# Office of Environmental Health Services ENVIRONMENTAL ENGINEERING DIVISION

10,25

#### **WELL COMPLETION REPORT**

| Date(s) 7-1                                    | 9-95   | Cour               | nty H            | AMOS 6 RE Permit #: DW - 14-07-96-004  |
|--|--|--------------------|------------------|--|
| Town: Bark                                     |  |                    |                  | cation Redstone Mtn Sub Ser / Lot 1  |
| Well Owner:                                    | charl Yurka  | 11-0               | Roy L            | DRIGHT Address: 2616 Braddock Rd   |
| Telephone Number                               | er: 410-875  | 5-41               | 190              | Mti Airy Md. 21971   |
| Well Driller:                                  | ANDAL CI   | 10/10/             |                  | Address: Att Box 186   |
| Telephone Number                               | ar: 304-738  | -32                | 66               | Ridgeley WV 26753  |
| WELL LOG                                       |  |                    |                  | V V'   |
| DEPTH IN FEET                                  | FORMATIONS:<br>KIND, THICKNESS, AN                 | D IF WATE          | ER BEARING       | REMARKS: Pressure Granted  |
| 0-36   | Brown Shale  | (Chr.              | MINALICA         | The type of Well. DW Drilling Mathed A P. Royald and The   |
| 36   | Blux Sands   |                    |                  |  |
| 47'  | Blue SANds   | 10 NE(             | CAS 119          | Date Completed: 7-19-95  |
|  | Set CASI   | 9                  | 90-\$1           | GASING: Length Feet Height above ground Feet   |
| 112  | BIVE SANGE   | NE(h               | Later 29         | Steel 🗆 Plastic 🗀 Cast Iron  |
| 345  | BINE SANDO   |                    |                  | (gon) Other  |
| 380  |  |                    | awself d         | Type Type  |
| 77   | Stopped De   | offing             | /                | SCREEN   |
| 20.001.0                                       | 7 0  | 0                  |                  | None Installed   |
| -  |  | 1000               |                  | Type Diameter  |
|  |  |                    |                  | Slot/Gauge Length  |
|  |  |                    |                  | Set Between Ft. and Ft.  |
|  |  | THE APPL & Co.     |                  |  |
| PUMPING OR BAIL                                | ING TEST   |                    |                  | WELL HEAD  |
| DE   | TAILS  | #1                 | #2 #3            | Pitless Adapter: Type, Make, Etc   |
| Static Water Level                             | (Ft. Below Grade)                                  | 60                 |                  | Well Cap: Type, Make, Etc. Koyor - Condust type  |
| Pumping Rate (GF                               | PM)  | 30                 |                  | Well Seal: Type, Make, Etc.  |
| Pumping Level (Ft                              | Below Grade)                                       | 370                |                  | Well Platform:   |
| Duration of Test (In Hours)                    |  |                    | Length Thickness |  |
| Recovery Time to Static Level (In Hours)       |  |                    |                  | Grouting! ONO No   |
|  |  |                    |                  | All Public Water Supplies must be grouted.   |
| hereby certify that the<br>true to the best of | his well was drilled and o<br>my knowledge and bel | constructe<br>lef. | ed under my      | sy supervision, in compliance with all requirements of the referenced permit, and that this record |
|  | , •  |                    |                  | KANDAL C. MOller 432   |
|  |  |                    |                  | Name 15/10 Prose De 1/15 a Certification No.   |
|  |  |                    | ,                | Registered Busiles Name  |
|  |  |                    |                  | Signed Date  |

## State of West Virginia

| FOR HEALTH DEPARTMENT USE ONLY   |  |   | COLL  | VTY:   |
|--|--|---|---|--|
| Date Recv'd. 7-10-95   | Permit #: WW                                   | ST  | Coordinates: N  | An are superposed as the proposition and are a superposed as a |
| Date Site Evaluated:   |  |   |   |  |
| Control of Control and Control of |  | PART [  |   |  |
| APPLICAT   | ION FOR PERMIT TO                              |   | FY OR ABANDON A WA  | ITER WELL  |
|  | INSTALL OR MODIF                               | OR<br>Y A SMALL SEWAGE  | E DISPOSAL SYSTEM   |  |
| regulations red<br>structed in acco  | quire that water well<br>ordance with publishe | s and sewage dispos<br>d standards.                             | mer. State and count<br>(a) systems be located  | , designed and con-  |
| Property Owner: Michae   | ease print)                                    | , / Lei   | Roy WR  | ight   |
| Property Owner: Mich Re<br>(p)<br>Address: 2616 B:   | RAddock  | <u> 37 m</u>  | T. Airy, M  | 18. 21771  |
| Date: $1 - 10 - 95$  | Telephone: (home                               | e) 410-875-   | 4190 (busines   | 5) 410-461-880   |
| Water Well   | Sewage Di                                      | isposal System  | , , , , , , , , , , , , , , , , , , ,   | 1  |
| Water Well  OCATION OF PROPERTY (be specified by 12:04 app Rd 1  | of Shaws                                       | es ville e  | turn Lett   | 7070   |
| dame of Subdivision: Red   | stone Min                                      | ). Sub  | Section:  | Loc: 1   |
| ize of Lot: <u>30</u> sq.ft./ac  | res / Residen                                  | ce; No. of Bedrooms   | 3 No. of i  | ndividuals served:   |
|  | /7 Other                                       |   | TT 1990 A Mile 1980 and constrained this part was a manager year in a partnerse spin, a sing on | erine de Sans en en de Augustus de Langue de Santago en Visia de Casa de Langue de Langue de la composition de Langue de Langu |
| roperty Deed Recorded in Book Ho   | ).:  | Page:   | Date Re   | ecorded:   |
| o the best of my knowledge, the<br>le for informing the well drille<br>nd well. I further understand to<br>determine the location of the   | er and sewage system<br>That it is my resnons  | installer of the ex   | disting or proposed of the capitagian for as  | ocations of sewage system  |
|  |  | *   | ,   | of owner) JALL   |
| *  | ***  | ***   | *****   | ***  |
| PLEAS  | E PROCEED TO COMPI                             | LETE PARTS II AN  | D III. IF NECESSAR  | Y * * * * * * * * * * * * * * * * * * *  |
| /  | WATER  | PART II<br>WELL INFORMAT  | I CIN   |  |
| ter well will beconstruct  | ed modified a                                  | and will be used for  | r \ corable water   | water exploration  |
| abandoned or other purposes:   |  |   |   |  |
| N Driller: Miller Bro  | os Drilling - E                                | Pandal C Mill   |   | 204 720 226  |
| siness Address: Rt. #1 Box   |  |   |   | hone No.: 304-738-326  |
| ne of Casing: 6 5/8" O.  |  |   |   |  |
| stance of Well from Potential So<br>Streams, Rivers & Impoundment<br>Sewage Absorption Fields _/<br>Septic Tank<br>Other:  | Sewers  OC † Sewers  5 O† Sewage               | on:<br>& Drains (non-wate<br>& Drains (hydrosta<br>Holding Tank | ertight)  | Privies (vault) Barnyard/Feeding Water Areas   |
|  |  |   |   |  |
| D //   | 1 11.11  |   | T   | servey ,   |
| SHATURE OF DRILLER Sancly  | Miller   | CERTIF  | ICATION # 432   | DATE 7-10=   |

| To:                | Mehne (Yorko Levery Laught Address:  | 2616  | B12 A17170 CI   | K. Rd  |
|--------------------|--|---|---|--|
|                    |  | MY  | AIRYM   | 4.217.   |
| You<br>a sr<br>and | are hereby issued a permit to in Stall mall sewage disposal system consisting of a located at RealsTarce. Mos. Tars S.   | Septic  | -tank and<br>on Sout # 1  | drainf.e   |
|                    | s small sewage disposal system shall meet the fol  | lowing sp   | ecifications:   |  |
| 1.                 | Septic Tank  a. Shall be made of <u>OreCest Concretc</u> and gallon capacity. 300 210 6011 fee  Soil-Absorption System  a. Shall consist of 3 distribution  b. Fach distribution line shall be | i not less<br>マグッチン   | than $\int 000$   | Secretario de la constantina del constantina de la constantina del constantina de la |
| 2.                 | Soil-Absorption System  a. Shall consist of distribution   | lines W   | - GRAUC//e S  | 5 10° =  |
|                    | b. Each distribution line shall be 18.2  | 162   |   |  |
|                    | c. Each trench shall be 7-1/ inch width  |   |   |  |
|                    | d. No trench shall be more than 2 4 ince. Total soil-absorption area in trench bottoms f. Filter material shall be inches in diameter.   | shall be and not a  | . <u>9</u> 20<br>reater than 172  | sq. ft.<br>- 2 1/2   |
|                    | g. Filter material under each line shall be not deep and not less than   | er each d   | listribution line   | e.   |
|                    | <ul> <li>h. Filter material shall be covered with <u>Ca</u></li> <li>i. Trenches shall be backfilled at least 6" abo<br/>for settling of backfill.</li> </ul>                                  | fe C<br>ve ground   | _ prior to back<br>_surface to pro  | filling.<br>vide   |
| 3.                 | Other Small Sewage or Excreta Disposal Systems (then use back of sheet to describe the details of  | Name the f  | type system to b  | e used,  |
|                    | Diversion MORK IF NEED   | <u>_e.c/</u>  |   |  |
| Ц.                 | Special Requirements   | Martin stand of the Standard S | $-\infty - \log (\log \log $ | manger on the medical fall of the even our success success research ones, on paging  |
| •                  | <ul> <li>a. Small sewage and excrete disposal systems shereon any property line and a minimum of 20 f</li> <li>b. Septic tanks shall be located at least 10 ft</li> </ul>                      | $\frac{t}{a}$ from a  | ny stream or ro   | adside cut.  |
|                    | a minimum of 20 ft. from building foundation c. Septic tanks shall be located a minimum of 5   |   | soil-absorption   | n systems  |
|                    | and excreta disposal systems a minimum of $100$ or cistern.  |   | <i>(</i> *)   |  |
|                    | or clatern.<br>This permit is not transferable—and automatical<br>of issue.  | ly expire   | s 🗶 months after  | o date   |
| 6.                 | The applicant or his agent must notify this depart<br>least $7\lambda$ hours before the system is ready  | rtment ,<br>v for ins   | phone <u>322-511</u><br>nection.  | <u>_</u> at  |
| 7                  | All small scwage and excreta disposal systems musprior to being covered with earth or otherwise passes or part thereof covered before being inspedirection of the SANITARIAN.                  | st be ins<br>it into s  | pected and appro<br>ervice. Any app   | olicable   |
| 8. 7               | This permit is <u>NULL AND VOID</u> when office are different than those stipulated in this permit that a health hazard would result by the installa   | it or if .  | facts later beco  | conditions<br>ome known  |
|                    | $\frac{7.12-93}{\text{Date of Issue}}$   | 7%  |   |  |
|                    | Date of Issue  | 760-7   |   |  |
| Ham                | Date of Lague  pshire County Realth Dept.  N. High Street Room: #3  Romney, WV 26757   | Nam   | ) <del>.</del>  |  |
| 66                 | N. High Street Room #3   | lon: 4  | inian   |  |
| Нал                | Romney, WV 26757   | 2 <u>41111'</u><br>Titl   | 6   | THE RESIDENCE OF THE PROPERTY  |

### WEST VIRGINIA SEPTIC TANK INSPECTION FORM

| Hampshice County Health Department Installation Permit No ST-14-96-042  |
|---|
| Name of Owner Michael Yorko Lerov Wright  |
| Address 26/10 Broddnek Rd M Airy MD 21771   |
| Address 26/6 Broddnek Rd, Mt Airy, MD 21771 Property Address Redstone Mt. Sub Sec. 1 Cot1   |
| DESCRIPTION & NUMBER OF UNITS SERVED  |
| Type Facility Served VUC. home No. Water Closets  |
| Lot Size 30 sq. ft. Area suitable for sewage disposal installation sq.f   |
| 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 CONCIER Jankength x Width x Depth = cubic feet   |
| Liquid Depth ft. Liquid Capacity/OOO gal.   |
| Distance to: Dwelling $10'$ Water Supply $10'$ Nearest Property Line $35'$  |
| SOIL ABSORPTION SYSTEM  |
| Type Drain Line Material 10" UNIVENTS Trench Width 24 Inches  |
| Trench Depth $\frac{24-30}{}$ Inches Total Absorption area in Trench Bottom $\frac{900}{}$ sq. ft.  |
| Diameter of Drain Line / Inches Type Filter Media   |
| No. of Drain Lines Depth Filter Media Under Drain Line Inches   |
| Length of Each Line $(00, 100, 100)$ , ft. Depth Filter Media Over Drain Line i   |
| Distance of Disposal Field to: (a) Dwelling $30'$ (b) Water Supply $20'$ (c) Nearest Property Line $275'$   |
| (b) Water Supply 120 (c) Nearest Property Line 275  |
| 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. |
| Date Sanitarian   |
| pate (/Sánitariañ   |

#### 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 fee<sup>+</sup> of well location, slope of site and lot dir sions. Locate animal pens, barnyards or any other factors which can possible source of contamination for the er supply.

| House Soil Absorption Line                |   | Percolation Test Site Property Line   |
|---|---|---|
| Trees                                     | ST Septic Tank  | MH Mobilehome   |
|   | 10 Gravelles  |   |
|   |   | Sept sept sept  |
| ****                                      |   | ****  |
|   | PART III  |   |
|   | WAGE DISPOSAL SYSTEM INFORMATION                                | 1   |
| Install / Modify                          |   |   |
| · ·                                       | Field Holding Tank  |   |
|   | Alternate System (attach detailed pla                           | ens)  |
| Other DESCRIPTION OF PROPOSED SYSTEM:     |   |   |
| Septic Tank: Capacity 1000                | Material Concrete Take N  | learest Prop.Line 100/1   |
| Absorption Field: ZZO Sq.f                | Nearest Property Line 400 f<br>Area Suitable for Absorption Fie | 80 long   |
| Pipe ASTM No. 10" Gravellas               | Nearest Property Line 400 f                                     | J. fur<br>Annual annual |
| Type of Water Supply: Will                | Area Suitable for Absorption Fie                                | old: 720 Sq.ft.   |
| Six-foot hole free of water or solid rock | Yes No  |   |
| PERCOLATION TEST:  TEST HOLE: #1          | #2  | #3 #4   |
| 150                                       | ninutes 180 minutes   | 180 minutes 210 minutes   |
| Total minutes $720$ , divided by 24 =     | 30 minutes average time for                                     | water to fall one inch.   |
| Test done on 7-10-95 using ap             | proved procedures outlined in the Design                        | Standards.  |
| (1000)                                    | Signed: Belly   | A. Hart   |
|   |   |   |
| Billy Signature of Installer              | 54-87-0. Certification  | 270 7-10-95<br>No. Date   |