

WV STATE DEPARTMENT OF HEALTH
 Office of Environmental Health Services
ENVIRONMENTAL ENGINEERING DIVISION

WELL COMPLETION REPORT

Date(s) 6-2-94 County Hampshire Permit #: DW-14-05-94-265
 Town: Three Churches Area Name/Location Corn Hollow Sub. Lot 20
 Well Owner: Etta M. Armstrong Address: 127 School House Rd.
 Telephone Number: 410-549-7205 Danvers Md. 21784
 Well Driller: B. Mark Smith Address: Hc 86 Box 2-A
 Telephone Number: 822-4786 Springfield Wv. 26763
822-5867

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING	REMARKS:
0-70	Brown Slate	Type of Well: <u>Home</u> Drilling Method: <u>Air Hammer</u>
71-201	Hard gray shale	Well Diameter: <u>6 1/4"</u> Casing O.D.: <u>6 5/8"</u>
202-	Water	Well Depth: <u>245</u> Date Completed: <u>6/2/94</u>
203-245	Hard gray shale	CASING: Length <u>84</u> Feet Height above ground <u>1</u> Feet
		<input checked="" type="checkbox"/> Steel <input type="checkbox"/> Plastic <input type="checkbox"/> Cast Iron
		Other _____ Type _____
		SCREEN
		<input checked="" type="checkbox"/> None Installed
		Type _____ Diameter _____
		Slot/Gauge _____ Length _____
		Set Between _____ Ft. and _____ Ft.
	<u>720 gph</u>	

PUMPING OR BAILING TEST

DETAILS	#1	#2	#3
Static Water Level (Ft. Below Grade)	<u>160</u>		
Pumping Rate (GPM)	<u>12</u>		
Pumping Level (Ft Below Grade)	<u>230</u>		
Duration of Test (In Hours)	<u>1</u>		
Recovery Time to Static Level (In Hours)	<u>1/2</u>		

WELL HEAD

Pitless Adapter: Type, Make, Etc. _____
 Well Cap: Type, Make, Etc. Standard
 Well Seal: Type, Make, Etc. _____
 Well Platform:
 Length _____ Width _____ Thickness _____
 Grouting: Yes No
 All Public Water Supplies must be grouted. pressure

I hereby certify that this well was drilled and constructed under my supervision, in compliance with all requirements of the referenced permit, and that this record is true to the best of my knowledge and belief.

B. Mark Smith #001
 Name Certification No.
B.W. Smith Well Drilling
 Registered Business Name
Benjamin Mark Smith 6/2/94
 Signed Date

SS-177
Revised 1-71

WEST VIRGINIA
SEPTIC TANK INSPECTION FORM

Hampshire County Health Department Installation Permit No. ST-14-85-022

Name of Owner Etta M. Armstrong

Address 127 School House Rd., Dethers, MD 21784

Property Address Coon Hollow Sub. Lot #20

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served mobile home No. Water Closets

Lot Size 4 ^{acres} sq. ft. Area suitable for sewage disposal installation sq.ft.

Source of Water Supply well No. Lavatories

No. Bedrooms 2 No. Showers or Tubs No. Baths

No. Garbage Grinders 0 No. Automatic Washers 1

SEPTIC TANK

Material concrete Length x Width x Depth = cubic feet

Liquid Depth ft. Liquid Capacity 1000 gal.

Distance to: Dwelling 10' Water Supply 90' Nearest Property Line 80'

SOIL ABSORPTION SYSTEM

Type Drain Line Material plastic Trench Width 36 Inches

Trench Depth 20-24 Inches Total Absorption area in Trench Bottom 540 sq. ft.

Diameter of Drain Line 4 Inches Type Filter Media gravel-28 ton

No. of Drain Lines 2 Depth Filter Media Under Drain Line 8 Inches

Length of Each Line 90, 90, , ft. Depth Filter Media Over Drain Line 4 in

Distance of Disposal Field to: (a) Dwelling 28'

(b) Water Supply 102' (c) Nearest Property Line 10'

An inspection of the septic tank system described herein disclosed that said system (MEETS) DOES NOT MEET the minimum standards established by the West Virginia State Department of Health.

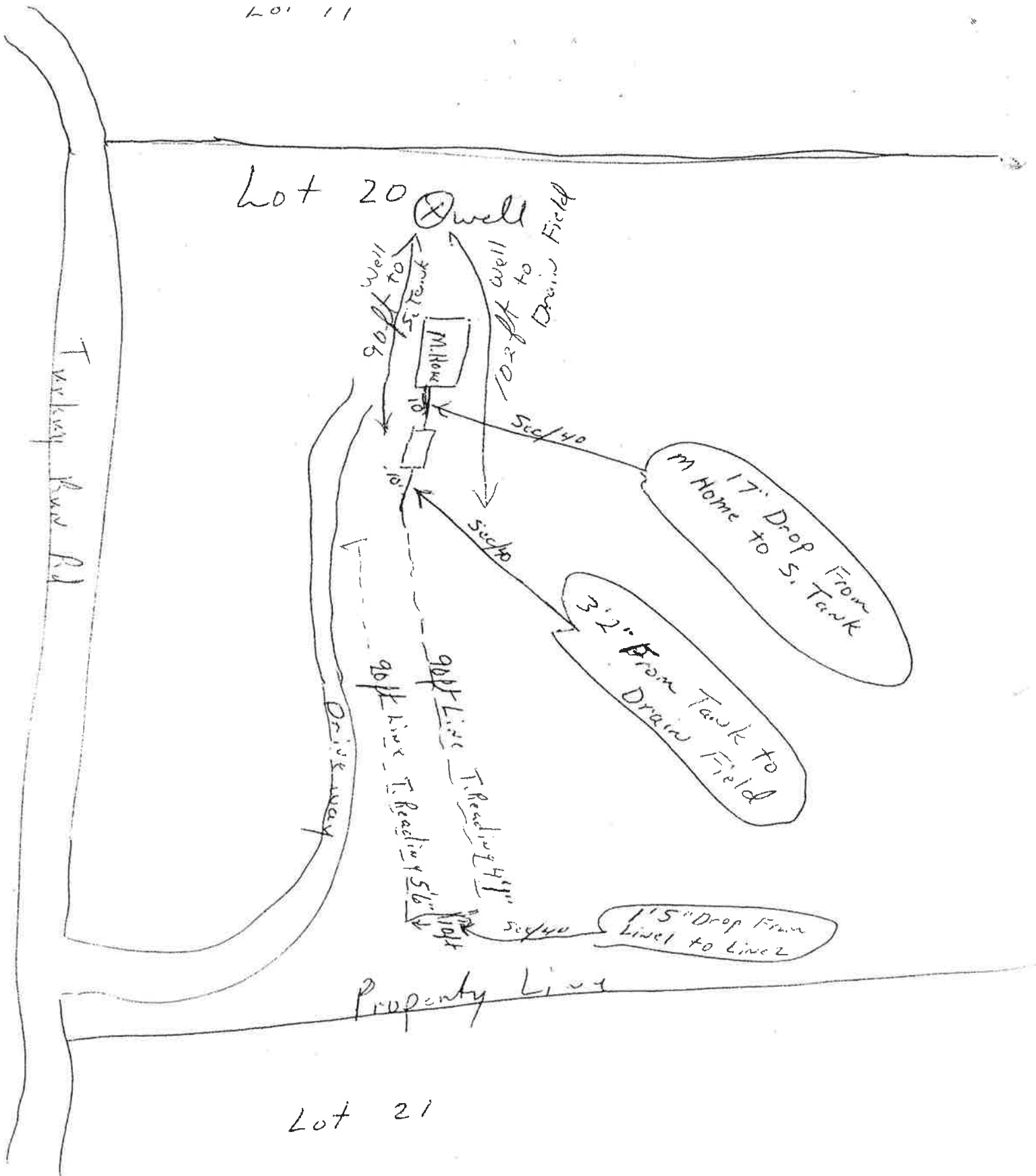
7-22-94
Date

JPK
Sanitarian

SKETCH OF SYSTEM TO BE DRAWN ON BACK

Note: Copy of this inspection report must be given to owner and the original filed in the Health Department files. PERMANENT RECORD - DO NOT DESTROY.

Lot 11



Lot 20

Well

Drain Field

Turkey Run Rd

Driveway

M. Home

90ft Line T. Reading 4"1"

90ft Line T. Reading 5"6"

90ft Half

Property Line

Lot 21

17" Drop From M Home to S. Tank

3"2" From Tank to Drain Field

1"5" Drop From Line 1 to Line 2

90ft Well to Home

102ft Well to Drain Field

Sec/40

Sec/40