WV STATE DEPARTMENT OF HEALTH

Office of Environmental Health Services

ENVIRONMENTAL ENGINEERING DIVISION



Date(s) 5-9-89 County HAMPSHIDE Town: CAPON BRIDGE Area Name/Location Morres ESTATES Lat #5 Permit #: DW-14-04-8	19-276
Town: CAPON BRIDGE Area Name/Location MOORES ESTATES LOT#5	,
Well Owner: ALTON WOLFE JR. Address: P.O. Box 162	
Telephone Number: 304-856-3697 CARW BRIDGE W. VA. 2671)	
Well Driller: PANDAL G MEUR Address: PH Box 186	
Telephone Number: 304-738-321do REDGERY W. A. 26753	
WELL LOG DEDTH IN EFET FORMATIONS: DEMARKS	
DEPTH IN FEET FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING REMARKS:	
O-8 CLAY (NONSOLIDATE) Type of Well: DW Drilling Method: ATE STA	vey Hemmore
8 BUE SHALE (REDROCK) Well Diameter: 68 Casing O.D.: 698"	
3.5 N. LE SHACE (MS RIDATE) Wall Double (O) Date Completed: 5-7:	-89
46' BUE SHALE (CONSCITOR TED) CASING: Length 42 Feet Height above ground	
Steel GALV. Plastic Cast Iron	
48', LIMESTAVE (WITCH 2GAM) Other	
3 LIMESTANE (WARR 18GAN) Type	
82' LINESAND (LATER 1008M) SCREEN	
100 LINESTANE (CANTOLOGICA) None Installed	
STORES DELING Type Diameter	
Slot/Gauge Length	
Set Between Ft. and	
Set Detween	
PUMPING OR BAILING TEST WELL HEAD	
DETAILS #1 #2 #3 Ditlocs Adoptor: Type Make Etc.	
Static Water Level (Ft. Below Grade) Static Water Level (Ft. Below Grade) Static Water Leve	
Pumping Rate (GPM) Well Seal: Type, Make, Etc.	
Pumping Level (Ft Below Grade) 90 Well Platform: To be INSTACCED by OWER	
Duration of Test (In Hours) Length Width Thickness	
Recovery Time to Static Level (In Hours) Grouting:	
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, is true to the best of my knowledge and belief.	and that this record
FANDAL CONTILLER 432	2
Name Bros. Destroy Certificate	ion No.
Registe)ed Business Name //L	-99
1/and on hux	0 1

WV STATE DEPARTMENT OF HEALTH Office of Environmental Health Services

ENVIRONMENTAL ENGINEERING DIVISION



Date(s) 1/10y 2/184				
Town: Capon Bulge.	Are	a Nam	e/Locat	moores Est let to
Well Owner: Alton War	Je	_		Address: OB of 162
Telephone Number:	/			Capon Bucke W. Ug dory
Well Driller: Roya Z D	cH	ace	وره	Address: #C.36 Boy 9/
Telephone Number: 703 8	* *		80	
WELL LOG				
DEPTH IN FEET FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING				REMARKS:
0-12 Wilner Cla				Type of Well: Water Drilling Method: air hammen
12-122 Blue Sla	1			Well Diameter: Casing O.D.:
122-124 Water Born	4	50	0	
124-150 Rlue Sloi	to	0	-	Well Depth: Date Completed: Feet
				Steel Plastic Cast Iron
				Other
				Type
				SCREEN
	-1			None Installed
				Type Diameter
				Slot/Gauge Length
				Set Between Ft. and Ft.
PUMPING OR BAILING TEST				WELL HEAD
DETAILS	#1	#2	#3	Pitless Adapter: Type, Make, Etc.
Static Water Level (Ft. Below Grade)				Well Cap: Type, Make, Etc.
Pumping Rate (GPM)	45			Well Seal: Type, Make, Etc.
Pumping Level (Ft Below Grade)				Well Platform: to be installed by our
Duration of Test (In Hours)				Length Width Thickness
Recovery Time to Static Level (In Hours)				Grouting: Yes No
hereby certify that this well was drilled and is true to the best of my knowledge and be	constru lief.	icted u	ınder my	All Public Water Supplies must be grouted. supervision, in compliance with all requirements of the referenced permit, and that this record Name Rose L Doct area Certification No.
				Registered Business Name Registered Business Name Signed Date

WV STATE DEPARTMENT OF HEALTH
Office of Environmental Health Services
ENVIRONMENTAL ENGINEERING DIVISION Lot 8

120 2	E GSW2!
KO WOUNTE	N. S. C.
RECOM	

Date(s) 7/18	>/86	Cou	inty 🕹	Hoy	upshire Permit #: DW-14-09-87-096
Town: Capon	Bridge	Are	a Nam	e/Loca	tion West of Dillon's Run Rd. turn left index Yumito train
	imes Lo				Address: 2282 Phillips Mill Rd. Forest Hills, Md. 210
Telephone Number	r:				
Well Driller: C. I	Edward Sh	icle	4		Address: Rt 2, Box 400, Stephonson, Va. 22656
Telephone Number	703 665	_	24	19	
WELL LOG					
DÈPTH IN FEET	FORMATIONIO				REMARKS:
0-30	Dict				Type of Well: Drilled Drilling Method: Ro torry
30-70	30-70 Solid rock				Well Diameter: 6/4 Casing O.D.: 6/8
70-71	water				Well Depth: 120 Date Completed: 1/17/86
71-80 Solid rock					CASING: Length 40 Feet Height above ground Feet
80-81 Water					Steel
8-120 sold rock			ر		Other
					Туре
Stringer					SCREEN
					☑ None Installed
					Type Diameter
					Slot/Gauge Length
					Set Between Ft. and Ft
					Tit did
PUMPING OR BAILI	NG TEST				WELL HEAD
DE	TAILS	#1	#2	#3	Pitless Adapter: Type, Make, Etc.
Static Water Level	(Ft. Below Grade)				Well Cap: Type, Make, Etc. Ph stic Wedid not install
Pumping Rate (GP	M)	30			Well Seal: Type, Make, Etc.
Pumping Level (Ft	Below Grade)				Well Platform:
Duration of Test (I	n Hours)	4			Length Width Thickness
Recovery Time to Static Level (In Hours)			Grouting: ☐ Yes ☑ No		
					All Public Water Supplies must be grouted.
I hereby certify that this true to the best of	nis well was drilled and d my knowledge and beli	onstru ef.	cted u	nder my	supervision, in compliance with all requirements of the referenced permit, and that this record
÷ -					C. Edward Shicley 011
'n.					Name Shirles Well Drilling Inc. Certification No.
Ø.					Registered Business Name
					Signed Date
					/

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

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Date(s) 4-13-90 County	HAMPSHIRE	Permit	#. DW-14-03-90-253
Town: CAPON PRICE Area Nar			51#9 Sec TL
Well Owner: ALTON WOLFE JG		Address: P.O. Box 162	
Telephone Number: 304 - 856 - 3697		CAPON BREdge	W. VA.
Well Driller: KANDAL CO MELLER		Address: 4#180x186	
Telephone Number: 304-138-3266		Ridgary W.V	A. 26753
WELL LOG	A.	•	
DEPTH IN FEET FORMATIONS: KIND, THICKNESS, AND IF WATER E	BEARING REMA	RKS: PRESSURE GROUTE	₽
0-11 CLAVY YELLOW SHALE CHOOSE	Type o	f Well: DW	Drilling Method: Are Rotary Hammer
11 BLUE SHALE (BENECK)	Well D	ameter: 6/8"	Casing O.D.: 658"
H' BLUE SAINLE (CONSOLIDATE	Well D	epth: 100'	Date Completed: 4-13-90
PRESIDENT GROUTEN SET CO		G: Length <u>42</u> Feet	Height above ground Feet
56 BUESHALE (WATER 60	Gan)	Steel GALV. 🗆	Plastic Cast Iron
62 LIMESTONE CONSOLIDATION	ED)	Other	
90 LIMESTONE (WATER 15	SAM)		Туре
100' LIMESTONE (CONSOLIDA	TED SCREE	N	
STUPPED DRILLING		ne Installed	
1	Туре _		Diameter
	Slot/G	auge	Length
		· ·	Ft. andFt.
PUMPING OR BAILING TEST	WELL	HEAD	
DETAILS #1 #2	#3 Pitless	Adapter: Type, Make, Etc.	
Static Water Level (Ft. Below Grade)	Well C	p: Type, Make, Etc. Royer	2 - CONDUTT TOPE
Pumping Rate (GPM)	Well S	eal: Type, Make, Etc.	
Pumping Level (Ft Below Grade)	Well P	latform: NOT REQUIRED -	- PRESSURE (TROTTED)
Duration of Test (In Hours)	Length		Thickness
Recovery Time to Static Level (In Hours)		ng: Yes	nuted
the section of the se			
I hereby certify that this well was drilled and constructed is true to the best of my knowledge and belief.	under my supervis	ion, in compliance with all requirer	nents of the referenced permit, and that this record
	M	WAL G/HOLLER	432
X .	Name		Certification No.
**************************************	Regist	red Business Name	4-13-90
	Signed		Date