



## **Hampshire County Health Department**

**HC 71, Box 9**

**Augusta, WV 26704**

**Nursing: (304) 496-9640 Environmental: (304) 496-9641**

**Fax: (304) 496-9650**

**December 22, 2006**

**Hampshire County Planning Commission**

**PO Box 883**

**Romney, WV 26757**

**Dear Sirs:**

**This office has reviewed a plat of survey for WV Hunter, LLC to approve a subdivision called Bluffs on the Potomac Section 6 located on Graces Cabin Road, and further referenced as Tax District Romney, Tax Map 33, Parcel 3, Deed book 436, Page 638. This subdivision section consists of 39 lots containing 823.22 acres. All lots contain a sewage disposal area of 10,000 square feet where no development or structures other than the septic system shall be permitted. These lots are to be developed with individual wells and septic systems to serve single family dwellings.**

**Percolation test results are within limits as set forth by West Virginia CRS 16-1. Six foot soil observation holes indicate no restrictions due to water table or shallow bedrock within the designated sewage disposal area except as noted on the Health Department subdivision application.**

**The plat of survey dated 10/16/06, is hereby approved by the Hampshire County Health Department. Any changes or revisions to the Health Department stamped and signed plat, or subsequent final plats approved based upon the approved plat, will make this approval null and void.**

**This approval is not permit for individual water systems or individual sewer systems. Applications for permits must be made separately to the Hampshire County Health Department.**

**Sincerely,**

A handwritten signature in black ink, appearing to read "Terry Mayhew", is written over a horizontal line.

**Terry Mayhew, RS**

**CC: WV Hunter, LLC**

**REPORT SHEET  
FOR  
PERCOLATION AND SIX FOOT HOLE TESTING**

Subdivision Name Bluffs on the Potomac County Hampshire

Total Number of Lots \_\_\_\_\_ Name of Applicant \_\_\_\_\_

Name of Certified Installer Responsible for Testing Justin Time Exc.

Installer Certification No. 54-00-A-0207 Installer Signature Dany Mullins

Address HC 64 Box 1634 Ranney, W.V. 26757

Type System	Lot Number	Percolation Test Results (Minutes per Inch of Fall)					Six Foot Hole Results		Date Conducted
							Depth to Water	Depth to Rock	
II	165	130	80	150	112	19.6			
I	166	120	85	117	141	19.2			
I	167	135	111	180	110	22.3			
I	168	112	125	116	100	18.8			
I	169	120	116	135	95	19.4			
II	170	145	90	100	110	18.5			
<del>II</del>	<del>171</del>	<del>95</del>	<del>86</del>	<del>105</del>	<del>117</del>	<del>16.7</del>	See Attached Page Report		
II	172	110	118	150	140	21.5			
II	173	85	145	100	138	19.5			
II	174	140	120	135	112	21.1			
I	175	145	155	165	130	24.7			
II	176	180	180	176	145	28.3			
I	177	85	140	130	165	21.6			
II	178	100	150	122	145	21.5			
II	179	65	85	100	40	12.8			
II	180	90	85	115	100	16.2			
II	181	155	148	170	85	23.2			
II	182	160	135	112	122	22.0			
II	183	65	90	119	130	16.8			

(Attach additional pages if needed)

Rev 3/08

ST/CO USE ONLY  
DATE RECEIVED

MM DD YY

DATE THE WELL  
WAS COMPLETED

MM DD YY

08 12 2008

PERMIT NO.

DW- 14-09-005

# STATE OF WEST VIRGINIA WATER WELL COMPLETION REPORT

FORM SW-258

THIS REPORT MUST BE  
SUBMITTED WITHIN 30 DAYS  
AFTER WELL IS COMPLETED

FILL IN THIS FORM  
COMPLETELY  
PLEASE PRINT OR TYPE

## LOCATION OF WELL

Well Owner: Last Name

McFarland

First Name

David

Street/Road

Graces Cabin Rd

County

Hampshire

Zip Code

Latitude: \_\_\_\_\_ Deg \_\_\_\_\_ Min \_\_\_\_\_ Sec  
Longitude: \_\_\_\_\_ Deg \_\_\_\_\_ Min \_\_\_\_\_ Sec  
Acquired By: ☐ GPS ☐ Topo ☐ Other

## AREA NAME/LOCATION:

Graces Cabin Rd

## TYPE OF WELL:

☒ Potable ☐ Public Water Supply  
☐ Geothermal ☐ Industrial  
☐ Commercial ☐ Dewatering  
☐ Irrigation ☐ Test/Exploratory  
☐ Other

## WELL LOG

Depth

State the kind of formation  
penetrated, their color, caves,  
and if water bearing with  
estimate flow (GPM).

From To  
(ft.) (ft.)

0 60

Sandy Dint + Clay  
Brown

60 90

Soft Gray shale

90 117

Dark Blue sandstone  
+ Gray shale

117 700'

Gray shale

If additional space is needed, use  
additional sheets and attach w/permit # at  
top.

## DRILLING METHOD

☐ Cable Tool ☐ Rotary  
☒ Rotary Hammer ☐ Other

Hole Diameter 6 (in)  
Total depth 700' (ft)

## CASINGS RECORD

### MAIN CASING TYPE

☒ Steel ☐ Plastic  
☐ Other

DRIVE SHOE

Casing Diameter 6 5/8" (in)  
Wall Thickness .188 (in)  
Casing Length 140 (ft)

### Other Casing or Liner Used

Type ☐ Steel ☐ Plastic  
☐ Other

Casing/Liner Diameter \_\_\_\_\_ (in)  
Length \_\_\_\_\_ (ft) from \_\_\_\_\_ (ft)  
to \_\_\_\_\_ (ft)

## SCREEN RECORD

☒ Not Installed ☐ Installed  
Material: ☐ Bronze ☐ Plastic  
Diameter of screen \_\_\_\_\_ (in)

Slot size \_\_\_\_\_  
Length \_\_\_\_\_ (ft) from \_\_\_\_\_ (ft)  
to \_\_\_\_\_ (ft)

## GRAVEL PACK RECORD

Gravel Pack: ☐ Yes ☒ No  
From \_\_\_\_\_ (ft) to \_\_\_\_\_ (ft)

## GROUTING RECORD

Grouting Material:

☐ Cement ☒ Bentonite Clay  
Other

No. of Bags: 5

Installation Method:

PRESSURE

## PUMP INSTALLED

By Driller ☐ Yes ☐ No

## ESTIMATED WELL YIELD

Estimated at 8 G.P.H. Hour

Static Water Level 130 (ft)

\*Pumping level below land surface

264' (ft) after 1 hrs. at

8 G.P.H. (Estimated) Hour

\*Note: For Public Water Supply  
wells please submit required yield  
and drawdown tests.

## WELL HEAD COMPLETION

Casing height above grade \_\_\_\_\_ (ft)

Type Of Well Cap

Installed:

VARIANCE ISSUED ☐ Yes ☐ No  
Request Number

## COMMENTS BY INSTALLER:

Approx. 200 Gallons  
per 24 hours

I hereby certify that this well has been constructed in accordance with state rules and in conformance with  
all conditions stated in the above captioned permit, and that the information presented herein is accurate  
and complete to the best of my knowledge.

Company Name B.W. Smith Well Drilling & Construction V Contractor No. WV038905  
Business Registration No. 1025-5395 Master Well Driller Certification No. 574  
Master Well Driller (print) Chris WOLFORD  
Master Well Driller Signature Chris Wolford

SITE SUPERVISOR (SIGNATURE OF DRILLER OR JOURNEYMAN RESPONSIBLE FOR  
SITEWORK IF DIFFERENT FROM MASTER DRILLER.)

Journeyman Well Driller Certification No. \_\_\_\_\_  
Journeyman Well Driller (please print) \_\_\_\_\_  
Apprentice and Name (s) \_\_\_\_\_