

WELL COMPLETION REPORT










WELL LOG

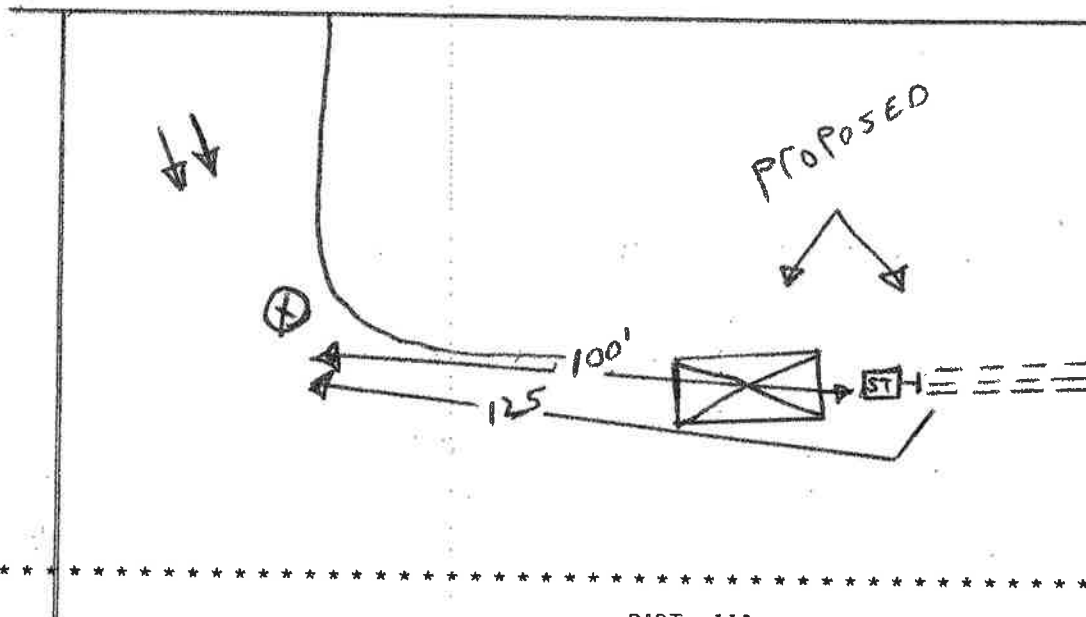
PUMPING OR BAILING TEST

WELL HEAD

Name	B. Mark Smith	#001
Registered Business Name	B.W. Smith Well Drilling	Certification No.
Signed	Benjamin Mark Smith	8/30/94
Date		

Please draw a sketch of the property showing existing or proposed well location, location of structures, existing or proposed sewage systems within 200 feet of well location, slope of site and lot dimensions. Locate animal pens, barnyards or any other factors which can be a possible source of contamination for the water supply.

	House		Water Supply		Percolation Test Site
	Soil Absorption Line		Dir. of Ground Slope		Property Line
	Trees		Septic Tank		Mobilehome



PART III SEWAGE DISPOSAL SYSTEM INFORMATION

☐ Install ☐ Modify

☐ Septic Tank ☐ Absorption Field ☐ Holding Tank ☐ Pit Privy ☐ Vault Privy

☐ Chemical/Composting Toilet ☐ Alternate System (attach detailed plans)

Other _____

DESCRIPTION OF PROPOSED SYSTEM:

Septic Tank: Capacity _____ Material _____ Nearest Prop. Line _____

Absorption Field: _____ Sq. ft. with _____ lines and _____ long

Pipe ASTM No. _____ Nearest Property Line _____

Type of Water Supply: _____ Area Suitable for Absorption Field: _____ Sq. ft.

Six-foot hole free of water or solid rock? ☐ Yes ☐ No

PERCOLATION TEST:

TEST HOLE: #1 _____ #2 _____ #3 _____ #4 _____

minutes minutes minutes minutes

Total minutes _____, divided by 24 = _____ average time for water to fall one inch.

Test done on _____ (date) using approved procedures outlined in the Design Standards.

Signed: _____

Signature of Installer

Certification No.

Date

SS-177
Revised 1-71WEST VIRGINIA
SEPTIC TANK INSPECTION FORM

Hampshire Health Department Installation Permit No. ST-14-95-05
 Name of Owner William and Shirley Shupe
 Address P.O. Box 59 Mannsville, Md.
 Property Address off Little Capon River Rd, turn into Capon Mtn. Rd. to right 1st gate River Rd.
 DESCRIPTION & NUMBER OF UNITS SERVED to Lot 41 on right
 Type Facility Served none No. Water Closets —
 Lot Size 5.12 sq. ft. Area suitable for sewage disposal installation — sq. ft.
 Source of Water Supply well No. Lavatories —
 No. Bedrooms 3 No. Showers or Tubs — No. Baths —
 No. Garbage Grinders — No. Automatic Washers 1

SEPTIC TANK

Material precast concrete Length — x Width — x Depth — = — cubic feet
 Liquid Depth — ft. Liquid Capacity 1000 gal.
 Distance to: Dwelling 20' Water Supply 100' Nearest Property Line 115'

SOIL ABSORPTION SYSTEM

Type Drain Line Material flexible Trench Width 24" Inches
 Trench Depth 30' Inches Total Absorption area in Trench Bottom 900 sq. ft.
 Diameter of Drain Line 10' Inches Type Filter Media none
 No. of Drain Lines 3 Depth Filter Media Under Drain Line — Inches
 Length of Each Line 100, 100, 100, ft. Depth Filter Media Over Drain Line — in
 Distance of Disposal Field to: (a) Dwelling 30'
 (b) Water Supply 12 (c) Nearest Property Line 45

An inspection of the septic tank system described herein disclosed that said system (MEETS, DOES NOT MEET) the minimum standards established by the West Virginia State Department of Health.

1-11-95
Date

J. J. Kunder
Sanitarian

SKETCH OF SYSTEM TO BE DRAWN ON BACK

Note: Copy of this inspection report must be given to owner and the original filed in the Health Department files. PERMANENT RECORD - DO NOT DESTROY.

