

6634 STATESVILLE RD

03742104

9/5/08

marliwr

Groundwater and Wastewater Services File Imaging Project
May 2007
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ACTIVITY REPORT

LOG NUMBER: 2006-00066 **ACTIVITY DATE:** 02/02/2006
TYPE OF ACTIVITY: Office Report
FILE DESCRIPTOR: GW-G-

SITE INFO

SITE: BOONE PARTS & SERVICE **PARCEL ID:** 03742104
ADDRESS: 6634 STATESVILLE RD
CHARLOTTE NC 28269- -
CONTACT: GLENN BOONE
BUSINESS PHONE NO: (704) 596-6748

ACTIVITY

February 2, 2006

ARGU Review
Potable Well Abandonments
MPL# 1281
Boone Parts & Service
6634 Statesville Road
Tax Parcel 037-421-04
Applications 270 and 271
File 21967

Contractor: McCall Brothers
Contact: Joe McAlpine

File Review: NORR issued to Boone Parts and Service 3/9/2005 for assessment of a leaking petroleum UST system reported to NCDENR 2/7/2005. Site listed in NCDENR database as requiring further assessment.

Called Mr. Joe McAlpine, McCall Brothers to discuss the abandonments. Informed Mr. McAlpine that full grouting of the wells to the ground surface using pressure or trimmie grouting will be required in addition to the requirements outlined in the Mecklenburg County Groundwater Well Regulations, Section VIII "Abandonment of Water Supply Wells".

Mr. McAlpine stated that he would like to schedule the job for tomorrow 2/3/2006 as a representative from the consulting firm representing the responsible party has scheduled himself to be there to observe the abandonments.

Completed ARGU review in WASPS and forwarded for permit processing. Review forwarded to Jeremy Michelone by WASPS.

Spoke with Jeremy Michelone about the review, requirements and Mr. McAlpine's schedule. Jeremy stated he would fax permit to Mr. McAlpine and schedule to be there for the grout inspection.

END.

VIOLATIONS

VIOLATION COMMENTS:

VIOLATION # DESCRIPTION

SAMPLES

SUMMARY

STATUS: CLOSED
DATE CLOSED: 11/28/2006
MISC EXPENSES: 0.00

TIME ON SITE: :
TRAVEL TIME: :
ADMIN TIME: :
MILEAGE:

STATE REPORT FORM:
SUMMARY:

SIGNATURES

ENVIRONMENTALIST: _____ **DATE** 02/02/2006
Dennis Tyndall

REVIEWED BY: _____ **DATE** 02/10/2006
Kelly Randall

BLUE RIDGE
GEOLOGICAL SERVICES, INC.

February 10, 2006

Mr. Allen Schiff
North Carolina Department of Environment and Natural Resources
Mooresville Regional Office
610 East Center Avenue, Suite 301
Mooresville, North Carolina 28115

Subject: **Report of Well Abandonment and Request for NFA Letter**
AG Boone Parts & Service
6634 Statesville Road, Charlotte, North Carolina
NCDENR Groundwater Incident # 27843

Dear Mr. Schiff:

In mid January 2006 AG Boone Sales and Service connected to the City of Charlotte water supply system. On behalf of Mr. Glen Boone and AG Boone Sales and Service, ***Blue Ridge Geological Services, Inc. (Blue Ridge)*** and McCall Brothers abandoned the two water supply wells on the subject site on February 3, 2006. In addition, we abandoned the two monitoring wells on the subject site on February 3, 2006. The wells were abandoned in general accordance with NCDENR and Mecklenburg County guidelines by North Carolina certified well drillers. Well abandonment records are attached.

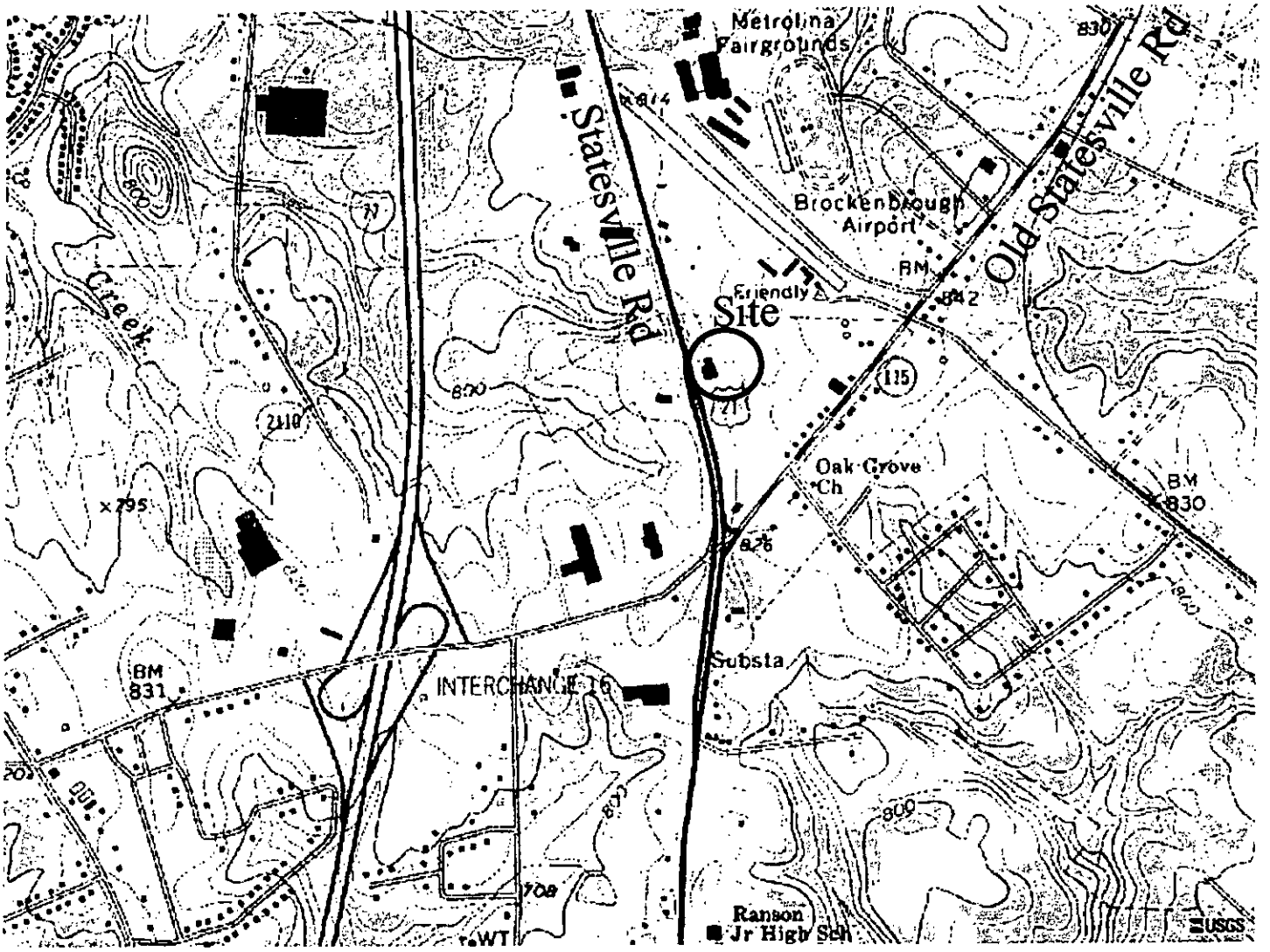
Since the water supply wells have been abandoned, we hereby request that the NCDENR lower the risk of the site from high to low and a No Further Action (NFA) letter be issued. A Notice of Residual Petroleum (NORP) letter will be submitted to your office for approval. Please contact the undersigned if you have any questions concerning this letter or need additional information.

Sincerely,

Jeff Gerlock, L.G.
NC Licensed Geologist #1141

Attachments

Cc: Mr. Glen Boone
Mecklenburg County Health Department
NCDENR DWQ Raleigh Office



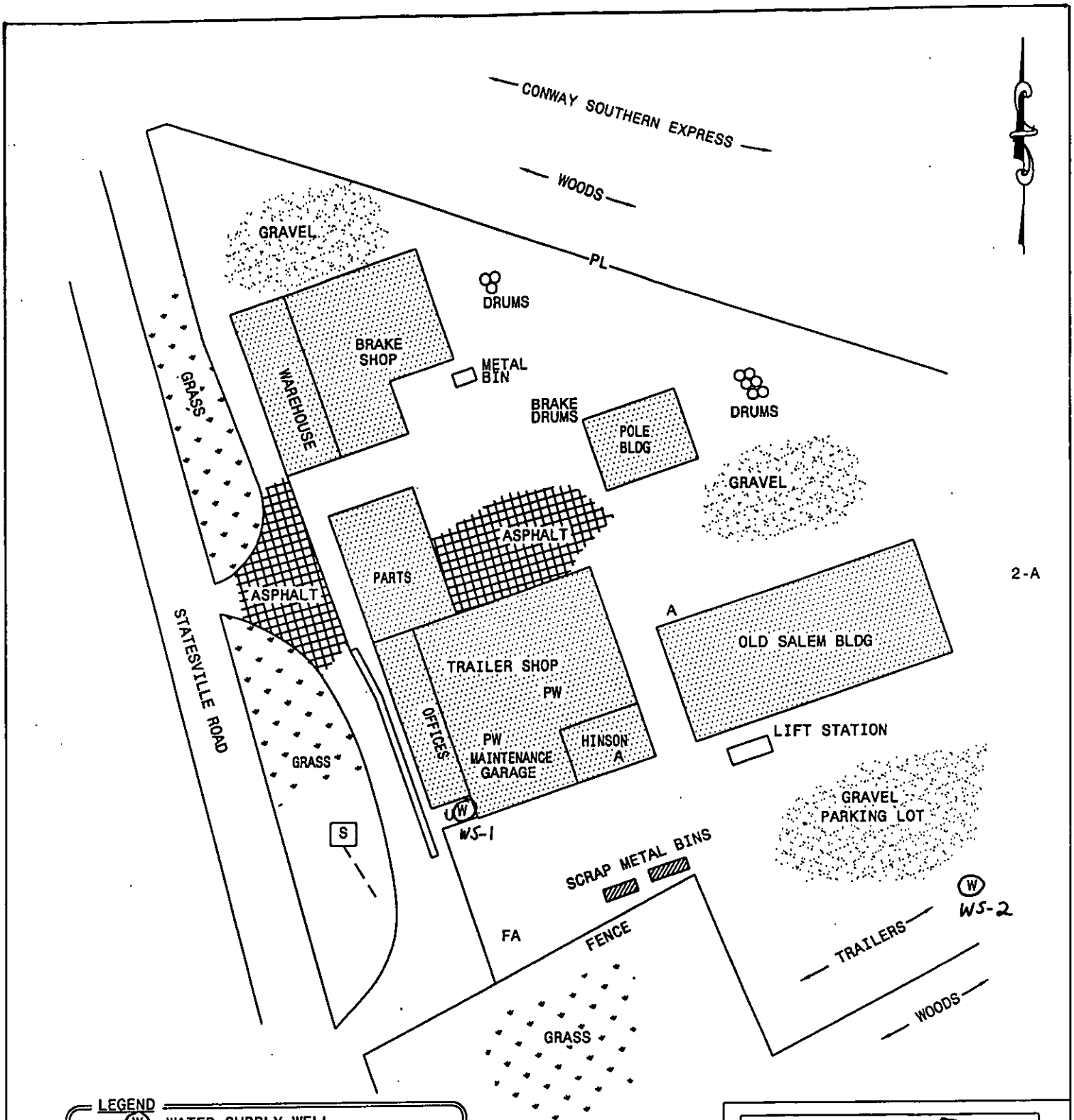
REF.: Derita NC USGS Quadrangle Map dated 1993
from Microsoft Terraserver

BLUE RIDGE

Site Location Map

Boone Parts and Service
6634 Statesville Road
Charlotte, North Carolina

Project No.	Figure 1



LEGEND

W	WATER SUPPLY WELL
U	UNDERGROUND STORAGE TANK
A	ABOVEGROUND STORAGE TANK(AST)
FA	FORMER AST
PW	PARTS WASHING STATION
S	SEPTIC TANK AND DRAINFIELD

Ref: POLARIS and Blue Ridge Field Notes

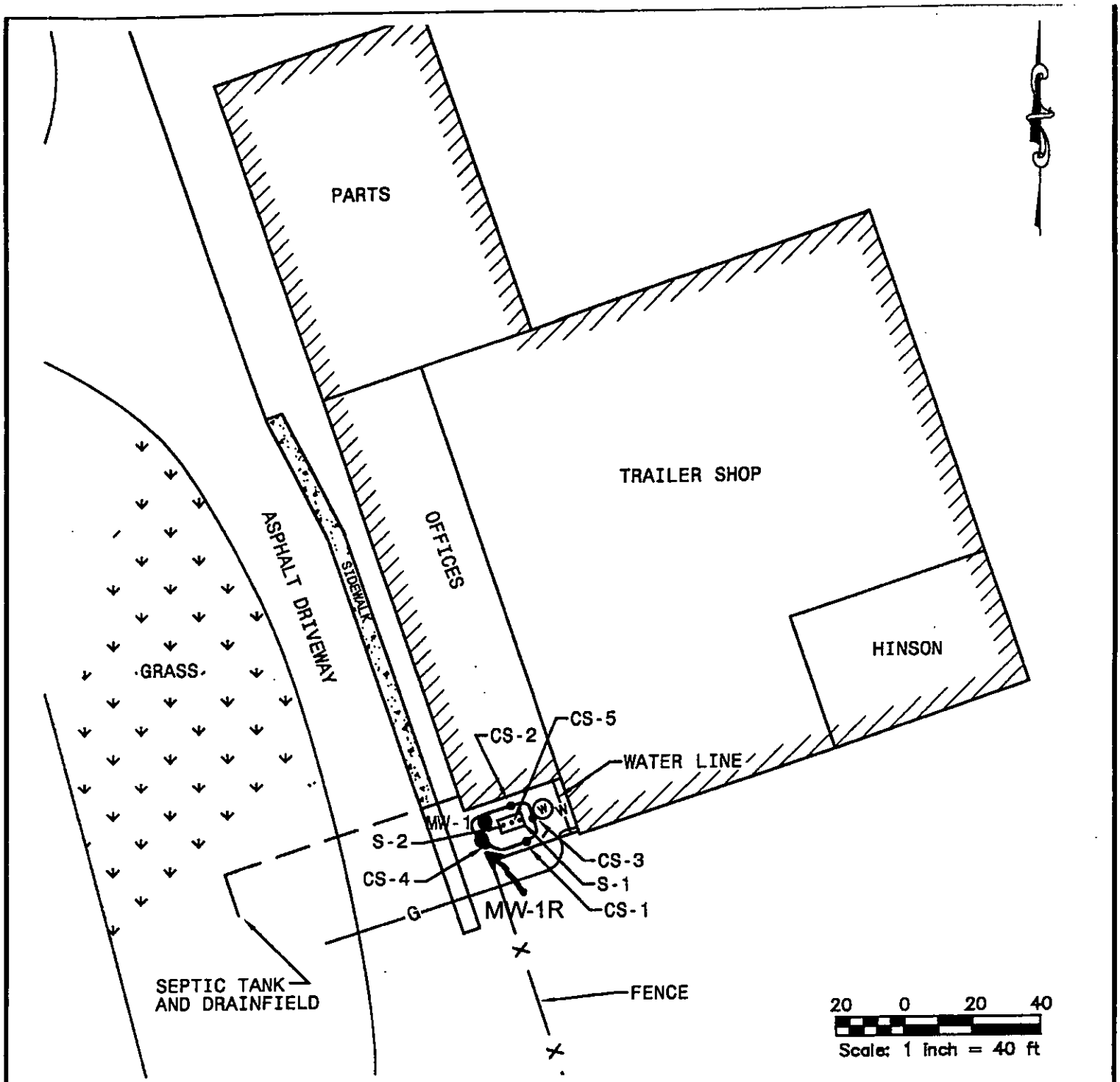
50 0 50 100

Scale: 1 inch = 100 ft

BLUE RIDGE
GEOLOGICAL SERVICES, INC.

SITE PLAN
BOONE PARTS & SERVICE
6634 STATESVILLE ROAD
CHARLOTTE, NORTH CAROLINA

Project No: 622 | Figure No: 2



● Monitoring Well

LEGEND

- FORMER 1000-GAL HEATING OIL UST
- AREA OF SOIL EXCAVATION
- SOIL SAMPLE LOCATION
- (W) WATER SUPPLY WELL(NOT IN USE)
- —W— WATER LINE
- —G— NATURAL GAS LINE

BLUE RIDGE

Well Location Map

Boone Parts and Service
6634 Statesville Road
Charlotte, North Carolina

Project No.	Figure 3

2196 7

430326065

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 Roger A Sherrill - McCall Bros

WELL CONTRACTOR CERTIFICATION # 2224

Meck County Permit # 10000270

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

WS-1

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: Charlotte NC County Mecklenburg
6634 Statesville Road
(Road Name and Number, Community, Subdivision , Lot No.) Quadrangle No.

3. OWNER: AG Boone Sales + Service Atlantic Coast Trailer Sales

4. ADDRESS: 6634 Statesville Rd Charlotte NC

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

6. TOTAL DEPTH: 135' DIAMETER 6 1/4

7. CASING REMOVED:

feet	diameter
NO	

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

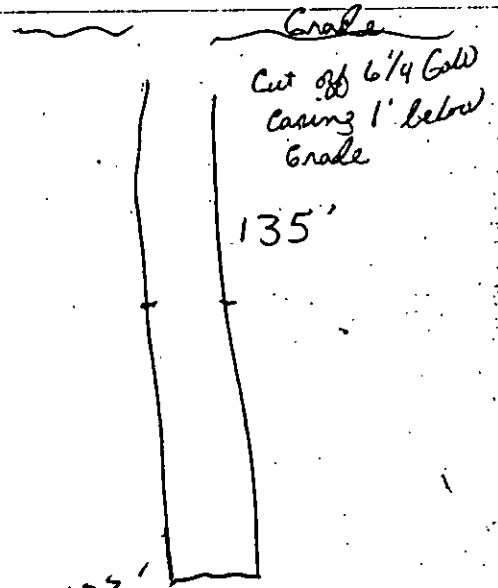
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 20	bags of cement
gallons of water	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped.

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 2-3-06

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 Roger A Sherrill Date 2-3-06

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

21967

413036665

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 Roger A Sherrill - McCall Bros

WELL CONTRACTOR CERTIFICATION # 2224

Mecklenburg County Permit # 10000271

1. WELL USE (Check Applicable Box): Residential ☐ Municipal ☐ Industrial ☑ Agricultural ☐ Monitoring ☐ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____ WS-2

2. WELL LOCATION: (Show a sketch of the location on back of form.)
Nearest Town: Charlotte NC County Mecklenburg
6634 Statesville Road
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: AG Boone Sales and Service ATLANTIC COAST TRAILER SALES

4. ADDRESS: 6634 Statesville Rd Charlotte NC

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

6. TOTAL DEPTH: 165 DIAMETER 6 1/4

7. CASING REMOVED:

feet	diameter
NO	

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

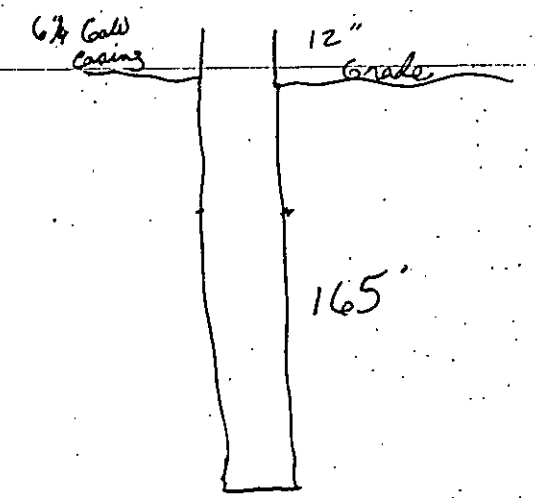
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 27	bags of cement
gallons of water	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped

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.



N 35° 18.820'
W 080° 50.284'

11. DATE WELL ABANDONED 2-3-06

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 Roger A Sherrill Date 2-3-06

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GW-30 Revised 12/99

WELL ABANDONMENT RECORD

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

WELL CONTRACTOR CERTIFICATION # 3392

1. WELL CONTRACTOR:
Jeff Gerlock
Well Contractor (Individual) Name
Blue Ridge Geological Services
Well Contractor Company Name
STREET ADDRESS 107 Oakley Court
Archdale NC 27263
City or Town State Zip Code
(336) 431-5454
Area code - Phone number

2. WELL INFORMATION:
SITE WELL ID #(if applicable) MW-1
STATE WELL PERMIT#(if applicable)
DWQ or OTHER PERMIT #(if applicable)
WELL USE (Check Applicable Box): (Monitoring) Residential Municipal/Public Industrial/Commercial Agricultural Recovery Injection Irrigation
Other (list use)

3. WELL LOCATION:
COUNTY Mecklenburg QUADRANGLE NAME Derita
NEAREST TOWN:
6634 Statesville Rd, Charlotte
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:
Slope Valley (Flat) Ridge Other
(Check appropriate box)

LATITUDE 35° 18' 50" North
LONGITUDE 80° 50' 21" West
May be in degrees, minutes, seconds, or in a decimal

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.)

4a. FACILITY- is the name of the business where the well is located. Complete 4a and 4b.
(If a residential well, omit 4a and complete 4b, well owner information only.)
FACILITY ID #(if applicable)
NAME OF FACILITY AG Boone Parts & Service
STREET ADDRESS 6634 Statesville Road
Charlotte NC 28269
City or Town State Zip Code

4b. CONTACT PERSON/WELL OWNER:
NAME Glenn Boone - AG Boone Parts & Service
STREET ADDRESS 6634 Statesville Road
Charlotte NC 28269
City or Town State Zip Code
(704) 596-6748
Area code - Phone number

5. WELL DETAILS:
a. Total Depth: 20 Ft. Diameter: 1 In.
b. Water Level (Below Measuring Point): 6 Ft.
Measuring point is 0.5 ft. above/(below) land surface.

6. CASING:

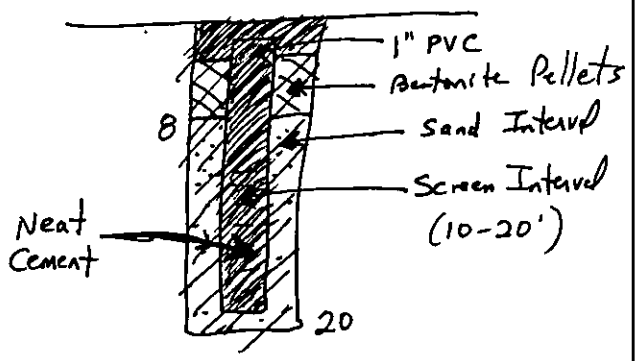
	Length	Diameter
a. Casing Depth (if known):	10 Ft.	1 In.
b. Casing Removed:	0 Ft.	In.

7. DISINFECTION:
(Amount of 70% calcium hypochlorite used)

8. SEALING MATERIAL:
Neat Cement
Bags of cement 1/2 bag
Gallons of water
Sand Cement
Bags of cement
Gallons of water
Bentonite
Bags of bentonite
Type: Slurry Pellets
Gallons of water
Other
Type material
Amount

9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:
Pumped into well with tremie pipe/hose

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



11. DATE WELL ABANDONED 2/3/06

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

Jeffrey L. Gerlock 2/3/06
SIGNATURE OF PERSON ABANDONING THE WELL DATE
(Well abandonment must be performed by a Certified Well Contractor unless the private well owner personally abandons the well in accordance with 15A NCAC 2C .0113.)

Jeffrey L. Gerlock
PRINTED NAME OF PERSON ABANDONING THE WELL

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

Form GW-30
Rev. 11/05

WELL ABANDONMENT RECORD

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

WELL CONTRACTOR CERTIFICATION # 3392

1. WELL CONTRACTOR:

Jeff Gerlock
Well Contractor (Individual) Name

Blue Ridge Geological Services
Well Contractor Company Name

STREET ADDRESS 107 Oakley Court

Archdale NC 27263
City or Town State Zip Code

(336) 431-5459
Area code - Phone number

2. WELL INFORMATION:

SITE WELL ID #(if applicable) MW-1R

STATE WELL PERMIT#(if applicable)

DWQ or OTHER PERMIT #(if applicable)

WELL USE (Check Applicable Box): (Monitoring) Residential Municipal/Public Industrial/Commercial Agricultural Recovery Injection Irrigation

Other (list use)

3. WELL LOCATION:

COUNTY Mecklenburg QUADRANGLE NAME Derita

NEAREST TOWN:

6634 Statesville Rd, Charlotte
(Street/Road Name, Number, Community, Subdivision, Lot No., Parcel, Zip Code)

TOPOGRAPHIC / LAND SETTING:
Slope Valley (Flat) Ridge Other
(Check appropriate box)

LATITUDE 35° 18' 50" North
LONGITUDE 80° 50' 21" West

May be in degrees, minutes, seconds, or in a decimal

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.)

4a. FACILITY - is the name of the business where the well is located. Complete 4a and 4b. (If a residential well, omit 4a and complete 4b, well owner information only.)

FACILITY ID #(if applicable)

NAME OF FACILITY AG Boone Parts & Service

STREET ADDRESS 6634 Statesville Road

Charlotte NC 28269
City or Town State Zip Code

4b. CONTACT PERSON/WELL OWNER:

NAME Glenn Boone - AG Boone Parts & Service

STREET ADDRESS 6634 Statesville Road

Charlotte NC 28269
City or Town State Zip Code

(704) 596-6748
Area code - Phone number

5. WELL DETAILS:

a. Total Depth: 14 Ft. Diameter: 1 In.

b. Water Level (Below Measuring Point): 6 Ft.

Measuring point is 0.5 ft. above/~~below~~ land surface.

6. CASING:

	Length		Diameter	
a. Casing Depth (if known):	10	Ft.	1	In.
b. Casing Removed:	0	Ft.		In.

7. DISINFECTION:

(Amount of 70% calcium hypochlorite used)

8. SEALING MATERIAL:

Neat Cement
Bags of cement 1/2 bag ✓
Gallons of water

Sand Cement
Bags of cement
Gallons of water

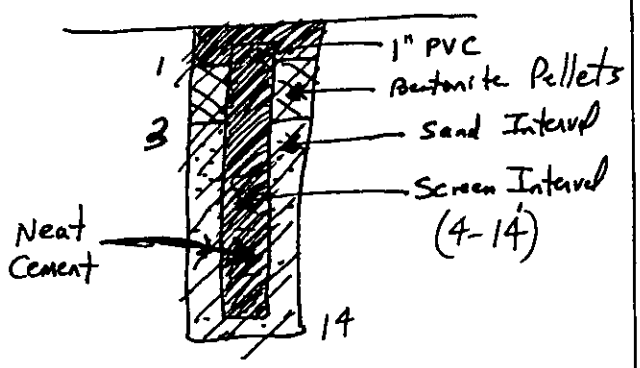
Bentonite
Bags of bentonite
Type: Slurry Pellets
Gallons of water

Other
Type material
Amount

9. EXPLAIN METHOD OF EMPLACEMENT OF MATERIAL:

Pumped into well with tremie pipe/hose

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



11. DATE WELL ABANDONED 2/3/06

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

Jeffrey L. Gerlock 2/3/06
SIGNATURE OF PERSON ABANDONING THE WELL DATE
(Well abandonment must be performed by a Certified Well Contractor unless the private well owner personally abandons the well in accordance with 15A NCAC 2C .0113.)

Jeffrey L. Gerlock
PRINTED NAME OF PERSON ABANDONING THE WELL

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

Form GW-30
Rev. 11/05

21967

(704)366-5

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 Roger A Sherrill - McCall Bros

WELL CONTRACTOR CERTIFICATION # 2224

Meck County Permit # 10000271

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 NC County Mecklenburg
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Atlantic Coast Trailer Sales

4. ADDRESS: 6634 Statesville Rd Charlotte NC

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

6. TOTAL DEPTH: 165 DIAMETER 6 1/4

7. CASING REMOVED:

feet	diameter
NO	

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

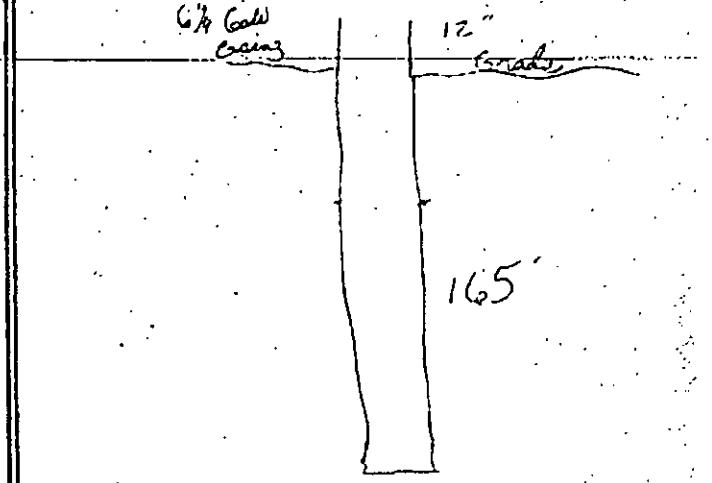
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 27	bags of cement
gallons of water	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped

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.



N 35° 18.820
W 080° 50.284

11. DATE WELL ABANDONED 2-3-06

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 Roger A Sherrill Date 2-3-06

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

21967

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

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Meck County Permit # 10000270

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Nearest Town: Charlotte NC County Mecklenburg

(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Atlantic Coast Trailer Sales

4. ADDRESS: 6634 Statesville Rd Charlotte NC

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

6. TOTAL DEPTH: 135' DIAMETER 6 1/4

7. CASING REMOVED:

feet	diameter
NO	

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

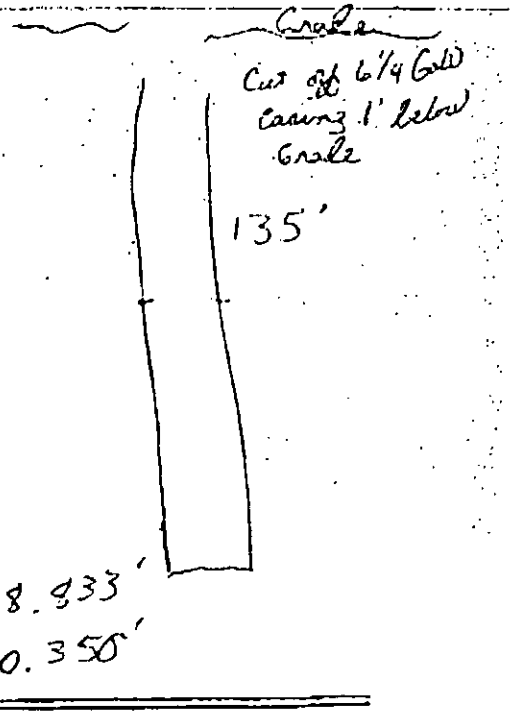
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 20	bags of cement
gallons of water	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped

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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

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 Roger A Sherrill - McCall Bros
WELL CONTRACTOR CERTIFICATION # 2224

Meck County Permit # 10000271

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 NC County Mecklenburg
6634 Statesville Rd. Charlotte, NC
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Atlantic Coast Trailer Sales

4. ADDRESS: 6634 Statesville Rd Charlotte NC

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

6. TOTAL DEPTH: 165 DIAMETER 6 1/4

7. CASING REMOVED:

feet	diameter
NO	

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

9. SEALING MATERIAL:

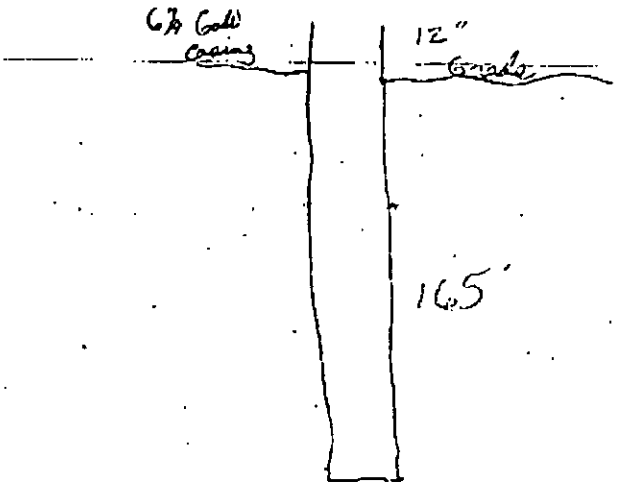
Neat Cement
bags of cement 27
gallons of water

Sand Cement
bags of cement
gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped

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.



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GW-30 Revised 12/99

9303/0065

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WELL ABANDONMENT RECORD

WELL CONTRACTOR Roger A Sherrill - McCall Bros

WELL CONTRACTOR CERTIFICATION # 2224

Meck County Permit # 10000270

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 NC County Mecklenburg
6634 Statesville Rd. Charlotte, NC
(Road Name and Number, Community, Subdivision, Lot No.) Quadrangle No.

3. OWNER: Atlantic Coast Trailer Sales

4. ADDRESS: 6634 Statesville Rd Charlotte NC

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

6. TOTAL DEPTH: 135' DIAMETER 6 1/4

7. CASING REMOVED:

feet	diameter
NO	

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

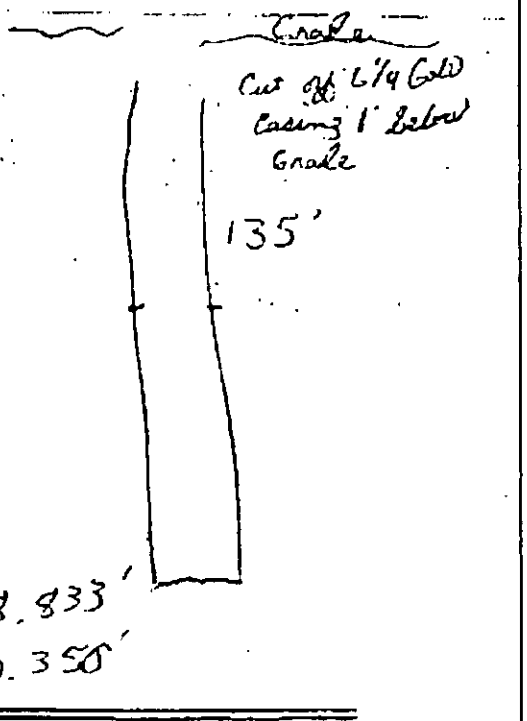
9. SEALING MATERIAL:

Neat Cement	Sand Cement
bags of cement 20	bags of cement
gallons of water	gallons of water

Other
Type material
Amount

10. EXPLAIN METHOD EMPLACEMENT OF MATERIAL.
Pumped

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 2-3-06

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 Roger A Sherrill Date 2-3-06

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) 336-6894

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

Permit#: 10000271 **Tax Parcel #:** 037-421-04
Property Owner: Atlantic Coast Trailer Sales
Job Location Address:6634 STATESVILLE RD
City/ETJ:CHARLOTTE **State:** NC **Zip Code:** 28269
Permit Issuance Date: 2/1/2006
Use of Well:
Type of Facility Served by Well:
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 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):

- [X] 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:

Jeremy Michelone, R.S.
Authorized Agent: Print Name

Jeremy Michelone, R.S.
Signature:

Owner/Legal Agent: Print Name

Signature:

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Groundwater & Wastewater Services
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Job Location Address:6634 STATESVILLE RD
City/ETJ:CHARLOTTE **State:** NC **Zip Code:** 28269
Permit Issuance Date: 2/1/2006
Use of Well:
Type of Facility Served by Well:
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

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

Other Conditions of This Permit:

Jeremy Michelbrink R.S.
Authorized Agent: Print Name

Jeremy Michelbrink R.S.
Signature:

Owner/Legal Agent: Print Name

Signature:

Application #270

MCCALL BROTHERS INC. ACCOUNT # X27070 FX TO- 704 336 6894

PERMIT APPLICATION FOR A COMMERCIAL 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 ____ CK# ____

WELL FEE ____ DATE ____ CK# ____

FILE # 21967

SEPTIC / TYPE APPLICATION: ☐ NONE ☐ NEW SYSTEM ☐ ALTERATION ☐ REPAIR ☐ MODIFY PLOT PLAN

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

JOB LOCATION INFORMATION WELL # 1

PROJECT TRACKING #: 037-421-04

TAX/PARCEL #:

STREET ADDRESS: 6634 STATESVILLE Rd

CITY: CHARLOTTE

STATE: NC ZIP: 28269

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?:

☐ TOILETS/URINALS ☐ HANDSINKS ☐ SHOWERS
☐ FLOOR DRAINS ☐ OTHER

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: ATLANTIC COAST TRAILER SALES

ADDRESS: 6634 STATESVILLE

CITY: CHARLOTTE

STATE: N.C. ZIP: 28269

HOME PHONE: WORK PHONE: (704) 597-0253

MOBILE PHONE: FAX:

LEGAL AGENT FOR PROPERTY OWNER, IF APPLICABLE:

NAME: MCCALL BROS INC.

ADDRESS: P.O. BOX 66910

CITY: CHARLOTTE

STATE: N.C. ZIP: 28266

HOME PHONE: WORK PHONE: 704 399-1506

MOBILE PHONE: FAX:

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
WASTEWATER SECTION

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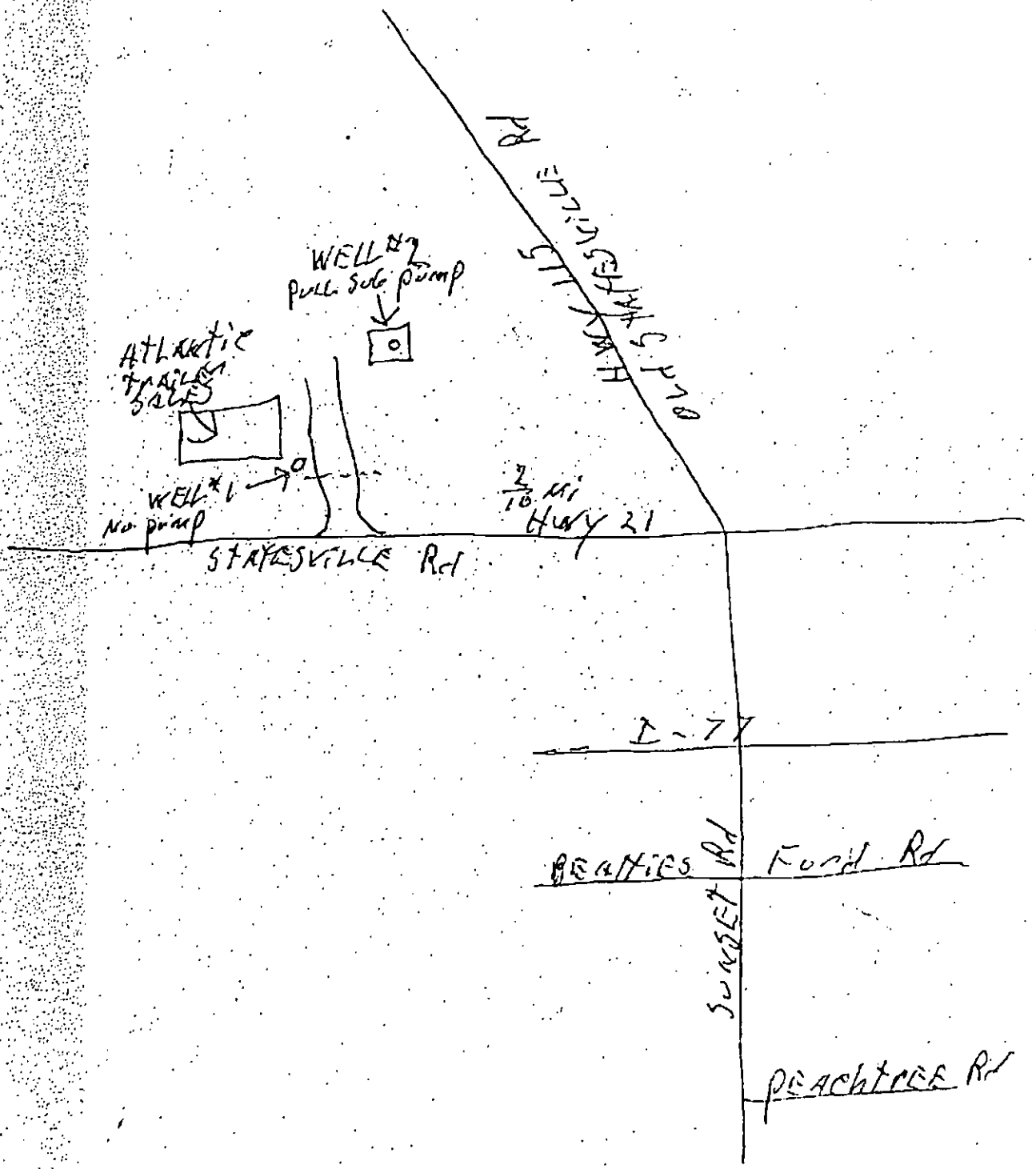
MECKLENBURG COUNTY HEALTH DEPARTMENT
GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST., SUITE 211
CHARLOTTE, NC 28202
704-336-5103 / FAX 704-336-6894

WELL DRILLING—PUMP INSTALLATION LOCATIONS & DIRECTIONS CONTRACT NO.____

Name Blue Ridge Geological 4303726665

Address

Location



21 N 2W

Permit #271

MCCALL BROTHERS INC. ACCOUNT # X27070 FX TO - 704 336 6894

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IMPROVEMENT PERMIT / CONSTRUCTION AUTHORIZATION
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MECKLENBURG COUNTY GROUNDWATER & WASTEWATER SERVICES

FILE # 21967

SEPTIC FEE: DATE: CR#:

WELL FEE: DATE: CR#:

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

JOB LOCATION INFORMATION WELL #2

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STATE: NC ZIP: 28269

LOT #:

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CHARLOTTE, NC 28202
704-336-5103 / FAX:704-336-6894

WELL DRILLING—PUMP INSTALLATION LOCATIONS & DIRECTIONS CONTRACT NO.____

Name BLUE RIDGE GEOLOGICAL

Address

Location

