

SS 177, 7/96

## STATE OF WEST VIRGINIA

INSPECTION TO BE  
PRINTED OR TYPED

## HEALTH DEPARTMENT

Permit No.: ST-14-00-364ON-SITE SEWAGE DISPOSAL SYSTEM  
INSPECTION FORM

Tax Map: \_\_\_\_\_ Parcel #: \_\_\_\_\_

County: Hampshire

County Road: \_\_\_\_\_

Name of Owner: James JohnsonInstaller: Orval L WilsonAddress: 2200 Pennis AveSilver Spring Md 20902Property Location: Buffala Ridgelot # 79Type of Facility: HOUSEFacility is: New ( ☒ ) Existing ( )Lot Size: 2 Sq.-Ft./AcresDesign Loading in gpd/No. Bedrooms: 2 BRSource of Water Supply: well

## SEWAGE TANK COMPONENT

Capacity in Gallons: 1000Material: ConcreteManufacturer: J & LDistances (in feet) of Tank to: Dwelling: 16Private ( ☒ ) / Public ( )Water Source: 165Property Line: 80

## ON-SITE DISPOSAL SYSTEM

Class I Systems: Standard Soil Absorption Trenches ( ) or Bed ( ) Gravelless Pipe ( ), Diameter: \_\_\_\_\_ Inches  
Chamber Soil Absorption Trenches ( ☒ ) or Bed ( )Class II Systems: Pumped/Dosed Soil Absorption Trenches ( ) or Bed ( ) Evapotranspiration Trenches ( ) or Bed ( )  
Shallow Soil Absorption Trenches ( ) or Bed ( ) Other: \_\_\_\_\_No. of Lines: 3 Length (in feet) of Each: 60, 60, 60Width of Trenches: 36 inches/foot Depth to Bottom of Field: 36 inches

If Bed, Dimensions (in Feet): \_\_\_\_\_

If Chamber System, Name: INFILTRATOR No. of Units: 30Approved and Adequate Materials Used? Yes ( ☒ ) No ( ) Size Equates to: 900 Square Feet of Standard Gravel Field.Distances (in feet) of System to: Dwelling: 32Private ( ☒ ) / Public ( )Water Source: \_\_\_\_\_ Property Line: 10

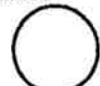
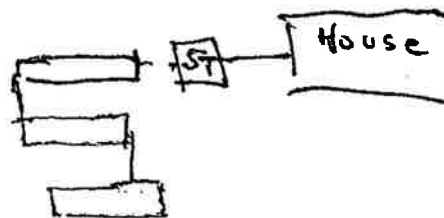
Remarks: \_\_\_\_\_

An inspection indicates that the sewage disposal system described above **DOES MEET** ( ☒ ), **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 **does meet** 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 maintaining an even usage of water throughout the week.

## Sketch of Installation with Triangulation or Distance to Specific Landmarks:

Draw Arrow  
toward NorthVisit Date(s): 5-12-00Final Inspection Date: 5-25-00Sanitarian: J. K. Linder

5-400

SW258

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

**WELL COMPLETION REPORT**

Date(s) 4/21/00 County Hampshire Permit #: DW-14-00-279  
 Town: Capon Bride Area Name/Location Buffalo Ridge Ranchetts Lot 74  
 Well Owner: James B. Johnson Address: 2200 Dennis Ave.  
 Telephone Number: 301-681-6330 Silver Spring, MD 20902  
 Well Driller: Jeffrey G. Miller Address: P. O. Box 412  
 Telephone Number: 496-9972 Shanks, WV 26761

**WELL LOG**

| DEPTH IN FEET | FORMATIONS:<br>KIND, THICKNESS, AND IF WATER BEARING | REMARKS: <u>Pressure Grouted</u>                                                                              |
|---------------|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 0-2           | Dirt                                                 | Type of Well: <u>D/W</u> Drilling Method: <u>Air Percussion</u>                                               |
| 2-10          | Lt. Brown Sandstone                                  | Well Diameter: <u>6 1/4"</u> Casing O.D.: <u>6 5/8"</u>                                                       |
| 10-40         | Brown Clay                                           | Well Depth: <u>540</u> Date Completed: <u>4/21/00</u>                                                         |
| 40-95         | Yellow Clay                                          | CASING: Length <u>150</u> Feet Height above ground <u>1</u> Feet                                              |
| 95-115        | Lt. Brown & Blue Shale                               | <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Plastic <input type="checkbox"/> Cast Iron |
| 115-163       | Blue Limestone                                       | Other _____ Type _____                                                                                        |
| 163-308       | Gray Sandstone                                       |                                                                                                               |
| 308-495       | Lt. Blue Shale                                       | <b>SCREEN</b>                                                                                                 |
| 495-540       | White Sandstone                                      | <input checked="" type="checkbox"/> 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)     | 290   |    |    |
| Pumping Rate (GPM)                       | 1 1/2 |    |    |
| Pumping Level (Ft Below Grade)           | 538   |    |    |
| Duration of Test (In Hours)              | 2     |    |    |
| Recovery Time to Static Level (In Hours) | 41    |    |    |

**WELL HEAD**

Pitless Adapter: Type, Make, Etc. \_\_\_\_\_  
 Well Cap: Type, Make, Etc. Royer Conduit Type  
 Well Seal: Type, Make, Etc. \_\_\_\_\_  
 Well Platform: \_\_\_\_\_  
 Length \_\_\_\_\_ Width \_\_\_\_\_ Thickness \_\_\_\_\_  
 Grouting: ☒ Yes ☐ No  
 All Public Water Supplies must be grouted.

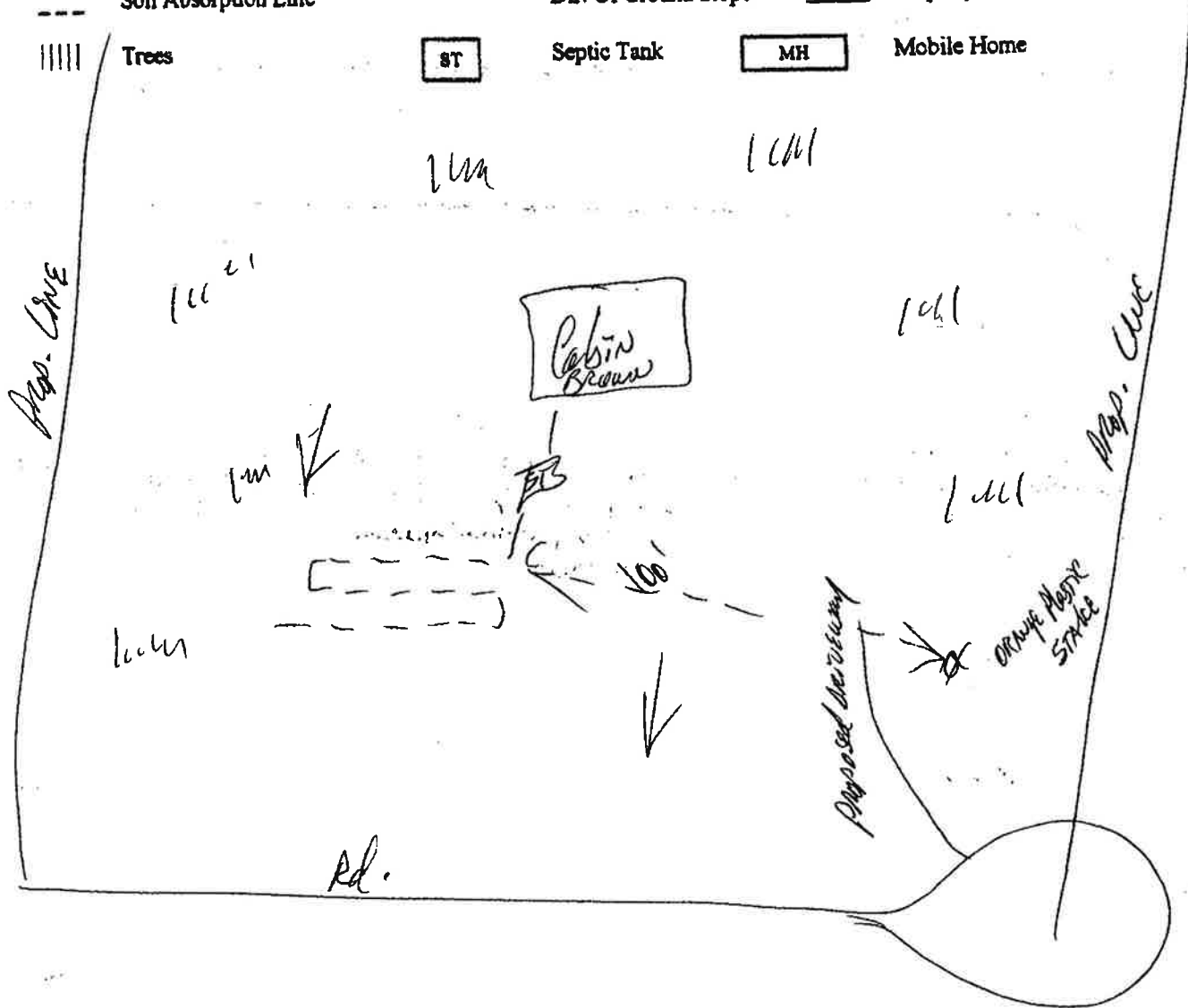
I hereby certify that this well was drilled and constructed under my supervision, in compliance with all requirements of the referenced permit, and that this record is true to the best of my knowledge and belief.

255

Name Jeffrey G. Miller Certification No. \_\_\_\_\_  
 Registered Business Name Miller Bros. Drilling  
 Signed Jeffrey G. Miller Date 5/1/00

Please draw a sketch of the property showing existing or proposed well with locations, and distance to structures, existing or proposed sewage systems within 200 feet of well location, slope of site and lot dimensions. Locate and show distances to 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      [ST] Septic Tank      [MH] Mobile Home



FOR HEALTH DEPARTMENT USE ONLY:

COUNTY: \_\_\_\_\_

Date Received: 3-28-00

Coordinates: N \_\_\_\_\_ W \_\_\_\_\_

Date Evaluated: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date fee paid: \_\_\_\_\_