

WEST VIRGINIA  
SEPTIC TANK INSPECTION FORM

Hampshire County Health Department Installation Permit No. ST-14-94-174

Name of Owner James & Norma White

Address 350 Colby Blvd Rd. Apt. #7, Strasburg, VA 22657

Property Address Spring Meadows Sub. Lot #10

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served house No. Water Closets       

Lot Size 3+ <sup>acres</sup> 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 concrete Length        x Width        x Depth        =        cubic feet

Liquid Depth        ft. Liquid Capacity 1000 gal.

Distance to: Dwelling 35' Water Supply 100' Nearest Property Line 100'+

SOIL ABSORPTION SYSTEM

Type Drain Line Material 2729 Trench Width 36 Inches

Trench Depth 36 Inches Total Absorption area in Trench Bottom 900 sq. ft.

Diameter of Drain Line 4 Inches Type Filter Media stone - 6.5 ton

No. of Drain Lines 3 Depth Filter Media Under Drain Line 12 Inches

Length of Each Line 100, 100, 100, ft. Depth Filter Media Over Drain Line 2 in.

Distance of Disposal Field to: (a) Dwelling 45'

(b) Water Supply 100'+ (c) Nearest Property Line 100'+

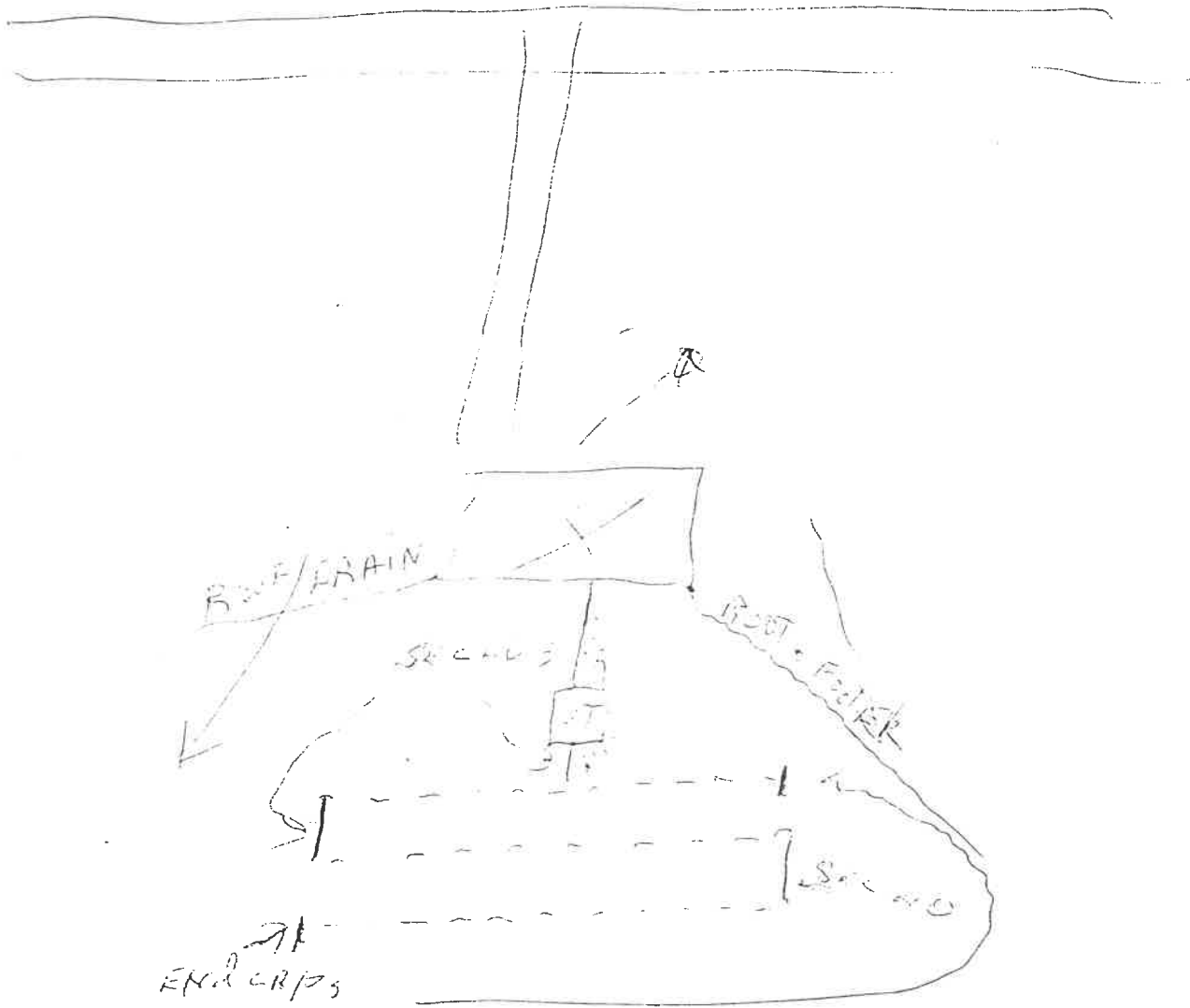
An inspection of the septic tank system described herein disclosed that said system (MEETS, DOES NOT MEET) the minimum standards established by the West Virginia State Department of Health.

4-26-94  
Date

[Signature]  
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.



10-4-93

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

SW258

WELL COMPLETION REPORT

Date(s) Sept 30, 93 County Hampshire Permit #: DW 14-08-94-68  
 Town: Slatesville Area Name/Location Spring Meadow Subd lot #10  
 Well Owner: James & Norma White Address: (RT3) 350 Colley Black Rd.  
 Telephone Number: 703 465-3701 STRASBURG, VA 22657  
 Well Driller: Jerry W Adams Address: P.O Box 952  
 Telephone Number: (304) 822-4092 Romney, WV 26757

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING	REMARKS:
0-18'	Red Clay - UNCON solidated	Type of Well: <u>D/W</u> Drilling Method: <u>Air Rotary Hammer</u>
18'	Limestone - Consolidated	Well Diameter: <u>6-1/8"</u> Casing O.D.: <u>6-5/8"</u>
30'	limestone - Consolidated	Well Depth: <u>200'</u> Date Completed: <u>Sept. 30, 93</u>
	Set Casing - Grout	CASING: Length <u>31</u> Feet Height above ground <u>1</u> Feet
46'	Red Flintrock - Consolidated	<input checked="" type="checkbox"/> Steel <u>GALV.</u> <input type="checkbox"/> Plastic <input type="checkbox"/> Cast Iron
63'	limestone - Consolidated	Other _____ Type _____
105'	Red Flintrock - Consolidated	
126'	Red Flintrock - Water 6 GPM	SCREEN
137'	limestone - Consolidated	<input checked="" type="checkbox"/> None Installed
158'	limestone - Water 1	Type _____ Diameter _____
162'	Red Flintrock - Consolidated	Slot/Gauge _____ Length _____
200'	Red Flintrock - Consolidated	Set Between _____ Ft. and _____ Ft.
	Test Well yield - Stopped	

Drilling Operation

PUMPING OR BAILING TEST

DETAILS	#1	#2	#3
Static Water Level (Ft. Below Grade)	<u>40'</u>		
Pumping Rate (GPM)			
Pumping Level (Ft Below Grade)	<u>190'</u>		
Duration of Test (In Hours)	<u>1/2</u>		
Recovery Time to Static Level (In Hours)	<u>1/2</u>		

WELL HEAD

Pitless Adapter: Type, Make, Etc. To be installed w/ Pump System  
 Well Cap: Type, Make, Etc. Royer 6-5/8" Conduit - Type  
 Well Seal: Type, Make, Etc. \_\_\_\_\_  
 Well Platform:  
 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.

Jerry W Adams 004  
 Name \_\_\_\_\_ Certification No. \_\_\_\_\_  
A & S Well Drilling  
 Registered Business Name \_\_\_\_\_  
Jerry W Adams Sept 30, 93  
 Signed \_\_\_\_\_ Date \_\_\_\_\_