

ENVIRONMENTAL ENGINEERING DIVISION

WELL COMPLETION REPORT

Date(s) 9-5-95 County Hampshire Permit #: DW-14-08-96-050
 Town: Shanks Area Name/Location Frenchburg Estates Lot #12
 Well Owner: Robert Cruz Address: HC71 Box 10A
 Telephone Number: 304-496 Augusta, W.V. 26704
 Well Driller: Randal C. Miller Address: Box 186
 Telephone Number: 304-738-3266 Ridgeley, W.V. 26753

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING	REMARKS:
0-71'	Brown Shale (Unconsolidated)	Pressure Grouted
71'	Limestone (Bedrock)	Type of Well: <u>DW</u> Drilling Method: <u>Air Rotary Hammer</u>
83'	Limestone (Consolidated)	Well Diameter: <u>6 1/8"</u> Casing O.D.: <u>6 5/8"</u>
	Set Casing	Well Depth: <u>205'</u> Date Completed: <u>9-5-95</u>
172'	Limestone (Water 4 gpm)	CASING: Length <u>84</u> Feet Height above ground <u>1</u> Feet
185'	Limestone (Water 2 gpm)	☒ Steel ☐ Plastic ☐ Cast Iron
205'	Limestone (Consolidated)	Other _____ Type _____
	Stopped Drilling	
		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)	<u>100</u>		
Pumping Rate (GPM)	<u>30</u>		
Pumping Level (Ft. Below Grade)	<u>195</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. Rager-Conduit Type
 Well Seal: Type, Make, Etc. _____
 Well Platform: _____
 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 C. Miller 432
 Name Miller Bros Drilling Certification No. _____
 Registered Business Name Randal C. Miller 9-5-95
 Signed _____ Date _____