

WV Department of Health and Human Resources
Bureau of Public Health
Office of Environmental Health Services
ENVIRONMENTAL ENGINEERING DIVISION

Hampshire SW258
10/01

JAN 9 2006

G. Miller

WELL COMPLETION REPORT

Date(s) 1-28-05 County Hampshire Permit #: DW-14-05-088
Town: Slanesville Area Name/Location Latigo Run 4
Well Owner: Randal & Jeffrey Miller Address: P. O. Box 952
Telephone Number: 822-4092 Romney, WV 26757
Well Driller: Jeffrey Miller Address: P. O. Box 952
Telephone Number: 822-4092 Romney, WV 26757

WELL LOG

DEPTH IN FEET	FORMATIONS: KIND, THICKNESS, AND IF WATER BEARING	REMARKS: Pressure Grouted
0-18	Yellow Shale	Type of Well: <u>D/W</u> Drilling Method: <u>Air Percussion</u>
18-29	Brown Shale	Well Diameter: <u>6 1/8"</u> Casing O.D.: <u>6 5/8"</u>
29-44	Red Shale	Well Depth: <u>240</u> Date Completed: <u>1-20-05</u>
44-50	Gray Shale (Cons)	CASING: Length <u>60</u> Feet Height above ground <u>1</u> Feet
50-75	Lt. Blue Shale	☒ Steel ☐ Plastic ☐ Cast Iron
75-88	Red Shale	Other _____ Type _____
88-240	Lt. Blue Shale	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>40</u>		
Pumping Rate (GPM)	<u>70</u>		
Pumping Level (Ft. Below Grade)	<u>215</u>		
Duration of Test (In Hours)	<u>2</u>		
Recovery Time to Static Level (In Hours)	<u>5</u>		

WELL HEAD

Pitless Adapter: Type, Make, Etc. _____
Well Cap: Type, Make, Etc. Royer W71" Conduit
Well Seal: Type, Make, Etc. _____
Well Platform:
Length _____ Width _____ Thickness _____
Pressure
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.

Jeffrey Miller 255
Name _____ Certification No. _____
Registered Business Name MILLER Bros. Drilling
Signed Jeffrey Miller Date 1-20-05



Hampshire County Health Department
HC 71, Box 9
Augusta, WV 26704
(304) 496-9640 Fax: (304) 496-9650

Date September 30, 2004

Hampshire County Planning Commission
66 North High Street
Romney, WV 26757

Dear Sirs;

This office has reviewed a plat of survey for Randal and Jeffrey Miller to create Latigo Run subdivision located on Sol Shanholtz Road, and further referenced as Gore District, Tax Map 05-031, Parcel 005, and Tax Map 05-020, Parcel 035, Deed book 434, Page 183, and Deed book 408, Page 552. This subdivision contains 171.16 acres which is divided into 8 lots. All lots require a percolation test and 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 CSR 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 September 30, 2004 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 a 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 "Jim Kinder".

Jim Kinder R.S.

cc: Randal and Jeffrey Miller

ES-76

WEST VIRGINIA
SUBDIVISION APPROVAL APPLICATION FORM
Hampshire Co. HEALTH DEPARTMENT

I. GENERAL INFORMATION		
Name of Applicant	<u>Randal & Jeffrey Miller</u>	County <u>Hampshire</u>
Mailing Address	<u>P.O. Box 952</u>	Phone <u>822-4092</u>
Property Owner	<u>SAME DEED Book 408 p. 552 Address</u>	
Deed Recorded in Book	<u>434</u> Page <u>183</u>	County of <u>Hampshire</u>
Location of Property (be specific - map may be attached) <u>Rt 50 W to Soc. Shanholtz Rd, go 4 miles, new sub on Rgt.</u>		
<u>GORE DISTRICT</u>		
<u>Tax Map # 05-031-005 + 05-020-035</u> <u>121.168</u>		
Total Acreage of Tract	<u>See Back</u>	Total Acreage to be Developed <u>170 Acres</u>
Number of Lots to be Developed	<u>8</u>	Drinking Water Source <u>Wells</u>
Type of Structures to be Constructed <u>Houses</u>		
Have any previous subdivision approvals or declaratory rulings been issued on this tract or adjacent tracts? Yes <u> </u> No <u> </u>		
(If yes, give details) <u> </u>		
Signature of Applicant <u>[Signature]</u>		Date <u>9-27-04</u>
II. CHECK LIST		
Four (4) copies each of the following must accompany this application form.		
☐ Plat plan of property (show lot layout, lot dimensions, lot numbers, streets, location of percolation test holes and six foot test holes, location of wells and public water lines, location of 10,000 square foot reserve area).		
☒ Percolation tests and six foot hole tests report sheet.		
☒ Soil Conservation Service report (contact your local SCS office).		
*In addition, a site visit of the proposed subdivision must be made by the appropriate Health Department representative prior to permit issuance.		
III. FOR HEALTH DEPARTMENT USE ONLY		
Approval Issued <u> </u>	Denied <u> </u>	Date <u>9-30-04</u>
By <u>[Signature]</u>	Approval Number <u> </u>	

Received 9-28-04

Receipt #5848

(Attach additional pages if needed)