

Department Use Only
Rec'd: 9-21-89
Coordinates: N
W
Drawn By: CND - note hole got deeper
Permit Issued: 9-20-89
Permit #: 90-14-09-90-92

WEST VIRGINIA DEPARTMENT OF HEALTH
1800 Washington Street, East
Charleston, West Virginia 25305

SW256

County: HAMPSHIRE

APPLICATION FOR PERMIT TO CONSTRUCT, MODIFY OR ABANDON A WATER WELL

MILLER BROS. DRILLING do hereby apply for a permit to (X) construct or () modify a water well to be used for (X) potable water, () water exploration, () other purposes (explain), or () abandon.

Owner: HAMPSHIRE HOMEBUILDERS Phone #: 304-856-3875

Resident Address: P.O. DRAWER 90 CAPON BRIDGE W. VA.

Driller: RANDAL G. MILLER Phone #: 304-738-3266

Business Address: RT#1 BOX 186 BRIDGELEY W. VA. 26753

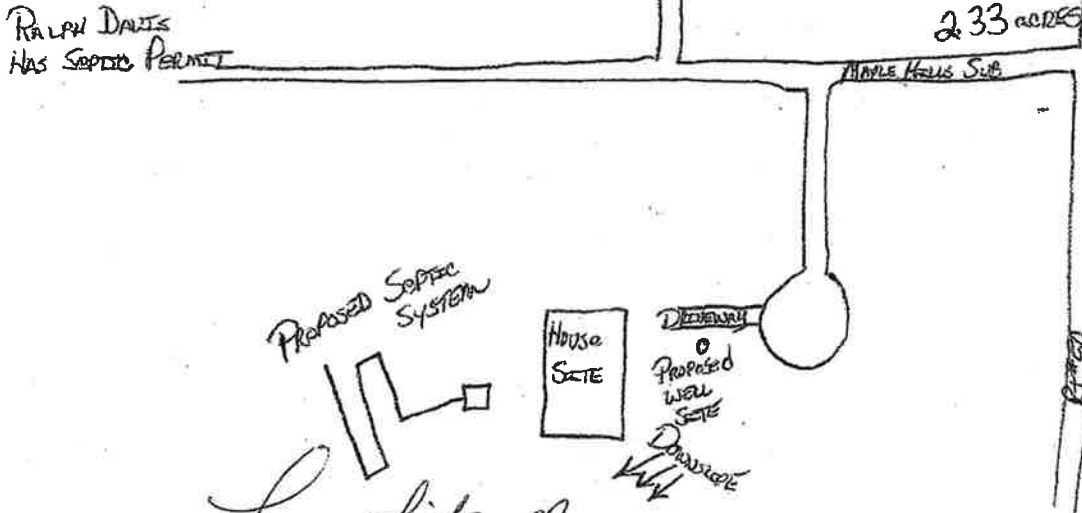
Location of Property (Be Specific): RT#50 EAST TO VA LINE. LEFT INTO MAPLE HILLS SUB. TAKE FIRST LEFT. GO TO END OF ROAD. NEW CONSTRUCTION ON RIGHT.

Name of Subdivision (if applicable): MAPLE HILLS Lot #: 7

Property Deed Recorded in Book #: Not Yet Recorded Page: _____ Date Recorded: _____

Distance from potential sources of contamination:			
Sewage Absorption Fields	<u>100+</u>	Streams, Rivers & Impoundments	<u>—</u>
Septic Tank	<u>80</u>	Sewers & Drains (non-watertight)	<u>—</u>
Privies (vault)	<u>—</u>	Sewers & Drains (hydrostatically tested)	<u>—</u>
Sewage Holding Tanks	<u>—</u>	Barrenyard/Feeding & Water Areas	<u>—</u>
		Other (explain)	<u>—</u>

Please draw a sketch of the property showing well location, location of structures, existing or proposed sewage systems within 200 feet of well, 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.



Signature of Owner: Larry Fitzgerald Date: 9-20-89
Signature of Driller: Randal G. Miller Certification No: 432

PUBLIC WATER SUPPLY WELL APPLICATIONS SHALL BE SUBMITTED ON EW-100.

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

Recd
10-06-89

SW2

WELL COMPLETION REPORT

Date(s) 9-28-89 County HAMPSHIRE Permit # DW-14-09-90-98
Town: CAPON BRIDGE Area Name/Location MAPLE HILLS ESTATES LOT #17
Well Owner: HAMPSHIRE HOMEBUILDERS Address: P.O. DRAWER 90
Telephone Number: 304-856-3815 CAPON BRIDGE W. VA.
Well Driller: RANDAL G. MILLER Address: RT #1 BOX 186
Telephone Number: 304-738-3266 REDGELEY W. VA. 26753

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING	REMARKS:
0-24'	BROWN SHALE (UNCONSOLIDATED)	92' Broken Area
24'	BLUE SHALE (BEDROCK)	Type of Well: <u>DW</u> Drilling Method: <u>AIR ROTARY HAMMER</u>
40'	BLUE SHALE (CONSOLIDATED)	Well Diameter: <u>6 1/8"</u> Casing O.D.: <u>6 7/8"</u>
	CEMENT + SET (CASING)	Well Depth: <u>125'</u> Date Completed: <u>9-28-89</u>
60'	LIMESTONE (WATER 2GPM)	CASING: Length <u>42</u> Feet Height above ground <u>2</u> Feet
92'	LIMESTONE (WATER 18GPM)	<input checked="" type="checkbox"/> Steel <u>GALV.</u> <input type="checkbox"/> Plastic <input type="checkbox"/> Cast Iron
125'	LIMESTONE (CONSOLIDATED)	Other _____ Type _____
	STOPPED DRILLING	
		SCREEN
		<input checked="" type="checkbox"/> 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)	<u>35</u>		
Pumping Rate (GPM)	<u>90</u>		
Pumping Level (Ft. Below Grade)	<u>15</u>		
Duration of Test (In Hours)	<u>2</u>		
Recovery Time to Static Level (In Hours)	<u>1</u>		

WELL HEAD

Pitless Adapter: Type, Make, Etc. _____
Well Cap: Type, Make, Etc. ROYER, CONDUIT TYPE
Well Seal: Type, Make, Etc. _____
Well Platform: TO BE INSTALLED BY OWNER
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.

RANDAL G. MILLER 432
Name Certification No.
MILLER Bros. DRILLING
Registered Business Name
RANDAL G. MILLER 9-28-89
Signed Date

WEST VIRGINIA
SEPTIC TANK INSPECTION FORM

Wampshire County Health Department Installation Permit No. ST-14-90-131
 Name of Owner Wampshire Home Builders
 Address P.O. Drawer 90, Capon Bridge, WV 26071
 Property Address Maple Hill Estate, lot #4-7

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served House No. Water Closets
 Lot Size 2+ acres 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 Length x Width x Depth = cubic feet
 Liquid Depth concrete ft. Liquid Capacity 1,000 gal.
 Distance to: Dwelling 40' Water Supply 125' Nearest Property Line 100'

SOIL ABSORPTION SYSTEM

Type Drain Line Material plastic Trench Width 36 Inches
 Trench Depth 22-25 Inches Total Absorption area in Trench Bottom 900 sq. ft.
 Diameter of Drain Line 4 Inches Type Filter Media gravel - 25 ton
 No. of Drain Lines 3 Depth Filter Media Under Drain Line 8 inches
 Length of Each Line 100, 100, 100 ft. Depth Filter Media Over Drain Line 2 in.
 Distance of Disposal Field to: (a) Dwelling 55'
 (b) Water Supply 140' (c) Nearest Property Line 75'

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 12-7-89Sanitarian [Signature]

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.