

5/18/06 (Thurs.) - Received request for ARGU review for new WSW located at 8320 Blair Rd., Mint Hill, PID #139-011-04. According to the WIS, there are no existing wells at this property, but the permit indicates that this is a replacement WSW.

5/19/06 (Fri.) - Conducted ARGU Review. Identified 1 MPL site within 1,500' of the subject parcel:

MPL# 1108 Former Industrial Facility
4614 Wilgrove-Mint Hill Rd., Mint Hill, NC 28227
PID# 137-112=06
No NCDENR Inc. No.
Potential Source- former textile facility

File Review of MPL# 1108:

No NCDENR or Meck. Co. MPL investigation files were identified for this site.

Comments in the EPIC file indicate: This site operated as a textile mill as far back as 1949. No sanitary sewer was available during plant operations. Waste would have been disposed via septic tank and drain field. Large water tower on site suggests high usage of water.

Most of the subject site inside the 1,500' ARGU buffer from the Former Industrial Facility.

Looking at the 2000' buffer generated by the Well Information System around the subject site, most of the subject site appeared to be within 1,500' of the Former Industrial Facility MPL property. After reviewing a 1,500' radius in Polaris, a portion of the northeastern corner of the subject site is outside the 1,500' radius, so the permit for new well installation at PID# 139-011-04, 8320 Blair Rd., Mint Hill, is approved outside of the 1,500' foot radius from the Former Industrial Facility with installation according to Mecklenburg County Groundwater Well Regulations for construction of private water supply wells effective Jan. 1, 2005 and no specific conditions. If the well is installed on the subject site within the 1,500 buffer, the installation must also include specific conditions for wells constructed in an ARGU of grouting the full extent of casing and initial sampling for volatiles.

Area of prop. permitted for well installation

Mecklenburg County, North Carolina

POLARIS

Property Ownership Land Records Information System

Date Printed: Fri May 19 07:33:40 EDT 2006

1,500' radius from MPL#1108



Total Measure Line Length: 4521.13 Feet

This map is prepared for the inventory of real property within Mecklenburg County and is compiled from recorded deeds, plats, tax maps, surveys, planimetric maps, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification. Mecklenburg County and its mapping contractors assume no legal responsibility for the information contained herein.