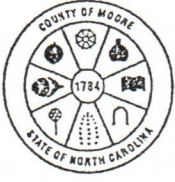


Permit No. 30892
 LRK 20010448
 Issue Date 12-12-03
 Expiration Date 12-12-04



WELL PERMIT

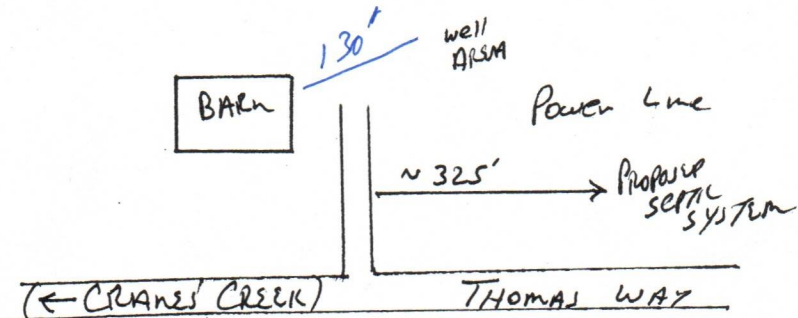
MOORE COUNTY HEALTH DEPARTMENT
 P.O. BOX 279
 CARTHAGE, NC 28327
 PHONE (910) 947-6283
 FAX (910) 947-6253

Name ELIZABETH FORBE Phone _____
 Address THOMAS WAY CAROLINA
 Location ABOVE
 Type of Well Construction _____
 Use: Private Public Community _____ Public Non-Community _____
 Number of Persons to be Served _____ Number of Connections _____
 Well Contractor _____ Telephone _____
 Permit Issued By TERRY L. PURVO

• WELL SHALL BE INSTALLED AS SHOWN ON PERMIT. WELL PERMIT IS VALID FOR ONE YEAR FROM THE DATE OF ISSUANCE

Proposed
 Home

* Well 25' From
 Home 50' To BARN
 100' TO SEPTIC SYSTEM



Well Construction record provided to: Health Department
 Owner

I certify that the well constructed on above property meets all requirements of 15 NCAC 2C Well Construction Standards.

Signed [Signature] Date 8-15-03
 (Well Contractor)

Grout Inspection By: TERRY L. PURVO Date 8-15-03

Water Supply Inspected By _____ Date _____
 (Health Department)

Bacteriological Water Report: Positive _____ Negative _____

Date _____

Note: Moore County Health Department allows for one resample with positive sample results



MOORE COUNTY HEALTH DEPARTMENT APPLICATION FOR WELL PERMIT

#30892

DATE: 3/20/03 LRK: 20010448

NAME: Elizabeth Forbes 24015/100.00

ADDRESS: Plat 5B Thomas Way Cammernon 28326

TELEPHONE NUMBER: 910-315-6602 NUMBER OF CONNECTIONS: _____

NUMBER OF PEOPLE SERVED: 4 5 stall barn

DIRECTIONS TO PROPERTY (911 Address if possible): Cranes Ck Rd → R on Thomas Way
3/4 mile. Farm on left

* **HOMEOWNER:** It is very important that all wells are properly protected to prevent surface water from contaminating your water supply. You should insure that the well driller constructs the well according to state rules. Health department staff will make random inspections to observe grout pouring.

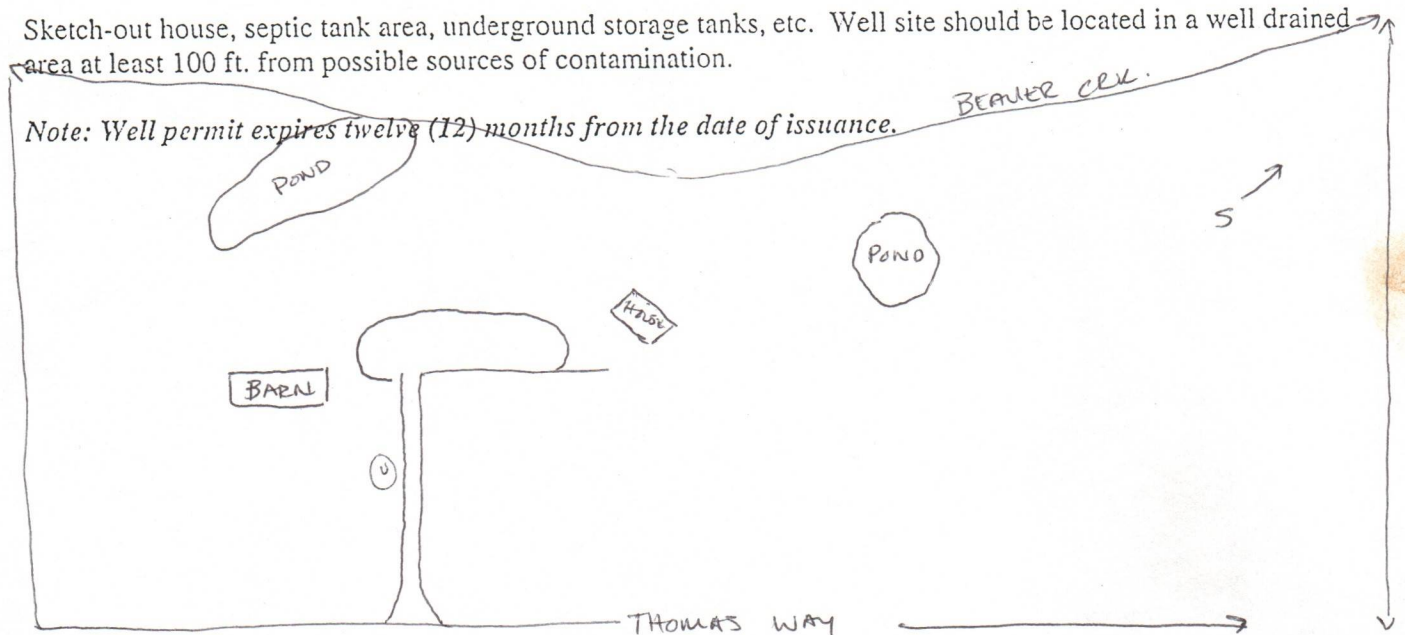
State rules require the following: All wells must have a minimum of 20 ft. of concrete grout around the casing. Wells in which it is not possible to pour 20 ft. of grout will have to be approved by the Division of Environmental Management Groundwater Section through a variance procedure before the concrete is poured.

Well drillers and pump installers are responsible for properly disinfecting wells after construction.

Homeowners must call the health department to request a bacteriological water sample after disinfection to insure the water supply is safe for human consumption.

Sketch-out house, septic tank area, underground storage tanks, etc. Well site should be located in a well drained area at least 100 ft. from possible sources of contamination.

Note: Well permit expires twelve (12) months from the date of issuance.



The well site will be located using the best available information provided by the property owner/or his agent. The Health Department is not responsible for improper location of well due to erroneous information provided to the Health Department, mislocation of wells by the contractor, quality or quantity of the water supply.

SIGNED: Elizabeth Forbes
(owner or his representative)

DATE: 3/20/03