Franklin County

*File #: 463574 - 2
PIN #:
Tax Lot #: 49
Tax Block #: 049145

WELL CONSTRUCTION RECORD

Owner: ECI Custom Homes INC
PO Box 1003
Oxford, NC 27565

Directions
25 Uptown Court

Drilling Contractor: Southern Well Drilling
Driller Registration: 3104
Date Drilled: 06/24/2026
Use of Well: SINGLE FAMILY

Total Depth: 400 Ft.
Static Water Level: 30 Ft.
Replacement Well: NO
Yield: gpm

Water Zone: 1) Ft. 2) Ft.
3) Ft. 4) Ft.

Disinfection Type: GRANULAR Amount:

WELL HEAD CONSTRUCTION

Location: 25 Uptown Court
Zebulon NC, 27597
Latitude:
Longitude:

Enclosure	☐ Yes	☐ No	☒ N/A
Enclosure Floor	☐ Yes	☐ No	☒ N/A
Access Port	☒ Yes	☐ No	☐ N/A
Vent:	☒ Yes	☐ No	☐ N/A
Sample Tap	☒ Yes	☐ No	☐ N/A
Back Flow	☒ Yes	☐ No	☐ N/A
Tee (jet)	☐ Yes	☐ No	☒ N/A
Suction Line	☐ Yes	☐ No	☐ N/A
Temporary	☐ Yes	☐ No	☒ N/A
Well ID Plate	☒ Yes	☐ No	☐ N/A
Pump ID Plate	☒ Yes	☐ No	☐ N/A

EHS: Jones, Lori
Issue Date: 07/30/2026

Casing: Depth: Ft. Thickness: In. Comments:
Diameter: In. Top of Casing: In.
Material: PVC SCH 40

Grout:

	Depth			Material	Method
From	0	To	Ft.	N/A	N/A
From	0	To	Ft.	N/A	N/A

*** Liner Date:** From 0 To Ft.

Grout:

	Depth			Material	Method
From	0	To	Ft.	N/A	N/A

Issued by: Jones, Lori
Date of Issue: 07/30/2026

This well was constructed, repaired or abandoned in compliance with the well permit and in accordance with 15 A NCAC 02C .0100, .0300. The well owner shall not place potential sources of groundwater contamination closer to the well than the separation distances specified in 15A NCAC 02C .0100, .0300.

Franklin County
NORTH CAROLINA

File # 463574 PIN# _____

Property Address: 25 Uptown Ct

Applicant or Owner Name: Jason Fowler

Environmental Health Septic/Well Permit Diagram

Building permits cannot be issued nor should construction begin without Construction Authorization issuance.

(X) Septic Improvement Permit (X) Septic Construction Authorization (CA) ( ) CA Reissue** (X) As Built
(X) Well Construction Authorization (X) Additional Diagram/Specifications Attached See Attached

Diagram Date:** 11-26-25 **EHS:** [signature]

****Any previously dated CA diagram is revoked and/or invalid. Confirm this is the valid diagram for the site before beginning any construction.**

Installation/grouting inspections may be scheduled the day before, or, the day of installation until 9am by contacting the Environmental Health office at 919 496 8100. A revisit fee may apply if installation is not ready for inspection at the time requested. ***Septic Operations Permits*** will be issued after installation is approved, all permits conditions are met, and any outstanding fees are paid. ***Well Certificate of Completion*** will be issued after well head approval, all permit conditions are met, and any outstanding fees are paid.

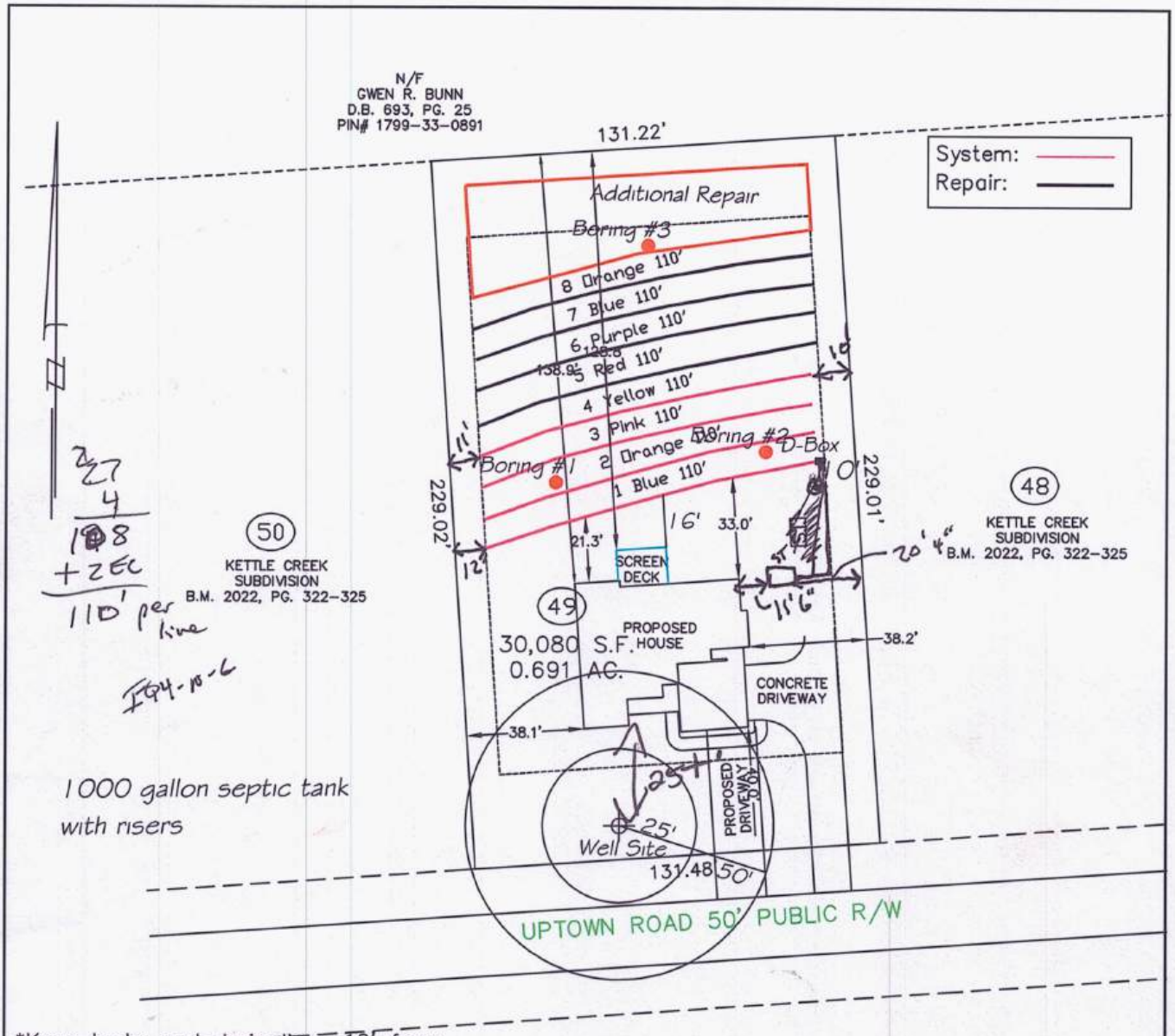
Septic Tank 1000 Pump Tank n/a Drainfield 3'x 440' Type System Acc Dbox Max Trench Depth 28"

Septic Contractor Currin Farms Septic Septic/Pump tank dates D3 1000 Gal Pump Fee Paid _____

Well Contractor So Well Well Head Date: 7-30-26 Pump Final: _____ N/A (circle)

- I.P. + C.A. issued under "aZ" rules
- See attached packet from CCSC.
- Well location marked on septic diagram page in packet attached.

- V'd Tanks + Lines 4-8-26 SEL.
- IT4-N-G (D box)
- Well not drilled at time of septic inspection.



*Keep tanks ~~and drain lines~~ 10' from property lines.
*Not a survey.
*Not a guarantee of a septic permit.
*Keep supply lines >5' from property lines.
*Some lines are flagged longer in the field than lengths indicate.
*No grading septic area.

GRAPHIC SCALE
1" = 50'
50 0 50 100

System: Gravity to D-Box
Lines: 1-4, (440')
Accepted Status System
0.275 Soil LTAR
28" Trench Bottom

Repair: Gravity to D-Box.
Lines: 5-8, (440')
Accepted Status System
0.275 Soil LTAR
28" Trench Bottom

Central Carolina Soil Consulting, PLLC
1900 South Main Street, Suite 110
Wake Forest, North Carolina 27587
Phone (919)569-6704 Fax (919)569-6703

4-Bedroom Septic Layout
Lot 49, Kettle Creek Subdivision
Franklin County, North Carolina

Job#: 4519
Drawn By: JH
Date: 04/17/2023
Revision: 6/27/23
Revision: 11/18/25

WELL CONSTRUCTION RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Van Elliott
Well Contractor Name

3104
NC Well Contractor Certification Number

Southern Well Drilling LLC
Company Name

2. Well Construction Permit #: 463574
List all applicable well construction permits (i.e. County, State, Variance, etc.)

3. Well Use (check well use):

Water Supply Well:
- ☐ Agricultural
- ☐ Geothermal (Heating/Cooling Supply)
- ☐ Industrial/Commercial
- ☐ Irrigation
- ☐ Municipal/Public
- ☒ Residential Water Supply (single)
- ☐ Residential Water Supply (shared)

Non-Water Supply Well:
- ☐ Monitoring
- ☐ Recovery

Injection Well:
- ☐ Aquifer Recharge
- ☐ Aquifer Storage and Recovery
- ☐ Aquifer Test
- ☐ Experimental Technology
- ☐ Geothermal (Closed Loop)
- ☐ Geothermal (Heating/Cooling Return)
- ☐ Groundwater Remediation
- ☐ Salinity Barrier
- ☐ Stormwater Drainage
- ☐ Subsidence Control
- ☐ Tracer
- ☐ Other (explain under #21 Remarks)

4. Date Well(s) Completed: 6/24/26 **Well ID#**

5a. Well Location:

ECI
Facility/Owner Name

Jason Fowler
Facility ID# (if applicable)

25 Uptown Ct Zebulon
Physical Address, City, and Zip

Franklin
County

Kettle Creek Lot 49
Parcel Identification No. (PIN)

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

_____ N _____ W

6. Is (are) the well(s): ☒ **Permanent** or ☐ **Temporary**

7. Is this a repair to an existing well: ☐ Yes or ☒ No
If this is a repair, fill out known well construction information and explain the nature of the repair under #21 remarks section or on the back of this form.

8. Number of wells constructed: _____
For multiple injection or non-water supply wells ONLY with the same construction, you can submit one form.

9. Total well depth below land surface: 400 (ft.)
For multiple wells list all depths if different (example: 5@200' and 2@100')

10. Static water level below top of casing: 30 (ft.)
If water level is above casing, use "-"

11. Borehole diameter: 6 (in.)

12. Well construction method: Air
(i.e. auger, rotary, cable, direct push, etc.)

FOR WATER SUPPLY WELLS ONLY:

13a. Yield (gpm) 20+ **Method of test:** Air

13b. Disinfection type: HTH **Amount:**

For Internal Use ONLY:

14. WATER ZONES

FROM	TO	DESCRIPTION
0 ft.	-380 ft.	
ft.	ft.	

15. OUTER CASING (for multi-cased wells) OR LINER (if applicable)

FROM	TO	DIAMETER	THICKNESS	MATERIAL
+1 ft.	-100 ft.	6 in.		PVC

16. INNER CASING OR TUBING (geothermal closed-loop)

FROM	TO	DIAMETER	THICKNESS	MATERIAL
ft.	ft.	in.		
ft.	ft.	in.		

17. SCREEN

FROM	TO	DIAMETER	SLOT SIZE	THICKNESS	MATERIAL
ft.	ft.	in.			
ft.	ft.	in.			

18. GROUT

FROM	TO	MATERIAL	EMPLACEMENT METHOD & AMOUNT
0 ft.	-20 ft.	Bentonite	Poured
ft.	ft.		
ft.	ft.		

19. SAND/GRAVEL PACK (if applicable)

FROM	TO	MATERIAL	EMPLACEMENT METHOD
ft.	ft.		
ft.	ft.		

20. DRILLING LOG (attach additional sheets if necessary)

FROM	TO	DESCRIPTION (color, hardness, soil/rock type, grain size, etc.)
ft.	ft.	
ft.	ft.	
ft.	ft.	
ft.	ft.	
ft.	ft.	
ft.	ft.	
ft.	ft.	

21. REMARKS

22. Certification:

Van Elliott
Signature of Certified Well Contractor

6/24/26
Date

By signing this form, I hereby certify that the well(s) was (were) constructed in accordance with 15A NCAC 02C .0100 or 15A NCAC 02C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

23. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well construction details. You may also attach additional pages if necessary.

SUBMITTAL INSTUCTIONS

24a. For All Wells: Submit this form within 30 days of completion of well construction to the following:

Division of Water Quality, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

24b. For Injection Wells: In addition to sending the form to the address in 24a above, also submit a copy of this form within 30 days of completion of well construction to the following:

Division of Water Quality, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

24c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well construction to the county health department of the county where constructed.