

5722 MATTHEWS-MINT HILL RD

19522111

1/10/2008

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
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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 Lassiter Well Company

WELL CONTRACTOR CERTIFICATION # 2297

permit # 10000887

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: Mint Hill County Mecklenburg
5722 Matthews - Mint Hill Rd 28227 195-221-11
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Alfred Forest / Chuck Coukerd

4. ADDRESS: 5722 Matthews - Mint Hill Rd

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

6. TOTAL DEPTH: 185' DIAMETER 6 1/4"

7. CASING REMOVED:

feet	diameter
4'	6/4"

8. DISINFECTION: 2 cups HTH 70%
(Amount of 70% hypochlorite used:)

9. SEALING MATERIAL:

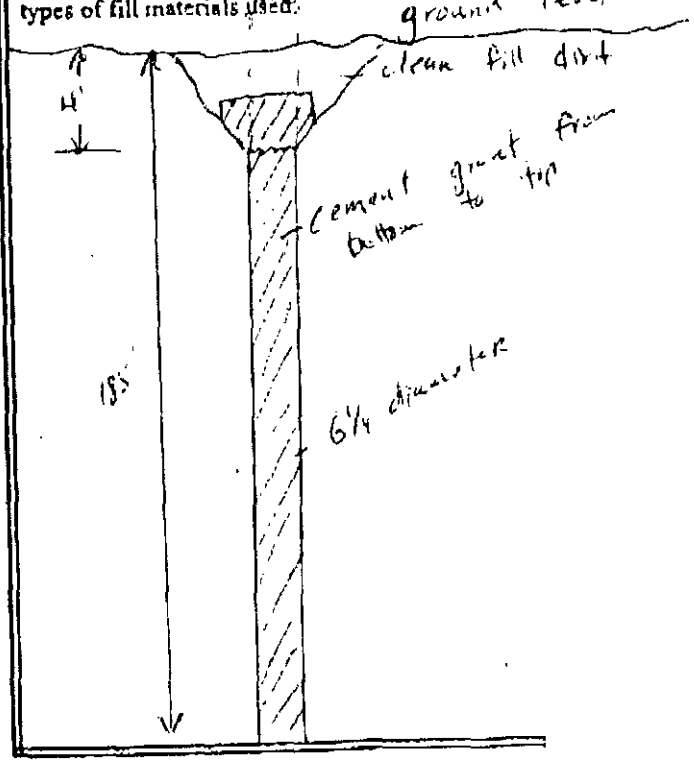
Neat Cement
bags of cement _____
gallons of water _____

Sand Cement
bags of cement _____
gallons of water _____

Other
Type material Cement Grout
Amount 2 yards

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Poured from bottom to top using cement truck

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 6-1-06

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 Vernon Lassiter Jr Date 6-2-06

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

Attn: Kim

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 Lassiter Well Company

WELL CONTRACTOR CERTIFICATION # 2237

permit # 10000887

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: Mint Hill County Mecklenburg
5722 Mathews - Mint Hill Rd 28227 195-D 221-11
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Alfred Forest / Chuck Cowherd

4. ADDRESS: 5722 Mathews - Mint Hill Rd

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

6. TOTAL DEPTH: 185' DIAMETER 6¼"

7. CASING REMOVED:

feet	diameter
4'	6¼"

8. DISINFECTION: 2 cups HTH 70%
(Amount of 70% hypochlorite used:)

9. SEALING MATERIAL:

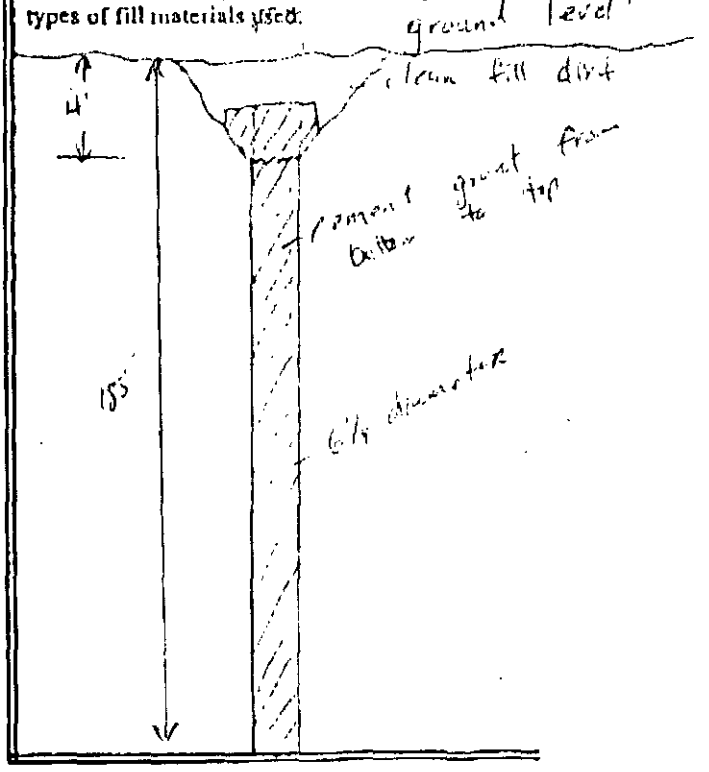
Neat Cement
bags of cement _____
gallons of water _____

Sand Cement
bags of cement _____
gallons of water _____

Other
Type material Cement Grout
Amount 2 yards

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Poured from bottom to top using cement truck

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 6-1-06

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 Vernon Lassiter Jr Date 6-2-06

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

Mecklenburg County Health Department
Groundwater & Wastewater Services
700 N. Tryon St, Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-8894

6566B

PERMIT TO CONDUCT MAJOR REPAIR AND/OR ABANDON A WATER SUPPLY WELL

Permit#: 10000887 **Tax Parcel #:** 195-221-11
Property Owner: ALFRED FOREST/CHUCK COWHERD
Job Location Address: 5722 MATTHEWS-MINT HILL RD
City/ETJ: CHARLOTTE **State:** NC **Zip Code:** 28227
Permit Issuance Date: 5/31/2006
Use of Well:
Type of Facility Served by Well: *Multi-family home*
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: NO

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 North Carolina Certified Well Contractor 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.

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

- ☐ Grout must be placed the full extent of the casing.
- ☐ Initial water sample to 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)

Other Conditions of This Permit:

Philo S. Walker
Authorized Agent: Print Name

Philo S. Walker RS
Signature:

VERNON LASSITER
Owner/Legal Agent: Print Name

Vernon Lassiter
Signature:

#887

GWS – RES. APP 12/04

SEPTIC FEE:
DATE:
CRT[ ]

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

FILE # 6566B

WELL FEE:
DATE:
CRT[ ]

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

WELL / TYPE APPLICATION: ☐ NONE ☐ NEW WELL ☐ MAJOR REPAIR ■ ABANDONMENT P.W.

JOB LOCATION INFORMATION:

TAX/PARCEL #: 195-22-111
STREET ADDRESS: 5722 Mathews-Mint Hill Rd
CITY: Charlotte
STATE: NC ZIP:
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: 3000
NUMBER OF BEDROOMS: 6
NUMBER OF OCCUPANTS:

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 Abandonment

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: Alfred Forrest
ADDRESS: 5722 mathews-mint Hill Rd
CITY: Charlotte
STATE: NC ZIP:
HOME PHONE: WORK PHONE: 704-391-5101
MOBILE PHONE: FAX:
Chuck Cowherd Char-Meck Utilities Dept.

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: Lassiter Well Company Inc.
ADDRESS: P.O Box 726
CITY: Dan Creek
STATE: NC ZIP: 28130 704-392-5704
HOME PHONE: WORK PHONE:
MOBILE PHONE: FAX: 704-399-4485

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

"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.

Vernon Lassiter Jr 5-30-06
Owner's/Agent's Signature Date

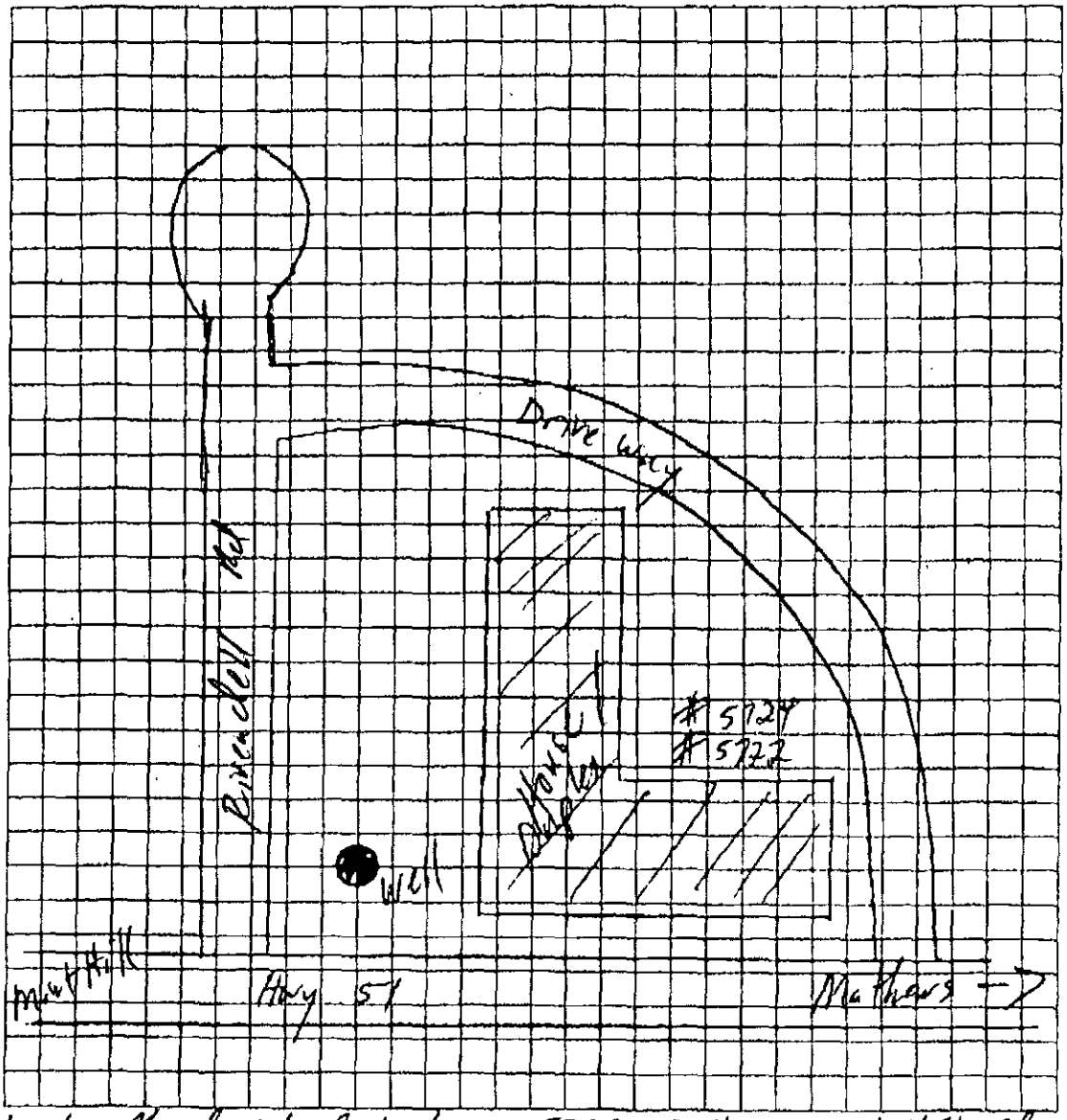
MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211

Mecklenburg County
Land Use & Environmental Service Agency
Groundwater & Wastewater Services
700 N. Tryon St., Suite 211
Charlotte, NC 28202
Phone: (704) 336-5103
Fax: (704) 336-8894

File # 6566B
Date_____

PROPOSED PLOT PLAN

A map showing existing and proposed property lines and easements with dimensions, the location of the single family residence, non-single family residence, or other facility, and appurtenances, the site for the proposed well, and the location of existing or proposed sewer lines and/or sewage disposal systems, surface water bodies, aboveground or underground storage tanks. Name all roads adjoining the property. If this a repair indicate the type of repair.



Well Abandonment Application - 5722 Mathews - Mint Hill Rd (Hwy 51)
parcel # 195-22-111

Owner/Agent Signature	Vernon Lassiter Jr 5-30-06
Date 5-30-06	Lassiter Well Company

LBC 12/15/04