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ACRES, INC.

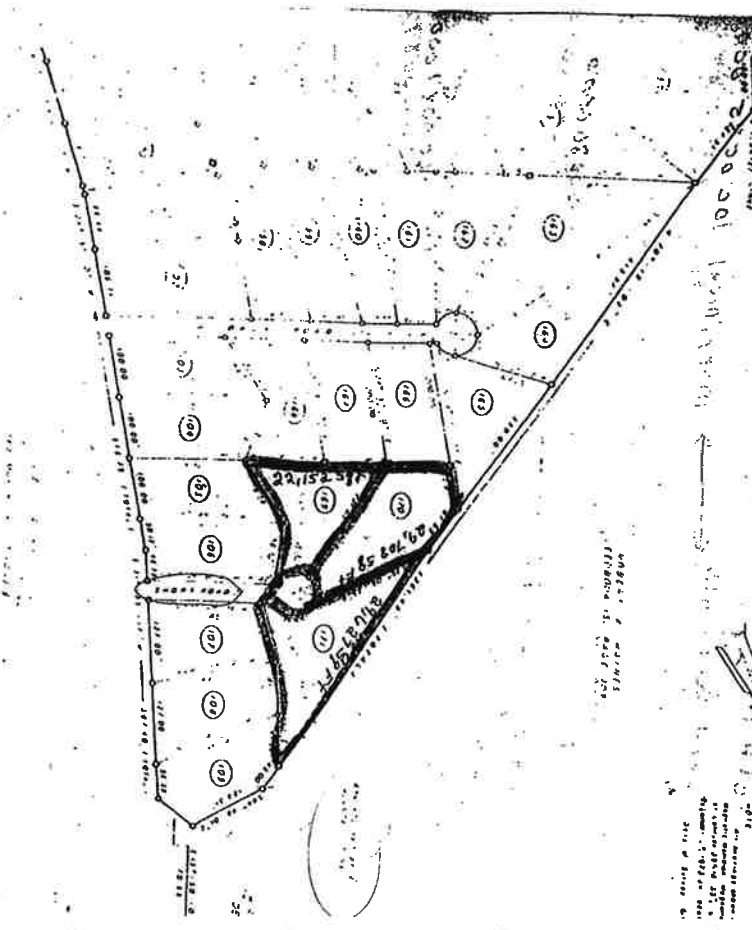
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WV STATE DEPARTMENT OF HEALTH
Office of Environmental Health Services
ENVIRONMENTAL ENGINEERING DIVISION

WELL COMPLETION REPORT

Date: 11-22-02 County: Hampshire Permit #: DW-14-03-73
 Town: Augusta Area Name/Location: AA Rodgers Rd., Right on Ridge View Rd.
 Well Owner: M & W Associates Address: HC 71 Box 44
Augusta, WV 26704
 Telephone Number: Christophe Welford Address: P. O. Box 952
Comney, WV 26757
 Telephone Number: 822-4092

DEPTH IN FEET	ROCKATIONS, KIND, THICKNESS, AND IF WATER BEARING	REMARKS: Pressure Grouted
0-2	Sft. Diet, Loose Rocks	Type of Well: <u>D/W</u> Drilling Method: <u>Air Percussion</u>
2-20	Brown Sandstone	Well Diameter: <u>6 1/4"</u> Casing O.D.: <u>5 5/8"</u>
20-28	Lt. Brown Shale	Well Depth: <u>220</u> Date Completed: <u>11-21-02</u>
28-80	Gray Shale	CASING: Length <u>40</u> Feet Height above ground <u>1</u> Feet
80-94	Red Shale	☒ Steel ☐ Plastic ☐ Cast Iron
94-120	Gray Shale	Other _____ Type _____
20-190	Gray Sandstone	
190-200	Red Sandstone	
200-220	Gray Sandstone	
	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)	40		
Pumping Rate (GPM)	75		
Pumping Level (ft. Below Grade)	21.8		
Duration of Test (in Hours)	2		
Recovery Time to Static Level (in Hours)	1		

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.

Name: Christophe Welford 574
 Registering Business Name: Miller Bros. Drilling Certification No.
Christophe Welford 11-22-02
 Signed: _____ Date

7/98
ACTION TO BE
TAKEN ON TYPE

Lot # 190

STATE OF WEST VIRGINIA
HEALTH DEPARTMENT
ON-SITE SEWAGE DISPOSAL SYSTEM
INSPECTION FORM

Permit No.: ST-14-03-63
Tax Map: Parcel #:
County Road:

County: Hancock

Name of Owner: Ray McBride
Address: Rt 71 Box 44 Augusta WV 26704
Property Location: Golden Acres R.O. 26704
Type of Facility: Residential Facility is: New (N) Existing (E) Lot Size: 29708 Sq. Ft./Acres
Design Loading in gpd/No. Bedrooms: 3 Source of Water Supply: Well

SEWAGE TANK COMPONENT

Capacity in Gallons: 1000 Material: Concrete Manufacturer: JCI
Distances in feet of Tank to: Dwelling: N/A Private (N) Public () Water Source: 50' Property Line: 10'

ON-SITE DISPOSAL SYSTEM

Class I System: Standard Soil Absorption Trenches () or Bed () Gravelless Pipe (), Diameter: _____ Inches
Chamber Soil Absorption Trenches (X) or Bed ()
Class II System: Pumped/Loaded Soil Absorption Trenches () or Bed () Evapotranspiration Trenches () or Bed ()
Shallow Soil Absorption Trenches () or Bed () Other: _____

No. of Lines: 4 Length (in feet) of Each: 60, 60, 60, 60, _____
Width of Trenches: 36 _____ inches/feet Depth to Bottom of Field: 36 _____ inches
If Bed, Dimensions (in feet): _____ No. of Units: 40

Approved and Adequate Materials Used? Yes () No () Size Equals to: 200 Square Feet of Standard Gravel Field.
Distances (in feet) of System to: Dwelling: N/A Private (N) Public () Water Source: 100' Property Line: 10'
Remarks: No Home Yet

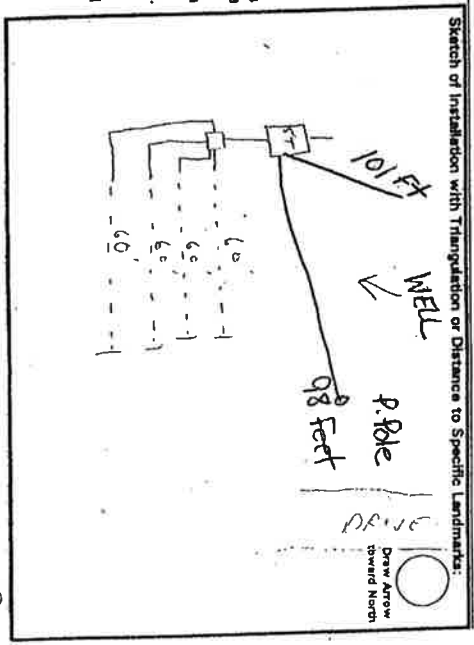
An inspection indicates that the sewage disposal system described above

DOES MEET (X),
DOES NOT MEET (),
CANNOT BE DETERMINED TO MEET () the minimum standards established by the West Virginia Bureau of Public Health.

To correct a health hazard, modifications to existing systems may be done to improve part of a system. Such modifications may not be able to be designated as a sewer system since inadequate information is known.

Although many factors contribute to the successful functioning of a sewage disposal system, this office recommends water conservation and siting an even usage of water throughout the week.

Visit Date(s): 9/3/02



11 02 22