

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

SW258

WELL COMPLETION REPORT

Date(s) 10/11/06 County Hardy Permit # OW1606069  
Town \_\_\_\_\_ Area Name/Location Last River Bluffs  
Well Owner Timothy Gant Address: 700 Tereyton Rd Bunker Hill  
Telephone Number 304 839 2416 WV 25413  
Well Driller BWSmith W Drilling Address PO Box 440  
Telephone Number 304 496 9977 Springfield WV 26753

WELL LOG

DEPTH IN FEET	FORMATIONS KIND THICKNESS AND IF WATER BEARING	REMARKS
0-40	Brown Shale	Drive Shoe Rotary Type of Well: <u>Domestic</u> Drilling Method: <u>DTIT</u> Well Diameter <u>6 1/8</u> Casing O.D. <u>6 5/8</u> Well Depth <u>340</u> Date Completed: <u>10/11/06</u> CASING: Length <u>100</u> Feet Height above ground <u>1</u> Feet <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Plastic <input type="checkbox"/> Cast Iron Other _____ Type _____
<del>40-80</del>	Brown Shale & Sand Rock	
80-100	Blue stone	
101-200	Blue stone	
201-269	Hard Blue stone Blue & Sand Rock	
270	Water	SCREEN <input checked="" type="checkbox"/> None Installed Type _____ Diameter _____ Slot/Gauge _____ Length _____ Set Between _____ Ft and _____ Ft
271-370	Hard Blue stone	
311-	Water	
312-340	Hard Blue Stone	

PUMPING OR BAILING TEST

DETAILS	#1	#2	#3
Static Water Level (Ft Below Grade)	<u>230</u>		
Pumping Rate (GPM)	<u>25</u>		
Pumping Level (Ft Below Grade)	<u>340</u>		
Duration of Test (In Hours)	<u>1</u>		
Recovery Time to Static Level (In Hours)	<u>1</u>		

WELL HEAD

Pitless Adapter Type, Make, Etc \_\_\_\_\_  
Well Cap Type, Make, Etc \_\_\_\_\_  
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.

B. MARK SMITH 001  
Name BWS. SMITH WELL DRILLING Certification No.  
Registered Business Name  
Signed \_\_\_\_\_ Date 10-11-06

## STATE OF WEST VIRGINIA

INSPECTION TO BE  
PRINTED OR TYPED

Hardy County HEALTH DEPARTMENT

ON-SITE SEWAGE DISPOSAL SYSTEM  
INSPECTION FORM

Permit No.: ST-16-06-032

Tax Map: Parcel #:

County Road:

County: Hardy

Name of Owner: TIMOTHY AND Sharon Gant Installer: MEADE'S SPECIAL SERVICES

Address: 70 TONYTOWN Rd. BUNKERHILL WV 25413

Property Location: LOT # 12 Lost River Bluffs Subdivision, MARTINS WV

Type of Facility: NEW HOME Facility is: New ☒ Existing ( ) Lot Size: 18.0 Sq.-Ft./Acres

Design Loading in gpd/No. Bedrooms: 3BDRM Source of Water Supply: Proposed well

## SEWAGE TANK COMPONENT

Capacity in Gallons: 1000 Material: CONCRETE Manufacturer: JOLI

Distances (in feet) of Tank to: Dwelling: Private ☒/Public ( ) Water Source: 50' Property Line: 100'

## 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: 80, 80, 80, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Width of Trenches: 18.36 inches/feet Depth to Bottom of Field: 18.36 inches

If Bed, Dimensions (in Feet): \_\_\_\_\_ If Chamber System, Name: INFILTRATOR, No. of Units: 60

Approved and Adequate Materials Used? Yes ☒ No ( ) Size Equates to: 1200 Square Feet of Standard Gravel Field.Distances (in feet) of System to: Dwelling: 115' Private ☒/Public ( ) Water Source: 150' Property Line: 100'Remarks: DISTANCE FROM TANK TO DWELLING LEFT BLANK BECAUSE HOME WAS NOT ON  
LOCATION AT TIME OF SEPTIC INSPECTION.

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:

38° 57' 27.334 NORTH > TANK COORDINATES  
78° 53' 16.583 WEST

Draw Arrow  
toward North

Visit Date(s): MARCH 16, 2006

Final Inspection Date: MAY 23, 2006

Sanitarian: William Ows / Sant.

