

6210 ROZZELLES FERRY RD

03505406

1/9/2008

duponbj

Groundwater and Wastewater Services File Imaging Project

May 2007

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McCALL BROTHERS INC.

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POST OFFICE BOX 668710 • CHARLOTTE, NC 28266-8710 • TELEPHONE (704) 399-1506 • TELEFAX (704) 398-2605

60768

LETTER OF TRANSMITTAL

TO: Mecklenburg County Health Dept
Groundwater & Wastewater Services
700 North Tryon Street Suite 211
Charlotte, NC 28202

DATE: July 29, 2005

REFERENCE: Well Construction Records (WCR)
Well Abandonment Records (WAR)

GENTLEMEN:

We are sending you the following:

__X__ Attached
_____ Under Separate Cover By

_____ Other Well Construction Records - Well Abandonment Records

COPIES	DATE	DESCRIPTION
1	07/26/05	Well Abandonment Record; 92032543; Charlotte, NC; Keith Paris
7	7/18/05	Well Abandonment Record; 50032565; Charlotte, NC; Smithson General Cont.

SIGNATURE: _____
Dany Slough

U:\HEATHER\Well Record Transmittals\Mecklenburg County\072905#2.doc

Jeremy

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section - 1636 Mail Service Center - Raleigh, NC 27699-1639 - Phone No. (919) 733-3221

WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-1

5003256S

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: CHARLOTTE County MECK
6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: SMITHSON GEN CONTRACTORS

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat) (circle one)

6. TOTAL DEPTH: 25' DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

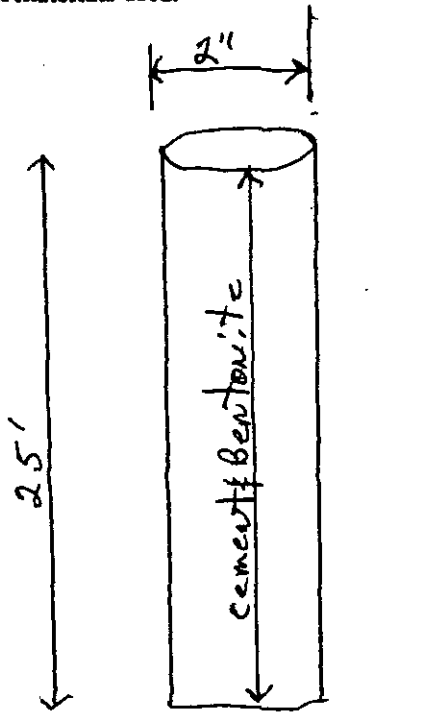
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 8	bags of cement
gallons of water 50	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via Tremmy from Mixer

WELL DIAGRAM: Draw a detailed sketch of the well showing total depth, depth and diameter of screens remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.



11. DATE WELL ABANDONED 7-27-05

I do hereby certify that this well was abandoned in accordance with 15A NCAC 2C, well construction standards, and that a copy of the record has been provided to the well owner.

Signature of person abandoning the well Pete Flores Date 7-28-05

WELL LOCATION: Draw a location sketch on the reverse of this sheet, showing the direction and distance of the well to at least two (2) nearby reference points such as roads, intersections and streams. Identify roads with State Highway road identification numbers.

Submit original to the Division of Water Quality, Groundwater Section, one copy to the owner within 30 days from completion of abandonment.

GW-30 Revised 12/99

Jeremy

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section - 1636 Mail Service Center - Raleigh, NC 27699-1639 - Phone No. (919) 733-3221

WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-2

5003256S

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: CHARLOTTE County MECK
6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Smithson Gen Contractors

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat)
(circle one)

6. TOTAL DEPTH: 25 DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

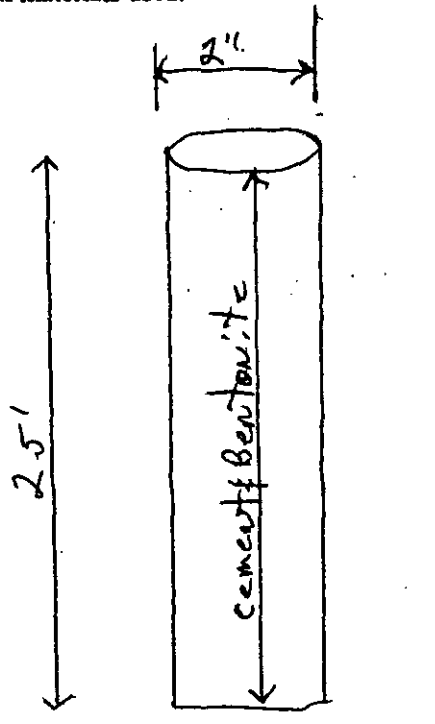
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 8	bags of cement
gallons of water 50	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via Tremmy from Mixer

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GW-30 Revised 12/99

Jeremy

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section - 1636 Mail Service Center - Raleigh, NC 27699-1639 - Phone No. (919) 733-3221

WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-3

5003256S

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: CHARLOTTE County MECK
6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: SMITHSON GEN CONTRACTORS

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat)
(circle one)

6. TOTAL DEPTH: 25 DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

9. SEALING MATERIAL:

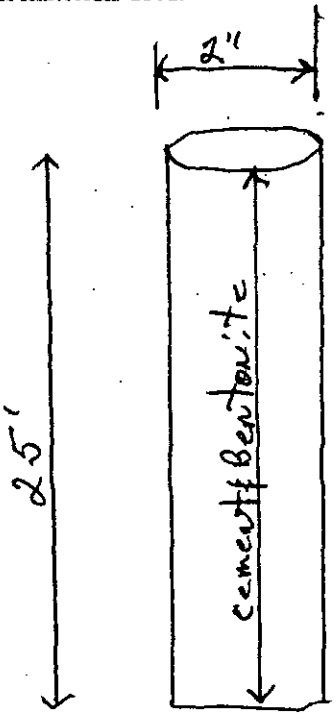
Neat Cement
bags of cement 8
gallons of water 50

Sand Cement
bags of cement
gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via Tremmy from Mixer

WELL DIAGRAM: Draw a detailed sketch of the well showing total depth, depth and diameter of screens remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.



11. DATE WELL ABANDONED 7-27-05

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GW-30 Revised 12/99

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section - 1636 Mail Service Center - Raleigh, NC 27699-1639 - Phone No. (919) 733-3221

WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-4

5003256S

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
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6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: SMITHSON Gen Contractors

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat)
(circle one)

6. TOTAL DEPTH: 25 DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

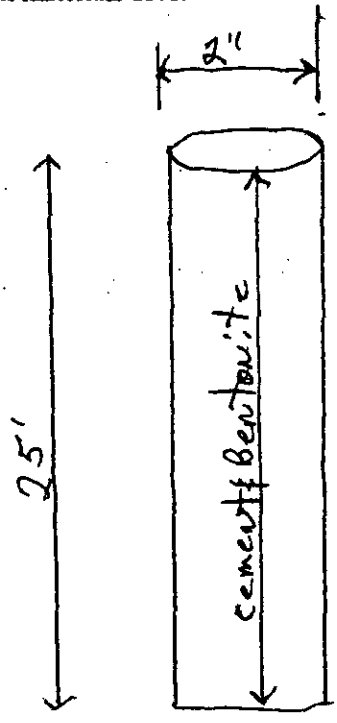
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 8	bags of cement
gallons of water 50	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via Tremmy from Mixer

WELL DIAGRAM: Draw a detailed sketch of the well showing total depth, depth and diameter of screens remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.



11. DATE WELL ABANDONED 7-27-05

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Signature of person abandoning the well Pete Florea Date 7-28-05

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GW-30 Revised 12/99

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WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-5

5003256S

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: CHARLOTTE County MECK
6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: SMITHSON GEN CONTRACTORS

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat) (circle one)

6. TOTAL DEPTH: 50 DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

9. SEALING MATERIAL:

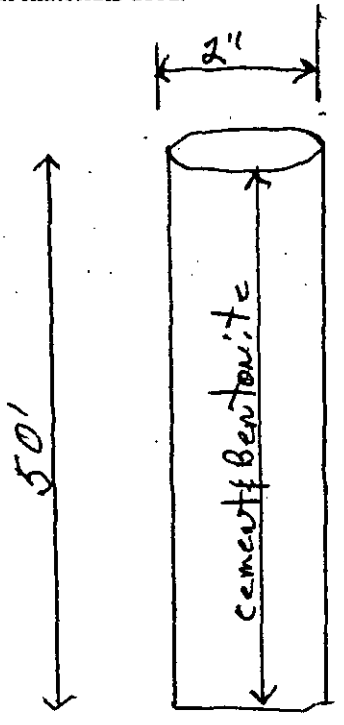
Neat Cement
bags of cement 8
gallons of water 50

Sand Cement
bags of cement _____
gallons of water _____

Other
Type material _____
Amount _____

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via Tremmy from Mixer

WELL DIAGRAM: Draw a detailed sketch of the well showing total depth, depth and diameter of screens remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.



11. DATE WELL ABANDONED 7-27-05

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GW-30 Revised 12/99

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WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-6

5003256S

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: CHARLOTTE County MECK
6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision , Lot No.) Quadrangle No.

3. OWNER: Smithson Gen Contractors

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat)
(circle one)

6. TOTAL DEPTH: 25 DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

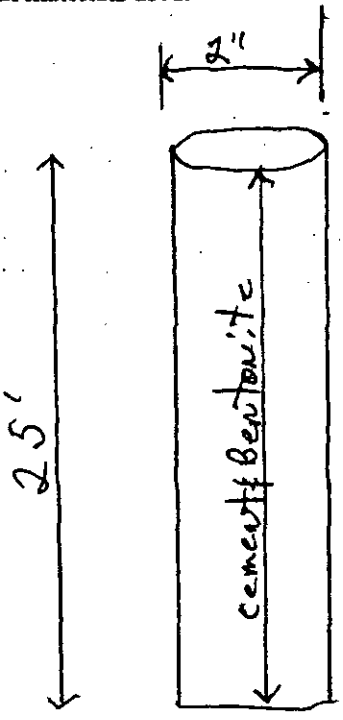
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 8	bags of cement
gallons of water 50	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via Tremmy from Mixer

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11. DATE WELL ABANDONED 7-27-05

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GW-30 Revised 12/99

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section - 1636 Mail Service Center - Raleigh, NC 27699-1639 - Phone No. (919) 733-3221

WELL ABANDONMENT RECORD

WELL CONTRACTOR Pete Florea

WELL CONTRACTOR CERTIFICATION # 2211

MW-7

500325G5

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☑ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show a sketch of the location on back of form.)
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6210 Rozzells Ferry Rd.
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: SMITHSON GEN CONTRACTORS

4. ADDRESS: 6210 Rozzells Ferry Rd.

5. TOPOGRAPHY: draw, slope, hilltop, valley (flat)
(circle one)

6. TOTAL DEPTH: 25 DIAMETER 2

7. CASING REMOVED:

feet	diameter
ϕ	

8. DISINFECTION: 3 oz
(Amount of 70% hypochlorite used:)

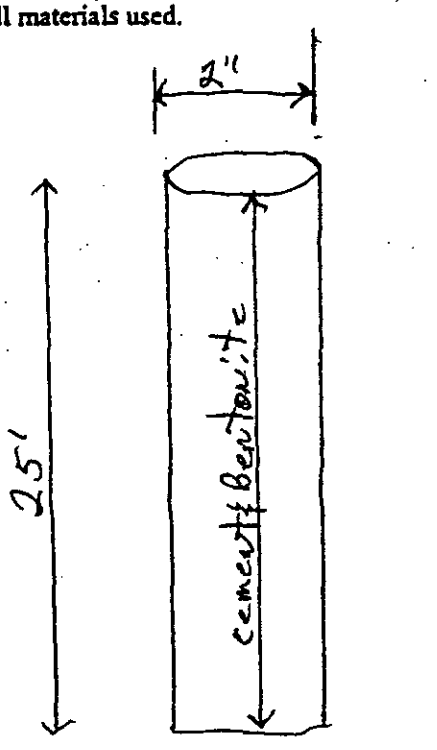
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 8	bags of cement
gallons of water 50	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped via TREMMY from MIXER

WELL DIAGRAM: Draw a detailed sketch of the well showing total depth, depth and diameter of screens remaining in the well, gravel interval, intervals of casing perforations, and depths and types of fill materials used.



11. DATE WELL ABANDONED 7-27-05

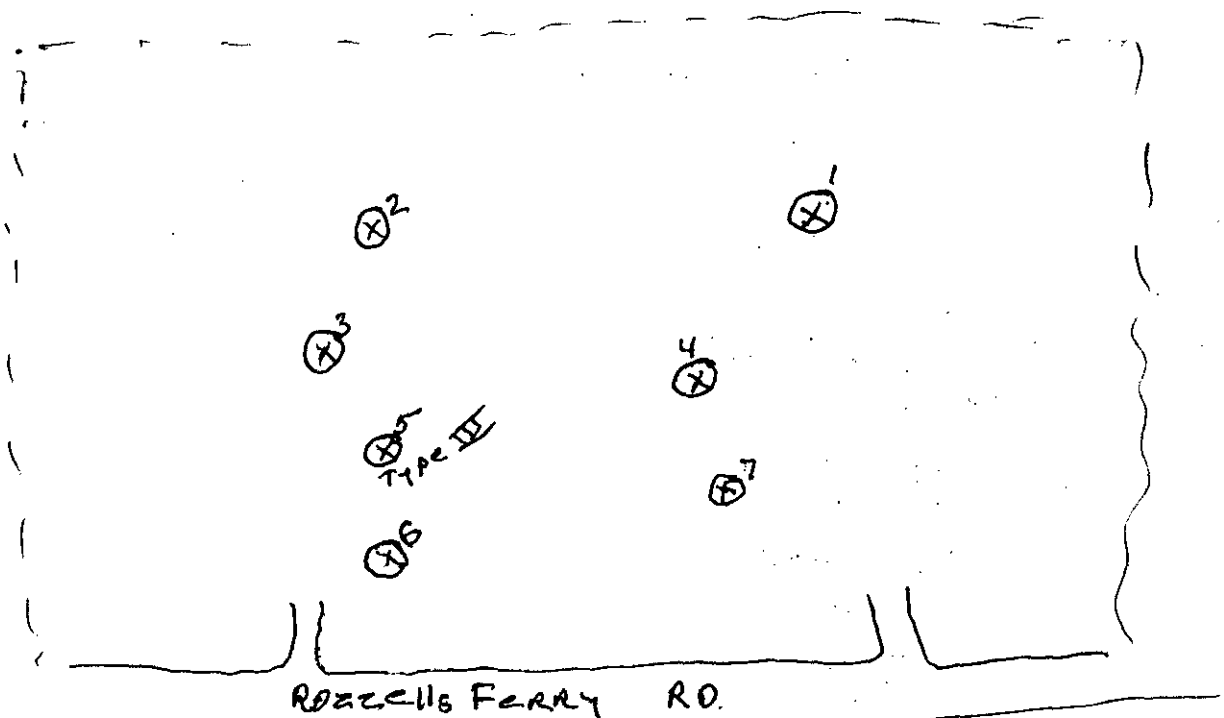
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Signature of person abandoning the well Pete Flores Date 7-28-05

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GW-30 Revised 12/99


1
2
3
4
5
TYPE III
6
7
ROSCOE FERRY RD.

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 CONDUCT MAJOR REPAIR AND/OR ABANDON A WATER SUPPLY WELL

Permit#: 10000114 **Tax Parcel #:** 03505406
Property Owner: Eagle Transport/Smithson General Cont.
Job Location Address:6210 ROZZELLES FERRY RD
City/ETJ:CHARLOTTE **State:** NC **Zip Code:** 28214
Permit Issuance Date: 7/28/2005
Use of Well:
Type of Facility Served by Well: House
Sewage System Type: None

Type of Repair/Abandonment

- ○ Major Repair Before Placing the Well in Service
- ○ Major Repair Before Temporary Abandonment
- ○ Temporary Abandonment
- ◉ Permanent Abandonment

Area of Regulated Groundwater Usage Restrictions Apply: YES

If Yes, see requirements in Specific Conditions of This Permit.

General Conditions of This Permit:

- The Water Supply Well repair and abandonment must meet all requirements set forth in the *Mecklenburg County Groundwater Well Regulations* and any other applicable rules and laws.
- A Certified Well Contractor that is currently registered with the Department must perform the well construction activities.
- Repair of any Water Supply Well with the well head terminating below ground surface (buried seal) shall include extending the well casing at least twelve inches above the surface.
- This Permit shall be VALID for a period not to exceed 12 months from the date of issuance.

Other Conditions of This Permit:

Jeremy McMeans, L.S.
Authorized Agent: Print Name

Owner/Legal Agent: Print Name

Jeremy McMeans, L.S.
Signature:

Signature:

MECKLENBURG COUNTY

Land Use & Environmental Services Agency
Water & Land Resources
Groundwater & Wastewater Services

Fax Coversheet

****NOTICE****

The information contained in this fax may be privileged and/or confidential and is intended only for the use of the person to who it is addressed. If the reader of this message is not the intended recipient (or such recipient's employee or agent), you are hereby notified not to read, distribute, or copy the materials attached hereto without the prior written consent of the sender. If you have received this fax in error, please notify the sender by telephone call and return the original to us by mail and you will be reimbursed for the required postage. Thank you.

To: McCall Geos. Fax #: 398-2605

Joe McAlpine Phone #: _____

From: Jeremy Michelove Date: 7/28/05

_____

Number of pages transmitted: 2 (including coversheet)

Comments: Well Abandonment Permit

_____

_____

_____

If you do not receive all pages of this fax please call (704) 336-5103.

☐ Original will not follow

☐ Original will follow via: ☐ U.S. Mail ☐ Hand Delivery ☐ _____

700 North Tryon Street • Suite 211 • Charlotte, North Carolina 28202-2236
Office #: (704) 336-5103 • Fax #: (704) 336-6894

McGill Brothers, Inc. - Account # A & 10 10

GWS- COM. APP 12/04

704-336-6894 FAX

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

SEPTIC FEE
DATE:
CR#:

WELL FEE
DATE:
CRT ID:

FILE # 60076B

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

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

JOB LOCATION INFORMATION

PROJECT TRACKING #:
TAX/PARCEL #: ~~035~~ 035-054-24
STREET ADDRESS: 6210 Rozzell Ferry Rd
CITY: Charlotte NC
STATE: NC ZIP: 28216
LOT #:
TOWNSHIP:

☐ 0-MECKLENBURG ☐ 4-PINEVILLE
☑ 1-CHARLOTTE ☐ 5-MATTHEWS
☐ 2-DAVIDSON ☐ 6-HUNTERSVILLE
☐ 3-CORNELIUS ☐ 7-MINT HILL

BUILDING INFORMATION:

DESCRIBE TYPE OF BUSINESS:

☐ COMMERCIAL ☐ INDUSTRIAL
SQUARE FOOTAGE OF FACILITY:
NUMBER OF EMPLOYEES PER SHIFT:
NUMBER OF SHIFTS:
TYPE OF WASTEWATER:
☐ SEWAGE ☐ INDUSTRIAL PROCESS WASTEWATER
HOW WILL WATER BE USED IN THE FACILITY?:
☐ CONCRETE SLAB ☐ BASEMENT WITH PLUMBING
☐ CRAWLSPACE ☐ BASEMENT WITH NO PLUMBING

IF PLANNING TO EXPAND/ALTER THE EXISTING SYSTEM, INFORMATION DOCUMENTING THE INCREASED WASTEWATER FLOW AND/OR A JUSTIFICATION FOR SYSTEM ALTERATION WILL BE REQUIRED.

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: Eagle Transport / Smithson General Court
ADDRESS: 6210 Rozzell Ferry Rd
CITY: Charlotte
STATE: N.C. ZIP: 28216
HOME PHONE: WORK PHONE: 252-977-3055
MOBILE PHONE: FAX:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: McGill Bros Inc.
ADDRESS: 6700 Brookshire Blvd
CITY: Charlotte, N.C.
STATE: N.C. ZIP: 28216
HOME PHONE: WORK PHONE: 704 399-1506
MOBILE PHONE: FAX:

WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED? 398-2605
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.

Daniel Powell 7-21-05
Owner's/Agent's Signature Date

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

*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.

Joe McAlpine 7-22-05
Owner's/Agent's Signature Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
704-336-5103 / FAX:704-336-6894