

WEST VIRGINIA
SEPTIC TANK INSPECTION FORM

Hampshire County Health Department Installation Permit No. ST-14-95-275
Name of Owner Jackie P. Fout
Address HC 71, Box 111 Augusta
Property Address Dunmore Ridge Sub. Lot 18 Sect. 1

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served house No. Water Closets _____
Lot Size _____ sq. ft. Area suitable for sewage disposal installation _____ sq. ft.
Source of Water Supply well No. Lavatories _____
No. Bedrooms 3 No. Showers or Tubs _____ No. Baths _____
No. Garbage Grinders _____ No. Automatic Washers _____

SEPTIC TANK

Material precast concrete Length _____ x Width _____ x Depth _____ = _____ cubic feet
Liquid Depth _____ ft. Liquid Capacity 1000 gal.
Distance to: Dwelling 58' Water Supply 148' Nearest Property Line 100'

SOIL ABSORPTION SYSTEM

Type Drain Line Material gravelless pipe Trench Width 24 Inches
Trench Depth 24 Inches Total Absorption area in Trench Bottom 900 sq. ft.
Diameter of Drain Line 10 Inches Type Filter Media _____
No. of Drain Lines 3 Depth Filter Media Under Drain Line _____ Inches
Length of Each Line 100, 100, 100, ft. Depth Filter Media Over Drain Line _____ in.
Distance of Disposal Field to: (a) Dwelling 75'
(b) Water Supply 150' (c) Nearest Property Line 30'

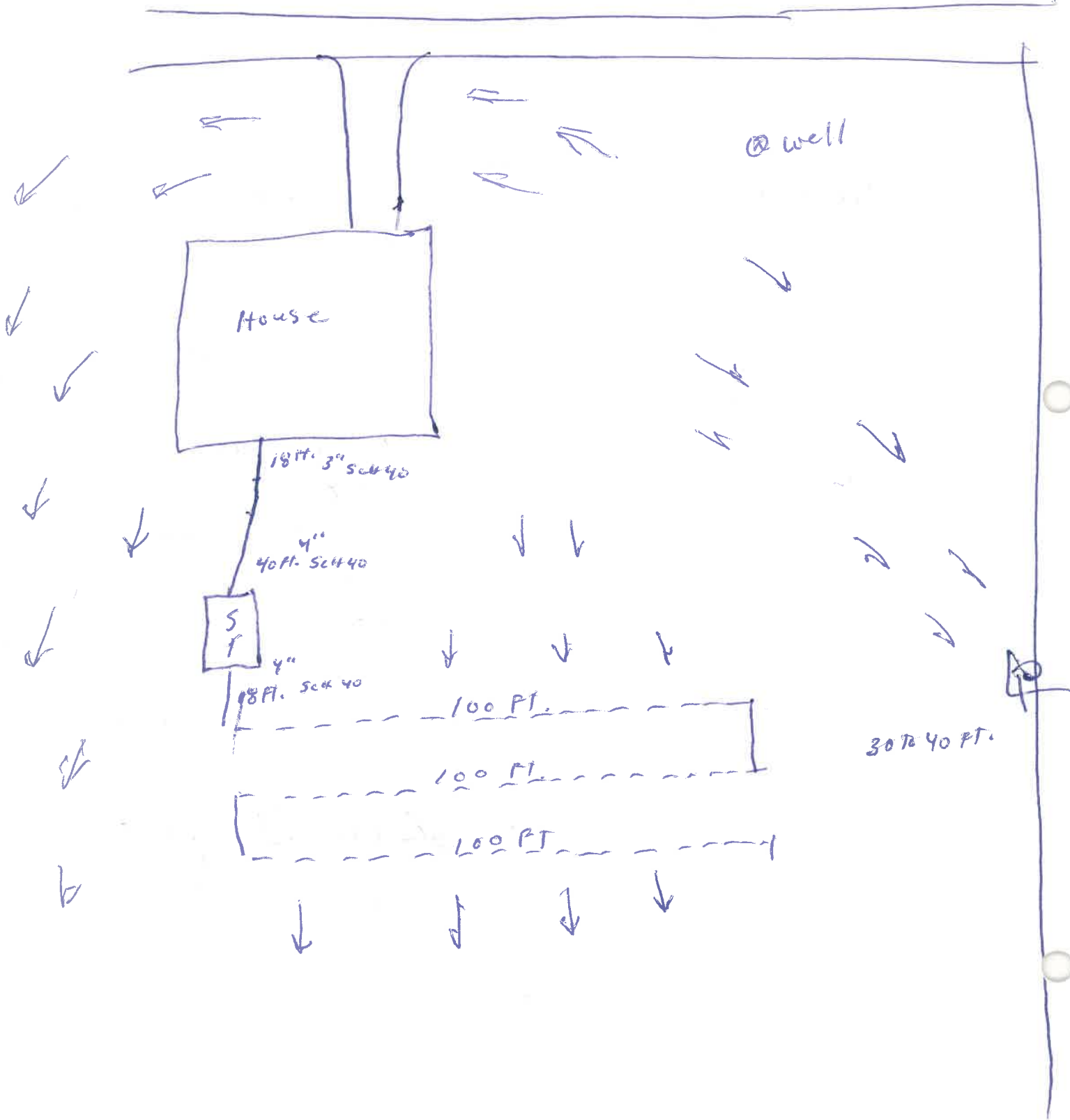
An inspection of the septic tank system described herein disclosed that said system (MEETS), DOES NOT MEET the minimum standards established by the West Virginia State Department of Health.

7-24-95
Date

David Dugger
Sanitarian

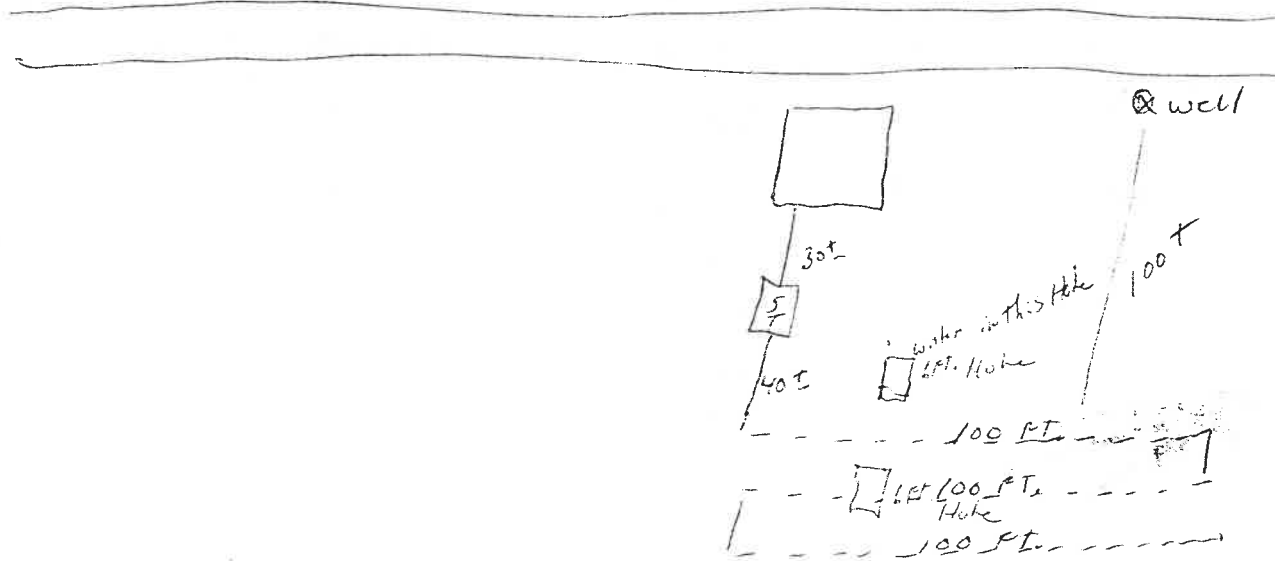
SKETCH OF SYSTEM TO BE DRAWN ON BACK

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.



Please draw a sketch of the property showing existing or proposed well location, location of structures, existing or proposed sewage systems within 200 feet of well location, slope of site and lot dimensions. Locate animal pens, barnyards or any other factors which can be a possible source of contamination for the water supply.

	House		Water Supply		Percolation Test Site
	Soil Absorption Line		Dir. of Ground Slope		Property Line
	Trees		Septic Tank		Mobilehome



MAY NEED D.W. Ditch

PART III
SEWAGE DISPOSAL SYSTEM INFORMATION

10" 6" multiples Pipe

Install Modify

Septic Tank Absorption Field Holding Tank Pit Privy Vault Privy

Chemical/Composting Toilet Alternate System (attach detailed plans)

Other _____

DESCRIPTION OF PROPOSED SYSTEM:

Septic Tank: Capacity 1000 Gal. Material Pvc-CRST Nearest Prop. Line 40'

Absorption Field: 900 Sq. ft. with 3 lines and 100 long

Pipe ASTM No. _____ Nearest Property Line 40'

Type of Water Supply: well to be drilled Area Suitable for Absorption Field: _____ Sq. ft.

Six-foot hole free of water or solid rock? Yes No

PERCOLATION TEST:

TEST HOLE:	#1	#2	#3	#4
	<u>175</u> minutes	<u>300</u> minutes	<u>95</u> minutes	<u>180</u> minutes

Total minutes 750, divided by 24 = 31.25 average time for water to fall one inch.

Test done on 3-15-95 (date) using approved procedures outlined in the Design Standards.

Signed: [Signature]

[Signature]
Signature of Installer

54-82A-0029
Certification No.

3-15-95
Date

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

*Need
6-23-95*

WELL COMPLETION REPORT

Date(s) 5-30-95 County Hampshire Permit #: DW-14-03-95-163
 Town: Augusta Area Name/Location Dunmore Ridge Rd. Lot 18
 Well Owner: JACKIE P. FOOT Address: HL 71 Box 111
 Telephone Number: 496-8980 or 496-8950 Augusta W.Va. 26704
 Well Driller: Jeffrey G. Miller (Miller Bros) Address: RT #1 Box 186
 Telephone Number: (304) 738-3266 Ridgeley W.Va. 26753

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING	REMARKS:
0-13	Yellow shale	Type of Well: <u>D/W</u> Drilling Method: <u>AIR ROTARY HAMMER</u> Well Diameter: <u>6 1/4"</u> Casing O.D.: <u>6 5/8"</u> Well Depth: <u>155</u> Date Completed: <u>5-30-95</u> CASING: Length <u>63</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 _____
13-21	Red shale	
21-33	Brown shale	
33-49	Yellow shale	
49-84	Red sandstone	
84-110	Blue sandstone (water 2 gpm)	
110-114	Brown sandstone	
114-140	Blue sandstone (water 4 gpm)	
140-155	Red sandstone	
	<u>Stopped Drilling Operation</u>	

PUMPING OR BAILING TEST

DETAILS	#1	#2	#3
Static Water Level (Ft. Below Grade)	<u>22</u>		
Pumping Rate (GPM)	<u>6</u>		
Pumping Level (Ft Below Grade)	<u>150</u>		
Duration of Test (In Hours)	<u>2</u>		
Recovery Time to Static Level (In Hours)	<u>7</u>		

WELL HEAD

Pitless Adapter: Type, Make, Etc. N/A
 Well Cap: Type, Make, Etc. ROYAL CONDUIT TYPE
 Well Seal: Type, Make, Etc. N/A
 Well Platform: N/A Grouting Completed
 Length _____ Width _____ Thickness _____
 Grouting: Yes No
 All Public Water Supplies must be grouted.

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.

Jeffrey G. Miller 255
 Name Certification No.
Miller Bros. Drilling
 Registered Business Name
Jeffrey G. Miller 5-30-95
 Signed Date