rec'd 4-3-95

Office of Environmental Health Services
ENVIRONMENTAL ENGINEERING DIVISION

WELL COMPLETION REPORT

Date(s) 3-21-95 County Hampshire Permit #: DW-14-1-95-134

Town: Yellow Springs Area Name/Location Melk Rd.

Well Owner: Lynn + William Goleman Address: P.O. Box 127
Yellow Springs, W.V.

Telephone Number: 703-347-3939

Well Driller: Randal C. Miller Address: Rt#1 Box 186
Ridgeley, WV 26753

Telephone Number: 304-738-3266

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING
0-73'	Yellow Sand (Unconsolidated)
73'	Blue Sandstone (Bedrock)
83'	Blue Sandstone (Consolidated)
	Set Casing
155'	Blue Sandstone (Water 4gpm)
220'	Blue Sandstone (Water 8gpm)
255'	Blue Sandstone (Consolidated)
	Stopped Drilling

REMARKS: Pressure Grouted

Type of Well: DW Drilling Method: Air Rotary Hammer

Well Diameter: 6 1/8" Casing O.D.: 6 5/8"

Well Depth: 255' Date Completed: 3-21-95

CASING: Length 84 Feet Height above ground 1 Feet

☒ Steel ☐ Plastic ☐ Cast Iron

Other _____ Type

SCREEN

☒ None Installed

Type _____ Diameter _____

Slot/Gauge _____ Length _____

Set Between _____ Ft. and _____ Ft.

PUMPING OR BAILING TEST

DETAILS	#1	#2	#3
Static Water Level (Ft. Below Grade)	70		
Pumping Rate (GPM)	12		
Pumping Level (Ft Below Grade)	215		
Duration of Test (In Hours)	2		
Recovery Time to Static Level (In Hours)	2		

WELL HEAD

Pitless Adapter: Type, Make, Etc. —

Well Cap: Type, Make, Etc. Royer-Conduit Type

Well Seal: Type, Make, Etc. —

Well Platform: —

Length _____ Width _____ Thickness _____

Grouting: ☒ Yes ☐ No Pressure

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.

Randal C. Miller — 432
Name — Certification No.

Miller Bros Drilling
Registered Business Name

Randal C. Miller — 3-21-95
Signed — Date

VJ' septic

SS-177.
Revised 1-71

WEST VIRGINIA
SEPTIC TANK INSPECTION FORM

Hampshire Co. Health Department Installation Permit No. ST-14-95-449

Name of Owner William & Lynn Golemon

Address P.O. Box 127 Yellow Springs, WV 26865

Property Address Milk Rd Yellow Springs

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served house No. Water Closets —

Lot Size 10 ~~sq. ft.~~ acres 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 1

SEPTIC TANK

Material concrete Length — x Width — x Depth — = — cubic feet

Liquid Depth — ft. Liquid Capacity 1000 gal.

Distance to: Dwelling 45' Water Supply 151' Nearest Property Line 300 yds

SOIL ABSORPTION SYSTEM

Type Drain Line Material gravelless pipe Trench Width 24 Inches

Trench Depth 24 Inches Total Absorption area in Trench Bottom 1620 sq. ft.

Diameter of Drain Line 10 Inches Type Filter Media _____

No. of Drain Lines 6 Depth Filter Media Under Drain Line _____ Inches

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

Distance of Disposal Field to: (a) Dwelling 132'

(b) Water Supply 149' (c) Nearest Property Line 300 yds

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.

8-4-95
Date

David Driggs
Sanitarian

Submitted to HD
8-3-95

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.